MEETING NOTICE

Consumer Protection Committee
January 10, 2007
9:00 a.m. – 12:00 p.m.
Department of Consumer Affairs
1625 N Market Boulevard
El Dorado Room – Second Floor
Sacramento, CA 95834
(916) 574-3000

I. Introductions

II. Review and Approve September 20, 2006 Consumer Protection Committee Meeting Minutes

III. Strategic Plan Goal #3 – Promote Higher Professional Standards Through Rigorous Enforcement and Public Policy Changes - Report on Progress


B. Objective 3.2 -- Establish a Standard to Measure Quality of Continuing Education by June 30, 2007.


D. Objective 3.4 – Advocate for Five Laws that Protect the Privacy of Client/Therapist Relationships by December 31, 2010.

E. Objective 3.5 – Provide Four Educational Opportunities for Division of Investigation (DOI) and The Office of the Attorney General (AG) Regarding the Board of Behavioral Sciences (BBS) and It’s Licensees by June 30, 2008

F. Objective 3.6 – Reduce time in which BBS cases are investigated and processed by DOI and AG by 30% by June 30, 2010.

G. Objective 3.7 – Complete Annual Review of Examination Program and Report the Results at a Public Meeting.

IV. Discussion and Possible Action to Create a Retired License Status for Marriage and Family Therapists (MFT), Licensed Clinical Social Workers (LCSW) and Licensed Educational Psychologists (LEP).
V. Discussion and Possible Action to Standardize the Exempt Settings Across the MFT and LCSW Practice Acts

VI. Discussion and Possible Action to Revise Continuing Education Exception Criteria for MFT and LCSW License Renewals

VII. Review Supervisor Responsibility Statements

VIII. Discuss Marriage and Family Therapists Utilizing Biofeedback in Therapy

IX. Review Enforcement Program Statistics

X. Review Draft Candidate Bill of Rights

XI. Presentation by Lindle Hatton of Hatton Management Consultants Regarding Strategic Planning Process.

XII. Discuss Future Meeting Dates and Agenda Topics

Adjournment

Public Comment on items of discussion will be taken during each item. The Chairperson will determine time limitations. Due to the convenience of the presenters, items may be heard out of the order listed on the Agenda. Times are approximate and subject to change. Action may be taken on any item listed on the Agenda.

* -- The Communications Committee would ordinarily consider these items. Due to the small number of board members currently appointed, this committee will consider the items until sufficient board members are appointed to allow further appointments to the Communications Committee.

THIS AGENDA AS WELL AS BOARD MEETING MINUTES CAN BE FOUND ON THE BOARD OF BEHAVIORAL SCIENCES WEBSITE AT www.bbs.ca.gov

NOTICE: The meeting facilities are accessible to persons with disabilities. Please make requests for accommodations to the attention of Christina Kitamura at the Board of Behavioral Sciences, 1625 N. Market Boulevard, Suite S-200, Sacramento, CA 95834, or by phone at 916-574-7835, no later than one week prior to the meeting. If you have any questions please contact the Board at (916) 574-7830.
State of California
Board of Behavioral Sciences

Memorandum

To: Consumer Protection Committee          Date: January 10, 2007

From: Mona C. Maggio                      Telephone: (916) 574-7841
       Assistant Executive Officer

Subject: Agenda Item I - Introduction

The Consumer Protection Committee is one of the committees formed as part of a reorganization of the Board. Each of the Board committees now has express responsibility for overseeing specific goals in the strategic plan recently adopted by the Board as well as a general jurisdiction.

The Consumer Protection Committee is responsible for Goal #3 in the Strategic Plan – Promote Higher Professional Standards Through Rigorous Enforcement and Public Policy Changes.

Judy Johnson Committee Chair will introduce the Consumer Protection Committee Members and ask audience members to introduce themselves.

Consumer Protection Committee

Chair – Judy Johnson, LEP
Howard Stein
Joan Walmsley, LCSW
The Committee is asked to review and approve the minutes of the September 20, 2006 Consumer Protection Committee Meeting. (Attachment A)
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I. Introductions
The meeting was called to order at 9:38 a.m. Judy Johnson, Chair welcomed the Committee Members, staff and members of the audience. Ms. Johnson explained that the Board lost three board members due to the expiration of their appointments; therefore, the Communications Committee was realigned with the Consumer Protection Committee. Once additional board members are appointed to the Board, the Communications Committee will be reappointed.

Mona Maggio called roll and a quorum was established.

Committee Members Present
Judy Johnson, Chair
Howard Stein
Joan Walmsley

Committee Member Absent
D’Karla Leach

Staff Present:
Paul Riches, Executive Officer
Mona Maggio, Assistant Executive Officer
George Ritter, Legal Counsel
Christy Berger
Justin Sotelo
Sean O’Connor

II. Review and Approve April 17, 2006 Consumer Protection Committee Meeting Minutes
Joan Walmsley commented that the minutes were thorough. Howard Stein requested that future meeting agendas include the telephone number of the meeting location.

Joan Walmsley moved and Howard Stein seconded, for the Committee to approve the minutes of the April 17, 2006 Committee Meeting. Approval was unanimous.

III. Strategic Plan Goal #3 – Promote Higher Professional Standards Through Rigorous Enforcement and Public Policy Changes - Report on Progress
The Committee reviewed the progress on the following strategic plan objectives; however no comments were received.

Objective 3.2 -- Establish a Standard to Measure Quality of Continuing Education by June 30, 2007.

Objective 3.3 -- Complete 12 Substantive Changes in Laws and Regulations by January 1, 2008.

Objective 3.4 -- Advocate for Five Laws that Protect the Privacy of Client/Therapist Relationships by December 31, 2010.

Objective 3.5 – Provide Four Educational Opportunities for Division of Investigation (DOI) and The Office of the Attorney General (AG) Regarding the Board of Behavioral Sciences (BBS) and Its Licensees by June 30, 2008.

Objective 3.6 – Reduce time in which BBS cases are investigated and processed by DOI and AG by 30% by June 30, 2010.

Objective 3.7 – Complete Annual Review of Examination Program and Report the Results at a Public Meeting

IV. Discuss Letter from the Association of Social Work Boards (ASWB) Inviting California Participation in the National Examination for Social Workers

Christy Berger explained that in February 2006, the Board received a letter from Roger A. Kryzanek, MSW, LCSW, and President of the Association of Social Work Boards (ASWB). The purpose of Mr. Kryzanek’s letter is to ask the Board to consider rejoining the ASWB and to require candidates for clinical social work licensure to take the ASWB’s national examination. Mr. Kryzanek extended an offer to come to a Board meeting to give a presentation on the ASWB and the examination process.

Ms. Berger provided the following historical background on the Board’s relationship with ASWB. She explained that the Board was a member of ASWB from October 1991 through March 1999, and required the ASWB Clinical Level Examination, along with a state-constructed oral examination for licensure of clinical social workers in California. Ms. Berger explained that around 1998 the Board and the Department of Consumer Affairs, Office of Examination Resources (OER) began having concerns regarding the ASWB examination. The concerns included: 1) The practice analysis conducted by ASWB did not include a representative number of licensees in California, just 16 participants; 2) The sampling of participants in the practice analysis did not include demographics representative of California’s population; and 3) The pass rate for California’s first time examination participants was high at 89%. Based on these concerns, and the results of a new California occupational analysis, the Board determined that there was a need for a state constructed written examination. The new California written examination was administered beginning in late Spring of 1999.

Ms. Berger reported that presently, ASWB is comprised of social work regulatory boards in 49 states, the District of Columbia, the Virgin Islands, and seven Canadian provinces. Currently, California is the only state that is not a member of ASWB and not participating in its examination program. ASWB contracts with ACT, Inc. to administer its examinations at test centers on or near college campuses, and also for psychometric and other support services. ASWB conducted its last occupational analysis in 2003 which included 75 surveys retuned by California social workers, 2.1% of the total responses.
ASWB has five examination categories for social work, each consisting of 170 items (including 20 pre-test items). All examinations are administered over a four-hour period and cost the candidate $175:

- **Associate** – Appropriate for paraprofessional social workers. This level uses the Bachelor's examination with a lower pass point.
- **Bachelors** – Appropriate for those who hold a Bachelor's degree in Social Work.
- **Masters** – Appropriate for those who hold a Master's degree in Social Work (MSW).
- **Advanced Generalist** – Appropriate for those who hold a MSW with a minimum of two years of post-degree experience in non-clinical practice.
- **Clinical** – Appropriate for those who hold an MSW with a minimum of two years of post-degree experience in clinical practice. This would be the examination evaluated for possible use in California for LCSWs.

Ms. Berger stated that before considering whether or not to rejoin ASWB and requiring candidates for clinical social work licensure to take ASWB’s national examination, an in-depth comparison and analysis of the examinations as well as examination policies and procedures would need to be conducted to determine if the ASWB examination meets California standards for examination development.

Ms. Berger pointed out that participation in the national examination would increase license portability both in and out of California and membership in ASWB would give California a vote and voice on national social work issues.

Ms. Walmsley reported that she met Mr. Kryzanek in Washington D.C., while attending the National Association of Social Workers (NASW) Conference in September 2006. Ms. Walmsley expressed her concerns regarding confidentiality and examination security. She explained that subject matter experts/examination item writers develop examination questions at home and then mail the questions back to ASWB, unlike the Board’s examination development process which is done at OER in the confines of a secure environment with the guidance of a psychometrician. No examination development is done outside the confines of OER.

Mr. Riches further defined the thorough audit that would be necessary before considering joining ASWB. He also noted that anyone licensed in another state that wished to practice in California would need to take and pass the clinical vignette (CV) examination prior to obtaining a license. Ms. Walmsley believes a qualified clinician would not have a problem passing the CV examination.

Ms. Walmsley voiced she is concerned that the selection of exam item writers might be too lax. She expressed an interest in reviewing the criteria used by ASWB for selecting item writers and Subject Matter Experts (SMEs).

Ms. Johnson believes further investigation is necessary. With the passage of Proposition 63 more social workers will be coming to California to work. There is also the benefit of networking between professionals.

Dr. Howard Stein commented that the Board should take a hard look at the exam process used by ASWB.

Mr. Janlee Wong, Executive Director of NASW California, commented that the ASWB examination and the pass rate have changed since the Board was a member. Mr. Wong believes it is important for the Board to analyze the exam. He explained that other services such as continuing education are included in the ASWB. The ASWB has legal litigation services, a
resource to gain information in case of a lawsuit. Mr. Wong supports the idea of inviting Mr. Kryzanek to present to the Board.

Ms. Walmsley commented that there is a large difference in how boards function in different states. Mr. Riches concurred stating that boards are sometimes very different than BBS. Ms. Walmsley and Ms. Johnson both commented that looking at other state boards’ licensing requirements could help all parties involved.

Mr. Wong commented that licensure portability would be beneficial in natural disasters that require mental health services. He cited Hurricane Katrina as an example.

Ms. Walmsley requested staff to investigate what happens when a licensee moves to another state. She asked if other states accept California’s license as direct reciprocal.

Mr. Wong responded that ASWB might already have such information.

Ms. Johnson stated she is interested in seeing what ASWB requires in terms of candidates for whom English is a second language.

Ms. Walmsley questioned if the Board were to offer the licensing examinations in languages other than English, how many languages would we consider?

Mr. Riches indicated that staff is currently looking at our English as a Second Language (ESL) policy. Ensuring the exam is the “same” across all languages is a concern.

Dr. Stein mentioned that people go to school in English speaking institutions. If the candidates are receiving their education and degrees in English then they should take the examination in English.

Mary Riemersma, Executive Director for the California Association of Marriage and Family Therapists (CAMFT) commented that 160 languages are spoken in California. This creates problems for anyone trying to develop exams compatible across different languages.

Joan Walmsley moved and Howard Stein seconded, to invite Roger A. Kryzanek to come and give a presentation at a future Board meeting. Approval was unanimous.

V. Multi-Level Licensure of Social Workers

At its January 2006 meeting, the Consumer Protection Committee explored the different types of social work licensure offered in other states. After discussion and input from stakeholders, the Committee directed staff to conduct more research specifically in the areas of child welfare and elder care with reference to other states’ activities and report back at a future meeting.

Ms. Berger explained that staff did investigate child welfare and elder care services. She explained the findings of the research revealed that many jobs in social work do not involve psychotherapy. Thirty-two states offer multi-level licensure and each level of licensure requires a different type of examination. (See Agenda Item IV for additional information on the ASWB examinations). Ms. Berger stated staff is continuing to research and obtain duty statements for county workers who work in the areas of child welfare and elder care to determine their current scope of work, and is researching the scopes of practice for different levels of licensure in other states and will report on the findings at a future meeting of the Committee. Staff also plans to have the ASWB provide information on the different types of social work examinations available.

Ms. Walmsley stated that other states do not allow social workers to call themselves such without having a license.
Mr. Wong explained that title protection could be tied together with multi-level licensure.

Ms. Walmsley commented that some employers require an LCSW even though the job (scope of work) does not require the license.

Mr. Wong commended the Committee for looking at the broader scope of social work. He referenced that 44 children died in foster care last year in Los Angeles County. So to think only people seeking psychotherapy need protection is wrong.

Stephanie Gonzales stated she does not think having a tiered system will change the hiring practices of employers who require the LCSW, even though the job might not involve direct psychotherapy. She commented that title protection is an issue near to her. She is astounded that certain people can call themselves social workers based on the knowledge they possess.

Mr. Riches explained that defining a scope of practice is the first step, next is determining a public protection need. He stated we are not at step one yet.

Ms. Riemersma stated that Marriage and Family Therapists (MFTs) are often hired to function as social workers and could be a casualty to any legislation that secures title protection.

VI. Discuss and Compare Exempt Settings Across the Practice Acts

The LCSW and MFT statutes specify certain types of organizations, referred to as “exempt settings” whose employees are not required to have a license or a registration in order to perform clinical social work or marriage and family therapy within the scope of their employment. When comparing the LCSW and MFT statutes, they have some exempt settings in common, but there are some differences. The MFT statute lists few exemptions and is narrower than the LCSW statute. The Licensed Educational Psychologist (LEP) statute does not specify any exempt settings.

Ms. Berger explained that both MFTs and LCSWs have exempt settings in common, but not all. Concerns include the inconsistency between exempt settings in respect to the different license types.

Ms. Johnson said that for the most part LEPs work in schools and not in institutional settings, and LEPs do not bill insurance companies. Therefore it makes sense not to have exempt settings for LEPs.

Ms. Riemersma commented that perhaps a motion towards consistency in language would be beneficial.

Mr. Riches commented that grades K-12 is not an exempt setting for MFTs, but it is for LCSWs.

Ms. Johnson said that this is especially important as a result of the Mental Health Services Act (MHSA) because more MFTs will be working in K-12 schools.

Mr. Riches expressed that differences in exempt settings should not be there because there are no compelling reasons for variance. Another concern is jurisdictional – the Board cannot investigate a complaint against someone in an exempt setting.

Mr. Wong explained that the implementation of exempt settings for LCSWs came as a result of some people’s problems working in certain settings when LCSW licensure was initially implemented. People working in certain settings did not feel licensure would be necessary.
Joan Walmsley moved and Howard Stein seconded to have staff continue its investigation of normalizing exempt settings and to bring back to the Committee a proposal to align the exempt settings for Marriage and Family Therapists and Licensed Clinical Social Workers. Approval was unanimous.

VII. Propose to Amend Title 16, California Code of Regulations Sections 1887(b), Continuing Education Requirements for Marriage and Family Therapists and Licensed Clinical Social Workers, 1887.2(a), Exceptions From Continuing Education Requirements, and 1887.3(a), Continuing Education Course Requirements

At its April 21, 2006 meeting, the Consumer Protection Committee discussed the distinctions between conventional, self-study, and online continuing education (CE) courses. Currently, licensees are permitted to take an unlimited amount of CE by conventional or online means. However, hours earned through self-study courses are limited to one-third of the total required CE hours. After discussion the Committee decided there was no reason to limit the amount of CE obtained by any one method, and directed staff to bring such a proposal back to the committee.

Ms. Berger explained the draft proposed language would eliminate the self-study limiting language.

Ms. Walmsley believes the limited hours given for home study courses should be retained. She believes that a seven-hour home study course does not take seven hours to complete.

Ms. Johnson stated that the content in a home study course is there; classroom courses are just more engaging. She mentioned that perhaps the quality of a course is something the Board should discuss with the CE providers.

Ms. Riemersma commented that the provider’s quality of CE content is the real issue. If a provider is lacking, they are lacking across the board. She recommended a more conservative approach by suggesting the “self-study” CE option be removed. Ms. Riemersma also recommended retaining the elements (definition) of a self-study course in the language.

Mr. Wong commented that CE is necessary to being a good professional. The opinion changes when one considers how that is delivered. He suggested that limiting the method by which people learn is counterproductive. He suggested sharing in the Board’s newsletter and/or website examples of what might be a good provider.

Howard Stein moved to recommend that some additional minor modifications be incorporated [moving some language from Section 1887(b) to 1887(a) to incorporate the definition of self-study into the definition of a CE course]. By doing so, this deletes the limitations regarding hours of self-study. The Committee recommended that the proposed language go forward to the Board at its November 2006 meeting for review and approval. Judy Johnson seconded the motion. Vote: Howard. Stein and Judy Johnson voted in favor and Joan Walmsley voted to oppose. The motion passed.

VIII. Review Appeals Process for Continuing Education Provider Application Denials and Provider Revocations

Ms. Maggio stated that currently the Board has 2213 approved continuing education providers. To be granted an approval from the Board, a continuing education provider must complete an application, submit course content information, and remit the appropriate fees. If the applicant meets the Board’s criteria a continuing education provider number will be issued.
A provider number expires on the last day of the twenty-fourth month after the approval issue date. To renew an unexpired provider approval, the provider must pay the renewal fee on or before the expiration date of the approval. A provider approval, which is not renewed by the expiration date, may not be renewed, restored, reinstate, or reissued. However, the provider may apply for a new approval.

In fiscal year 2005/06 the Board received 262 provider applications, three were denied. In each of the three cases the applicants were previously issued provider approvals; however, during the process of conducting CE audits of the licensees, it was discovered the previously approved providers had been offering courses after their provider approval had expired.

Ms. Maggio said when a licensee takes a course from a provider whose approval had expired, the licensee is penalized in that the CE course hours are not accepted by the Board. This situation arises during random CE audits. As part of the audit process staff will review the courses completed by a licensee and verify the approval status of each CE provider. When the audit reveals that the CE provider’s approval was expired at the time the licensee took the course, the licensee is notified that he/she must take another course to count towards meeting the CE requirement for license renewal. The provider is notified of the expired status of the approval and is asked to reimburse the licensee(s) for the cost of the course taken while the approval was expired. Since the Board began conducting CE audits, staff has identified a number of instances where this problem has occurred.

Ms. Maggio stated that if an applicant is denied an approval, the applicant may appeal the decision by requesting an informal conference with the Board’s Executive Officer (EO). The informal conference is typically held via a telephone conference. The applicant has an opportunity to submit information for consideration to the EO prior to the conference. If the EO determines to uphold the denial of the application, the applicant may then request an appeal before the Continuing Education Appeals Committee (called a formal appeal for the purpose of clarity). The Board has not had a request for such an appeal.

Ms. Walmsley inquired how a provider might lose a license (revocation), Mr. Riches responded fraud, conviction of a crime substantially related to the approval, and if the provider is also a licensee, then other violations of law may apply.

Mr. Riches stated that auditing providers is a possibility but limited resources prevent staff from conducting such audits as this time. He added that the Board has never really fleshed out the process of disciplining CE providers. Mr. Riches reported that the Policy and Advocacy Committee is considering a delinquency status for CE providers. If approved, the delinquency status for providers would be similar to that of licensees. Once the approval expired the provider would have a set period of time, such as one year in which the provider approval could be renewed by paying the renewal fee and a delinquency fee.

Ms. Johnson noted that this is an important issue to move forward on once the resources are there. Ms. Walmsley concurred. Ms. Walmsley added that involvement with CAMFT and NASW to spread the word about good providers is a helpful tool.

IX. Examination Statistics

The Committee reviewed and discussed the statistical information provided by the Examination Unit.

Mr. Riches explained that staff provides statistics as an informational item for candidates and licensees. The school-by-school breakdown is especially useful.
Mr. Wong asked about the difference in MFT and LCSW examination pass rates. Mr. Riches explained that some MSW students do not have licensure as a goal where as MFT candidates tend to know they will be seeking licensure. Ms. Walmsley concurred with Mr. Riches.

Mr. Riches explained that the bulk of the content of the examination is in diagnostic and psychotherapy. A person with limited experience in this arena will have trouble on the examination. He stated the supervision surveys indicated that MFTs get their experience across a broader scope of work settings.

Robin Emerson of CSCSW commented that at the onset of supervision, the supervisor and supervisee should discuss licensure, especially what type of work experience/settings will prepare the supervisee to take and pass the licensing examination and for licensure. This might even involve suggesting going outside of an employment setting.

Mr. Wong recommended gathering gross aggregate statistics on what areas people tend to fail on the examination.

X. Review Enforcement Program

The Committee reviewed the statistical information provided by the Enforcement Unit.

XI. Review Expert Witness Selection Criteria

Ms. Maggio explained that Expert Witnesses are marriage and family therapist, licensed educational psychologists, and licensed clinical social workers that perform case review for the Board’s Enforcement Program and sometimes testify at administrative hearings. The Expert Witness Program is an impartial professional means by which to evaluate complaints received by the Board against licensees and registrants. Its effectiveness is vital for fulfilling the legislative mandate to protect the California public’s health, safety and welfare.

To ensure that enforcement cases are assigned to the most qualified expert, the Enforcement Unit staff is currently revising the expert guidelines, creating a training manual, and developing a training curriculum for an expert training session. As a first step in improving the expert witness selection criteria, staff developed a questionnaire to aid in identifying the expert’s areas of expertise and forensic experience.

The Committee made the following suggestions to revise the Expertise Questionnaire:
- Ask for the theoretical framework
- Reference the California Association of School Psychologists (CASP) Code of Ethics
- Reference the Code of Ethics for both the American Association of Marriage and Family Therapists (AAMFT) and CAMFT
- Reference CSCSW Code of Ethics

Recess called at 12:00 p.m.

Meeting reconvened at 1:05 p.m.

XII. Review and Discuss Prior Recommendation to the Board to Sponsor Legislation to Add Violations of the Health and Safety Code to the Definition of Unprofessional Conduct

Ms. Berger explained that a proposal was brought before the Board at its May 18, 2006 that would have added a violation of Health and Safety Code (HSC) Section 12311o to the definition of unprofessional conduct in each of the three practice acts. At this meeting, the suggestion was made to instead
Ms. Berger explained that staff is also proposing to add a statute regarding the practice of telemedicine. In 1999, Business and Professions Code Section 2290.5 was amended to require LCSWs and MFTs to comply with the telemedicine statute. The Board has been treating BPC as part of our law even though it is part of the Medical Practice Act. However, it would be difficult for the Board to take enforcement action under a provision that is not directly part of the Board’s law.

Ms. Berger explained that the failure to report abuse of a child, elder, or dependent adult are in the MFT and LCSW regulations, but are not in statute. To have a consistent, cohesive unprofessional conduct law, it is preferable to list all instances of potential unprofessional conduct in one place.

Ms. Riemersma requested that the Board add “willful violation” for consistency with the other violations in the unprofessional conduct statute.

Joan Walmsley moved for the Consumer Protection Committee to recommend that the Board sponsor legislation to amend the unprofessional conduct statutes for marriage and family therapists (BPC sections 4982 and 4992.3, respectively) as follow:

- Delete the regulation for failure to comply with child, elder, or dependent adult abuse reporting requirements and add it to statute.
- Add to statute the failure to comply with Division 106, Part 1, Chapter 1 of the HSC pertaining to release of records
- Add to statute the failure to comply with telemedicine requirements of BPC Section 2290.5
- Make Minor editorial changes.

Amend unprofessional conduct statutes for LEPs (BPC Section 4986.70) as follows:

- Add to statute the failure to comply with Division 106, Part 1, Chapter 1 of the HCS pertaining to release of records.

Howard Stein seconded the motion. Approval was unanimous.

XIII. Review and Approve June 28, 2006 Communications Committee Meeting Minutes

Ms. Walmsley stated that the Board’s efforts to be a more open and receptive organization are being noticed. She is hearing positive comments as she attends conferences and outreach programs on behalf of the Board.

Judy Johnson moved and Howard Stein seconded, for the Committee to approve the minutes of the June 28, 2006 Communications Committee Meeting. Approval was unanimous.

XIV. Strategic Plan Goal #1 – Report on Progress

The Committee reviewed and discussed the following objectives.

A. Objective 1.1 – Provide Six Educational Opportunities for Stakeholders and Staff on BBS Budget by July 30, 2006

Staff has identified this objective as being met.
B. Objective 1.2 -- Distribute a Handbook Outlining Licensing Requirements by December 31, 2006 to 100% of California Schools Offering Qualifying Degrees

Mr. O'Connor has prepared a handbook that is awaiting distribution.

C. Objective 1.3 -- Distribute Consumer Publication Regarding Professions Licensed by the Board by June 30, 2007

D. Objective 1.4 -- Achieve 60% on Customer Service Satisfaction Surveys by June 30, 2008

Surveys are going out as planned. The website survey has been up since June, and August saw the mailing of hard copy surveys.

E. Objective 1.5 -- Participate Four Times Each Year in Mental Health Public Outreach Events Through June 30, 2010

Board representatives attended the NASW and CAMFT annual conferences, and hosted the Cultural Diversity conference.

F. Objective 1.6 -- Review and Revise Website Content Four Times Per Year

Staff updates the website on a weekly basis. Lynne Stiles, Administrative Analyst also ensures each unit reviews content on the website on an ongoing basis.

G. Objective 1.7 – Objective 1.7 Student Outreach

This objective is working well. Ms. Johnson suggested staff contact the California Association of School Psychologists (CASP) to work with the LEP constituent base.

XV. Outreach and Communications Presentation by BP Cubed

Sean O’Connor reported that the Board recently established a contract with the public relations firm BP Cubed. BP Cubed will assist the Board’s staff in creating an effective outreach program, improving customer service, updating current Board publications, creating new publications and developing a Board logo. The service that BP Cubed will provide directly relates to several of the goals identified in the 2005 Strategic Plan, specifically Goal 1 and Goal 4.

Mr. O’Connor introduced Jairo Moncada, the Board’s representative with BP Cubed. Mr. Moncada shared that one of the key themes is to ensure that the work performed by BP Cubed is in sync with what the Board wants to communicate. He provided a brief description of the goals BP Cubed hopes to achieve for the Board, including establishing a clear vision and message for the Board.

Mr. Riches noted that the process is in the early stages. The second year of the contract will see more tactical involvement.

Mr. Wong noted that a key message for the Board is cultural diversity. Ms. Johnson added that revisions to the website will be a great improvement as the website is a valuable tool for the Board’s stakeholders.

XVI. Update on Customer Service Satisfaction Surveys

Ms. Maggio expressed that the overall results of the surveys thus far have rated the customer service received as excellent. However, one concern voiced in the surveys is response time
from the Board. The response time issues stem from several problems in the Board’s telephone system. Justin Sotelo and Sean O’Connor are researching the problems and taking corrective action.

Mr. Riches stated that the survey would be a feedback mechanism for the phone and other problems as well. Mr. Riches added that staff would receive data/results.

Mr. Riches discussed the suspension of administering the clinical vignette examinations due to the problem with the examination time allotted by Thomson Prometric. Due to the increase of pre-test items, the examination time was increased from 90 minutes to 120 minutes. However, the computer system at the test centers only allowed candidates 90 minutes to complete the examination.

Ms. Riemersma voiced that candidates have high levels of anxiety regarding the test process and explained how that is compounded by errors in the administration of the examination.

Mr. Wong echoed Ms. Riemersma’s concerns. He also suggested the Board consider an emergency back up plan. Mr. Riches responded that a back up plan is a possibility, but it will need to be researched. An adaptive exam plan is also a possibility.

Mr. Wong responded that an adaptive exam has other positives as well (i.e. exam integrity).

Gerry Grossman suggested “disaster communication plan” might be necessary.

Mr. Wong recommended that the Board ask Thomson Prometric to post a notice at each test center to inform candidates of the current problems with the administration of the CV examinations. The notice would also provide the candidates with information on how to file a complaint with the Board; a Candidate’s Bill of Rights.

XVII. Review and Discuss Updates to Licensed Clinical Social Work Examination Candidate Handbook

This item was not discussed, as the revisions to the handbook were not completed prior to the meeting.

XVIII. Discuss Future Committee Meeting Agenda Items

The next meeting of the Consumer Protection Committee is scheduled for January 10, 2007, location to be announced. Suggestions for future agenda items were: 1) a discussion on Tarasoff and Ewing decisions and reporting requirements, and 2) to review the Supervisor Responsibility Statement.

Adjournment

Ms. Johnson adjourned the meeting at 2:30 p.m.
State of California
Board of Behavioral Sciences

Memorandum

To: Consumer Protection Committee

From: Mona C. Maggio
Assistant Executive Officer

Date: January 10, 2007

Telephone: (916) 574-7841

Subject: Agenda Item III - Strategic Plan Goal #3 – Promote Higher Professional Standards Through Rigorous Enforcement and Public Policy Changes – Report on Progress

Goal #3 – Promote higher professional standards through rigorous enforcement and public policy changes.

Objective 3.1 -- Complete Revisions for Continuing Education Laws by December 31, 2006.

Background
The Board’s strategic plan identifies the need to “Complete Revisions for Continuing Education Laws by December 31, 2006.”

Update

Title 16, CCR, Sections 1816.7 and 1887.7, 1887.75, and 1887.77, Delinquency Fees for Continuing Education Providers

This proposal would allow a registered provider of continuing education (PCE) a period of one year from the registration’s expiration date in order to renew an expired PCE registration with a $100 delinquency fee. Currently, when a PCE does not renew the registration prior to its expiration date, the registration is cancelled and a new registration must be obtained. At its June 21, 2006 meeting, the Board’s Budget and Efficiency Committee recommended that the Board adopt these proposed regulations. The Board approved this proposal at its meeting on July 27, 2006. Staff completed the required regulatory documents and the notice was published by the Office of Administrative Law (OAL) on September 29, 2006. The required regulatory documents were also mailed to the Board’s interested party list and posted on the Board’s web site; the Board received written comments regarding the proposal. The regulatory hearing was held on November 16, 2006; no public comments were received. On December 22, 2006, staff distributed a 15-day notice to the public to incorporate minor modifications into the language and will present the modified language to the Board for final approval at its February 2007 meeting.
Title 16, CCR, Sections 1887.2(a) and 1887.3(a), Continuing Education
Licensees are currently permitted to take an unlimited amount of continuing education (CE) by conventional or online means. However, hours earned through “self-study” courses are limited to one-third of the total required CE hours. The original intent of this proposal was to delete the definition of a “self-study course” and delete the limitations regarding self-study hours. The Consumer Protection Committee approved this proposal at its September 20, 2006 meeting. The proposal went before the Board for preliminary approval at its November 16, 2006 meeting; however, the Board recommended modifications to the proposed language – to retain the definition of a “self-study course” and to increase the self-study course limitations to one-half of the total required CE hours. Staff completed the required regulatory documents for noticing which were submitted to OAL on December 18, 2006. The notice was published on December 29, 2006, which initiated the 45-day public comment period. A public hearing will be held at the Board’s next meeting on February 15, 2007.

Title 16, CCR Section 1886, Citation and Fine of Continuing Education Providers
This proposal would provide the Board with the authority to issue a citation and fine to a continuing education provider. This proposal is currently on hold due to staff workload considerations.

Board staff will continue to monitor changes regarding the continuing education law and will bring any issues to the attention of the Policy and Advocacy Committee.

Objective 3.2 -- Establish a Standard to Measure Quality of Continuing Education by June 30, 2007.

Background
The Board’s strategic plan identifies the need to ensure high professional standards for Marriage and Family Therapists (MFT) and Licensed Clinical Social Workers (LCSW). In an effort to meet this objective, the board must develop a way to measure the quality of continuing education (CE) courses and thereby establish a minimum standard that all CE courses must meet to be or continue to be approved as a Board of Behavioral Sciences (BBS) approved provider.

Update
Staff has identified the basic tasks to begin researching this objective. Staff is completing the analysis of the data collection from other six identified entities (BAR Association, California Association of Marriage and Family Therapists (CAMFT), California Society for Clinical Social Work (CSCSW), National Association of Social Workers (NASW), UC Davis Continuing Medical Education, American Association of State Social work Boards (AASWB) and DCA boards and bureaus). Team members will meet to determine methodologies to measure to the quality of CE courses and minimum uniform standards.

Complete 12 Substantive Changes in Laws and Regulations by
Objective 3.3  -- January 1, 2008.

Background
The Board’s strategic plan identifies the need to “Complete 12 substantive changes in laws and regulations by January 1, 2008.”

Update
The Board sponsored Senate Bill 1475 (Figueroa), Reorganization of Licensed Educational Psychologists (LEP) and Administrative Statutes; Portability of Licensure for Licensed Clinical Social Workers. This bill, which takes effect on January 1, 2007, reorganizes and revises the Board’s Administration statutes for clarity, removes obsolete provisions, and makes some minor refinements. This bill also reorganizes and revises the LEP statutes to remove obsolete provisions, modernize statutes relating to licensure, scope of practice, continuing education, and enforcement, and creates better consistency with the Board’s other practice acts. This bill also facilitates portability of licensure for clinical social workers licensed in another state. Additionally, this bill extends the Board’s sunset date by one year to July 1, 2009.

STATUS: This bill became effective January 1, 2007,

The Board sponsored Assembly Bill 1852 (Yee). This bill allows marriage and family therapist interns and associate clinical social workers to be eligible to apply for educational loan repayment under the Licensed Mental Health Service Provider Education Program. The Health Professions Education Program, a division of the Office of Statewide Health Planning and Development, (OSHPD) administers this program.

STATUS: This bill became effective January 1, 2007.

The Board has also approved several substantive regulatory changes, currently in process and expected to be complete by mid-2006:

*Title 16, CCR Section 1886.40, Citations and Fines*
These regulations would provide the Board with the authority to issue a fine between $2,501 and $5,000 for specified violations. These regulations became effective on September 4, 2006.

*Title 16, CCR Section 1803, Delegation of Authority to the Executive Officer* This proposal would allow the Board’s executive officer to sign orders to compel a physical or mental evaluation of a Board licensee or registrant as part of an investigation of a complaint. A regulatory hearing was held on October 4, 2006; no public comments were received at the hearing. The Board gave final approval to this proposal at its meeting on November 16, 2006. Staff will be submitting the final regulatory packet to the Office of Administrative Law (OAL) for final approval.

*Title 16, CCR Sections 1833.3 and 1870, Supervisor Qualifications
Supervisors of registrants*
Supervisors of registrants are currently required to have practiced psychotherapy for two out of the five years preceding any supervision. This proposal would allow supervisors to count time spent directly supervising persons who perform psychotherapy toward this requirement and delete the requirement that supervisors of MFT Interns and Trainees average 5 hours of client contact per week for two out of the five years prior to supervising. At its April 19, 2006 meeting, the Board’s Policy and Advocacy Committee voted to recommend this language to the Board. The Board reviewed the proposal at its May 18, 2006 meeting and sent it back to the Committee for further work. At its June 28, 2006 meeting, the Committee recommended to the Board that the original language of the proposal be retained and additionally recommended to delete the requirement that supervisors of MFT Interns average 5 hours of client contact per week for two out of the five years prior to supervising. The Board approved this proposal at its meeting on July 27, 2006. Staff completed the required regulatory documents, and the notice was published by OAL on September 29, 2006. The required regulatory documents were also mailed to the Board’s interested party list and posted on the Board’s web site; the Board received written comments regarding the proposal. The regulatory hearing was held on November 16, 2006; no public comments were received. Staff distributed a 15-day notice to the public to incorporate minor modifications into the language and will present the modified language to the Board for final approval at its February 2007 meeting.

Objective 3.4  
Advocate for Five Laws that Protect the Privacy of Client/Therapist Relationships by December 31, 2010.

Background
The Board’s strategic plan identifies the need to “Advocate for five laws that protects the privacy of client/therapist relationships by December 2010.”

Update
The Board voted to support Assembly Bill 3013 (Koretz), Medical Information: Disclosures. This bill strengthens patient confidentiality laws by conforming California law to provisions of the Health Insurance Portability and Accountability Act (HIPAA) which limit the release of patient information, provide the patient the opportunity to prohibit such a release, and permit the health care provider to make judgments regarding releases in emergency situations.

STATUS: Became effective on January 1, 2007.

- Assembly Bill 2257 (Committee on Business and Professions) – This bill would require a psychologist to retain patient records for 7 years from the patient’s discharge date. This bill became effective on January 1, 2007.

The bill adds Section 2919 to the Business and Professions Code, to read:
2919. A licensed psychologist shall retain a patient’s health service records for a minimum of seven years from the patient’s discharge date. If the patient is a minor, the patient’s health service records shall be retained for a minimum of seven years from the date the patient reaches 18 years of age.

SEC. 2. No reimbursement is required by this act pursuant to Section 6 of Article XIII B of the California Constitution because the only costs that may be incurred by a local agency or school district will be incurred because this act creates a new crime or infraction, eliminates a crime or infraction, or changes the penalty for a crime or infraction, within the meaning of Section 17556 of the Government Code, or changes the definition of a crime within the meaning of Section 6 of Article XIII B of the California Constitution.

Board staff will monitor legislation and identify any that has the potential to protect the privacy of client/therapist relationships beginning with the 2007 legislative season. Any such legislation will be analyzed and brought before the Policy and Advocacy Committee who will make a recommendation to the Board whether to support the bill and when needed, suggest amendments.

**Objective 3.5 --**

**Provide Four Educational Opportunities for Division of Investigation (DOI) and The Office of the Attorney General (AG) Regarding the Board of Behavioral Sciences (BBS) and It’s Licensees by June 30, 2008.**

**Background**
Team members identified the educational opportunities as training for DOI investigators and the Deputy Attorneys General regarding the Board’s scope of authority, licensee scope of practice and the necessary requirements to conduct investigations and prosecute cases. The training will be conducted by the Executive Officer, representatives from the Department of Justice and the Board’s Enforcement Unit.

**Current Status:**
Team members have received training material samples from other boards to assist in developing the training program for DOI investigators and the Deputy Attorneys General.

**Objective 3.6 --**

**Reduce time in which BBS cases are investigated and processed by DOI and AG by 30% by June 30, 2010.**

**Background**
Cases sent to DOI for formal investigation take an average of 9 months to one year for completion. The Administrative Hearing process averages another year for a proposed decision to be rendered and come before the Board. It is the goal of this objective to shorten the processing time for investigation and prosecution of cases to meet the Board’s mandate to protect the public health, safety and welfare.

**Status**
Staff continues to monitor the case aging of cases assigned to DOI.
DOI senior administrators Kathy Door and Bill Holland have left DOI for promotional opportunities elsewhere within state government. Ms. Maggio met with Rex Cowart, Acting Chief; however, there is no positive news on when DOI will be able to fill its vacancies. In an effort to handle more complaints in-house, Enforcement Staff, Rosanna Webb-Flores, Mary Hanifen, Pearl Yu and Cheree Lasley completed The Council on Licensure, Enforcement and Regulation’s (CLEAR) Basic National Certified (NCIT) Investigator/Inspector Training Program and are designated as “Certified Investigator/Inspector.” Mary Hanifen, Pearl Yu and Cheree Lasley also completed the NCIT Advanced Investigative Analysis, Advanced Investigative Report Development, and Advanced Interviewing as part of the NCIT specialized program. Ms. Flores is scheduled to take the advanced NCIT training course and Julie McAuliffe is scheduled to take the basic course NCIT.

Enforcement staff has begun a review of the cases that are currently at DOI and may request some be returned to the office for handling in-house.

**Objective 3.7 --**

**Complete Annual Review of Examination Program and report the Results at a Public Meeting.**

**Background/Status**

- Staff is currently working with the Office of Examination Resources (OER) on the MFT occupational analysis.
- A presentation on the Board’s Licensing and Examination Programs is given each year at the February Board meeting.
- Staff meets regularly with the OER to discuss the Board’s current examination program, pass rates, examination development workshops and the examination vendor Thompson/Prometric.
Background
The Board of Behavioral Sciences (Board) receives numerous inquiries and requests from licensees regarding a retired license status.

Currently, if a licensee retires from practice, he/she can: 1) request that his/her license be placed on inactive status and pay a biennial fee of one half the standard active renewal fee (inactive license fees are $65 for MFTs, $50 for LCSWs, and $40 for LEPs); or 2) not pay a fee and allow his/her license to expire. Renewing with an inactive status, by definition, means that a licensee may not engage in practice and is exempt from continuing education requirements. Allowing a license to expire means that the license will go into delinquent status and will ultimately be cancelled after five years.

The Board’s web site, as well as many of the other Department of Consumer Affairs (DCA) web sites, provides the following license status definitions:

**Cancelled:** License has been expired for at least five years and is not renewable; the registration has been automatically cancelled upon issuance of a license; or has reached its 6 year limit.

**Delinquent:** Renewal fees and compliance with the continuing education requirement (if applicable) are past due; or the licensee/registrant has chosen not to renew. NOTE: The license/registration is expired, and no practice is permitted while the license is delinquent/expired.

**Inactive:** License is inactive. Licensee may not practice in California. NOTE: Licensee is exempt from complying with the continuing education requirements.

**Clear:** License renewal fees have been paid and continuing education requirements (if applicable) have been met.

The two primary complaints from licensees with respect to the license status options that are available to them upon retirement are as follows:

- Renewing with an inactive status requires paying an inactive renewal fee every two years when an individual does not intend to ever practice again
- If a licensee allows his/her license to expire, the Board’s web site labels his/her license status as “Delinquent” until the license is cancelled after five years.

Currently, the following boards within DCA have a retired license status available to their licensees: Board of Pharmacy; California Architects Board; Board for Professional Engineers and
Land Surveyors; Medical Board of California; Board of Registered Nursing, and the Dental Board of California (reduced license renewal fee option). Attachment A provides a table that compares the retired license status provisions (i.e., fees, conditions, etc.) of those boards.

Attachment B provides draft legislative language that follows that of the Board of Pharmacy, the California Architects Board, and the Board for Professional Engineers and Land Surveyors, while illustrating the differences in language between those three boards.

Attachment C provides the relevant laws of the Medical Board of California and the Dental Board of California (reduced renewal fee option) for comparison.

Recommendation
Staff recommends that:

1) The Committee consider recommending legislation that would allow a retired license status for MFTs, LCSWs, and LEPs.
2) The Committee review the Attachments and provisions of each of the boards mentioned above and recommend appropriate provisions and legislative language for MFTs, LCSWs, and LEPs.

Attachments
Retired License Comparison Table
Draft Legislative Language
Other DCA Retired License Status Laws
## Retired License Comparison Table – DCA Boards

<table>
<thead>
<tr>
<th></th>
<th>Pharmacy</th>
<th>Architects</th>
<th>Engineers</th>
<th>Medical</th>
<th>Dental</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Retired License Fee</strong></td>
<td>Yes - $30</td>
<td>Yes - $200, if current</td>
<td>Yes - $87.50</td>
<td>No - if license is current; otherwise, all accrued renewal fees, delinquent fee, and penalty fee must be submitted with application</td>
<td>Reduced Renewal Fee - $182.50</td>
</tr>
<tr>
<td><strong>Conditions</strong></td>
<td>• Has been licensed by the board for at least twenty years</td>
<td>• Has been licensed by the board for a min. of 5 years within CA and a min. of 20 years within the U.S. or territory of the U.S.</td>
<td>• Holds a license that is current and active or capable of being renewed</td>
<td>• Holds a license that is current and active and capable of being renewed</td>
<td>• Has practiced dentistry in CA for at least 20 years</td>
</tr>
<tr>
<td></td>
<td>• Holds a license that is current and capable of being renewed</td>
<td>• Holds a license that is current and active or capable of being renewed</td>
<td>• Holds a license that is current and active and capable of being renewed</td>
<td>• Holds a license that is current or capable of being renewed</td>
<td>• Has reached the age of retirement under the federal Social Security Act</td>
</tr>
<tr>
<td></td>
<td>• Has not had his/her license suspended, revoked, or otherwise disciplined, or subject to pending discipline</td>
<td>• Has not had his/her license suspended, revoked, or otherwise punitively restricted by the board or subject to disciplinary action</td>
<td>• Holds a license that is not suspended, revoked, or otherwise disciplined, or subject to pending discipline</td>
<td>• Shall not engage in the practice of medicine or the practice of podiatric medicine</td>
<td>• Customarily provides services free of charge to any person, organization, or agency. In the event charges are made, these charges shall be nominal. In no event shall the aggregate of these charges in any single calendar year be in an amount that would render the individual ineligible for full social security benefits.</td>
</tr>
<tr>
<td></td>
<td>• Shall not engage in activity that requires a license</td>
<td>• Shall not engage in activity that requires a license</td>
<td>• Shall not engage in activity that requires a license</td>
<td>• Shall not engage in the practice of medicine or the practice of podiatric medicine</td>
<td></td>
</tr>
<tr>
<td><strong>Permitted Titles</strong></td>
<td>• Retired Pharmacist</td>
<td>• Retired Architect</td>
<td>• Retired PE</td>
<td>• Retired Pharmacist, Retired</td>
<td>• Retired Architect, Retired</td>
</tr>
<tr>
<td><strong>License Renewal</strong></td>
<td>Not Required</td>
<td>Not Required</td>
<td>Not Required</td>
<td>Not Required</td>
<td>Biennial license renewal</td>
</tr>
<tr>
<td><strong>Restoring a Retired License to Active Status</strong></td>
<td>Shall pass the examination that is required for initial licensure</td>
<td>Shall comply with the board’s license renewal requirements</td>
<td>Shall pass the second division examination that is required for initial licensure</td>
<td>Must complete an application and pay the full renewal fee</td>
<td>N/A</td>
</tr>
<tr>
<td><strong>Continuing Education</strong></td>
<td>Exempt from CE requirements</td>
<td>N/A</td>
<td>N/A</td>
<td>Exempt from CE requirements</td>
<td>Exempt from CE requirements under Retired Inactive License Status</td>
</tr>
</tbody>
</table>
(a) The board shall issue, upon application and payment of the fee established by Section (cite applicable statutes and/or regulations), a retired license to a (MFT / LCSW / LEP) who

- has been licensed by the board. The board shall not issue a retired license to a (MFT / LCSW / LEP) whose license has been revoked. (Pharmacy)

- holds a license that is current and active or capable of being renewed pursuant to Section _____ and whose license is not suspended, revoked, or otherwise punitively restricted by the board or subject to disciplinary action under this chapter. (Architects)

- has been licensed by the board for a minimum of 5 years within California and a minimum of 20 years within the United States or territory of the United States, and who holds a license that is not suspended, revoked, or otherwise disciplined, or subject to pending discipline under this chapter. (Engineers)

(b) The holder of a retired license issued pursuant to this section shall not engage in any activity for which an active (MFT / LCSW / LEP)’s license is required. A (MFT / LCSW / LEP) holding a retired license shall be permitted to use the titles “retired (MFT / LCSW / LEP)” or “(MFT / LCSW / LEP), retired.”

(c) The holder of a retired license shall not be required to renew that license.

(d) In order for the holder of a retired license issued pursuant to this section to restore his or her license to active status,

- he or she shall pass (the examination / the second division examination) that is required for initial licensure with the board. (Pharmacists/Engineers)

- the holder of a retired license shall comply with Section ________. (Architects)

AND

Retired license fee to be added under applicable statute(s) and/or regulation(s).
OTHER RETIRED LICENSE STATUS LAWS

MEDICAL BOARD OF CALIFORNIA

BPC 2439

(a) Every licensee is exempt from the payment of the renewal fee and requirement for continuing medical education if the licensee has applied to the Division of Licensing for a retired license. The holder of a retired license may not engage in the practice of medicine or the practice of podiatric medicine.

(b) If a physician and surgeon has applied to convert from retired status to active status on or after January 1, 2004, but prior to January 1, 2005, the fee to change license status shall be waived, unless the change in status coincides with the physician and surgeon's license renewal date. The board shall refund any fees paid by a physician and surgeon to change from retired to active status after January 1, 2004, and before January 1, 2005, unless the change in status coincides with the physician and surgeon's license renewal date.

DENTAL BOARD OF CALIFORNIA

BPC 1716.1

(a) Notwithstanding Section 1716 [see below], the board may, by regulation, reduce the renewal fee for a licensee who has practiced dentistry for 20 years or more in this state, has reached the age of retirement under the federal Social Security Act (42 U.S.C. Sec. 301 et seq.), and customarily provides his or her services free of charge to any person, organization, or agency. In the event that charges are made, these charges shall be nominal. In no event shall the aggregate of these charges in any single calendar year be in an amount that would render the licensee ineligible for full social security benefits. The board shall not reduce the renewal fee under this section to an amount less than one-half of the regular renewal fee.

(b) Notwithstanding Section 1716, any licensee who demonstrates to the satisfaction of the board that he or she is unable to practice dentistry due to a disability, may request a waiver of 50 percent of the renewal fee. The granting of a waiver shall be at the discretion of the board, and the board may terminate the waiver at any time. A licensee to whom the board has granted a waiver pursuant to this subdivision shall not engage in the practice of dentistry unless and until the licensee pays the current renewal fee in full and establishes to the satisfaction of the board, on a form prescribed by the board and signed under penalty of perjury, that the licensee's disability either no longer exists or no longer affects his or her ability to safely practice dentistry.

BPC 1716

Nothing contained in this chapter shall exempt from the payment of the renewal fee any person authorized to practice dentistry in the State of California, and every person practicing dentistry in this State shall pay the renewal fee irrespective of the time when he was licensed or first had the right to lawfully practice dentistry in this State or elsewhere.

16 CCR 1021

The following fees are fixed for dentist licensure by the board:

... 

(g) Initial license - $365* 

... 

(i) Biennial license renewal fee for those qualifying pursuant to Section 1716.1 of the code shall be one half of the renewal fee prescribed by subsection (g) for licensing periods which commence on or after May 1, 1993.
Memorandum

To: Consumer Protection Committee    Date: January 8, 2007
From: Christy Berger
      Legislation Analyst
Telephone: (916) 574-7847

Subject: Agenda Item V – Discussion and Possible Action to Standardize the Exempt Settings Across the MFT and LCSW Practice Acts

Background
The Licensed Clinical Social Worker (LCSW) and Marriage and Family Therapist (MFT) statutes specify certain types of organizations, referred to here as “exempt settings,” whose employees are not required to have a license or a registration in order to perform clinical social work or marriage and family therapy within the scope of their employment.

When comparing the LCSW and MFT statutes, they have some exempt settings in common, but there are some differences. The MFT statute lists fewer exemptions and is more narrow. The Licensed Educational Psychologist statute does not specify any exempt settings.

History
Exempt settings have been listed in statute from the time the Board began licensing clinical social workers in 1968. This statute has remained virtually the same throughout the years. Just two types of exempt settings were listed in the MFT statute when the Board began licensing MFTs, also in the late 1960’s. These were institutions both nonprofit and charitable, and accredited educational institutions. However, such institutions were required to apply to the Board for a biennial waiver, and had to demonstrate adequate supervision of non-licensed counseling personnel, as well as a community or training need. In 1976, governmental agencies were added to the list of exempt settings in the MFT statute. These agencies were not required to obtain a waiver from the Board. In 1986, the MFT statute was amended to remove the need for any setting to obtain a waiver.

Discussion
The MFT statute is somewhat narrower and better defined, and has been used as the basis for the proposed language. The proposed changes would remove the following as exempt settings in the LCSW practice act:

- Family or children services agencies
- Private psychiatric clinics
- Nonprofit organizations engaged in research and education

There are several reasons to standardize exempt settings. The scopes of practice for MFTs and LCSWs are very comparable, so why should exempt settings differ? For purposes of administrative simplicity, standardization and better-defined exemptions would be very helpful. Additionally, most exempt settings require licensure anyway for reimbursement reasons. This proposal would also enhance consumer protection by requiring licensure for persons in additional settings.

Recommendation
Staff recommends that the Board sponsor legislation to standardize exempt settings between the LCSW and MFT statutes.

Attachments:
Proposed Language
Blank Page
MFT: § 4980.01.

(a) Nothing in this chapter shall be construed to constrict, limit, or withdraw the Medical Practice Act, the Social Work Licensing Law, the Nursing Practice Act, or the Psychology Licensing Act.

(b) This chapter shall not apply to any priest, rabbi, or minister of the gospel of any religious denomination when performing counseling services as part of his or her pastoral or professional duties, or to any person who is admitted to practice law in the state, or who is licensed to practice medicine, when providing counseling services as part of his or her professional practice.

(c) This chapter shall not apply to an employee of a governmental entity or of a school, college, or university, or of an institution both nonprofit and charitable or volunteer working in any of the following settings if his or her practice is performed solely under the supervision of the entity, school, or organization by which he or she is employed, and if he or she performs those functions as part of the position for which he or she is employed:

1. A governmental entity
2. A school, college, or university
3. An institution both nonprofit and charitable

(d) A marriage and family therapist licensed under this chapter is a licentiate for purposes of paragraph (2) of subdivision (a) of Section 805, and thus is a health care practitioner subject to the provisions of Section 2290.5 pursuant to subdivision (b) of that section.

(e) Notwithstanding subdivisions (b) and (c) all persons registered as interns or licensed under this chapter shall not be exempt from this chapter or the jurisdiction of the board.


(a) Nothing in this chapter shall restrict or prevent activities of a psychosocial nature or the use of the official title of the position for which they are employed on the part of the following persons, if those persons are performing those activities as part of the duties for which they are employed or solely within the confines or under the jurisdiction of the organization in which they are employed. However, they shall not offer to render clinical social work services, as defined in Section 4996.9, to the public for a fee, monetary or otherwise, over and above the salary they receive for the performance of their official duties with the organization in which they are employed. This chapter shall not apply to an employee or volunteer working in any of the following settings if his or her practice is performed solely under the supervision of the employer:

1. Persons employed by the United States Department of Health and Human Services.
2. Persons employed in family or children services agencies.
3. Individuals employed in proprietary or nonproprietary private psychiatric clinics.
4. Individuals employed in accredited colleges, junior colleges, or universities.
5. Individuals employed in federal, state, county or municipal governmental organizations, or nonprofit organizations which are engaged in research, education, and services which services are defined by a board composed of community representatives and professionals.
(1) A governmental entity

(2) A school, college, or university

(3) An institution both nonprofit and charitable

(f) (b) This chapter shall not apply to Persons utilizing persons using hypnotic techniques by referral from any of the following persons if his or her practice is performed solely under the supervision of the employer: persons licensed to practice medicine, dentistry, or psychology, or persons utilizing hypnotic techniques which offer a vocational or vocational self-improvement and do not offer therapy for emotional or mental disorders.

(1) Persons licensed to practice medicine

(2) Persons licensed to practice dentistry

(3) Persons licensed to practice psychology

(4) Persons using hypnotic techniques which offer a vocational or vocational self-improvement and not performing therapy for emotional or mental disorders.
State of California  
Board of Behavioral Sciences  

Memorandum  

To: Consumer Protection Committee  
Date: January 2, 2007  

From: Justin Sotelo  
Regulations Analyst  
Telephone: (916) 574-7836  

Subject: Agenda Item VI - Continuing Education Exception Criteria  

Background  
Section 1887.2 of Title 16, Division 18 of the California Code of Regulations sets forth continuing education (CE) exception criteria for Marriage and Family Therapist and Licensed Clinical Social Worker license renewals.  

Subdivision (a) of the regulation addresses the eighteen (18) hours (min.) of CE requirement for initial licensees, while subdivision (b) sets forth the CE exemption for those whose licenses are in inactive status.  

However, in reviewing the language under subdivision (c), staff has recommended the following changes in order to clarify and/or better facilitate the request for exception from the CE requirement process:  

- Adding language requiring that a written request for exception be submitted to the board a minimum of sixty (60) days prior to the expiration date of the license  
- Adding language stating that, if approved by the board, a request for exception shall be valid for only one renewal period  
- Similar to subdivisions (c)(1) and (c)(2), adding language under subdivision (c)(3) requiring that a licensee or immediate family member had a disability for at least one year in order to be granted an exception  
- After the “disability” definition under subdivision (c)(3), adding additional language that defines “major life activities” and “substantially limiting impairment”  
- Adding language requiring that an explanation of how the disability substantially limits one or more major life activities be provided  
- Adding additional clarifying language  

In addition, staff has drafted a request for continuing education exception form (attached) in order to better facilitate the request process.  

Recommendation  
Staff recommends that the Committee review and consider the proposed regulatory language and request for exception form and, if acceptable, recommend that these items go forward to the Board for review and approval.  

Attachments  
Proposed Language  
Request for Continuing Education Exception Form
Amend §1887.2. as follows:

§1887.2. EXCEPTIONS FROM CONTINUING EDUCATION REQUIREMENTS

(a) An initial licensee shall complete at least eighteen (18) hours of continuing education, of which no more than six (6) hours may be earned through self-study courses, prior to his or her first license renewal.

(b) A licensee is exempt from the continuing education requirement if his or her license is inactive pursuant to Sections 4984.8 and 4997 of the Code.

(c) A licensee may submit a written request for exception from the continuing education requirement, on a form prescribed by the board, for any of the reasons listed below. The request must be submitted to the board at least sixty (60) days prior to the expiration date of the license. The board will notify the licensee, within thirty (30) working days after receipt of the request for exception, whether the exception was granted. If the request for exception is denied, the licensee is responsible for completing the full amount of continuing education required for license renewal. If the request for exception is approved, it shall be valid for one renewal period. The board shall grant the exception if the licensee can provide evidence, satisfactory to the board, that:

(1) For at least one year during the licensee’s previous license renewal period the licensee was absent from California due to military service;

(2) For at least one year during the licensee’s previous license renewal period the licensee resided in another country; or

(3) During the licensee’s previous license renewal period, the licensee or an immediate family member, including a domestic partner, where the licensee has been the primary responsibility for the care of a family member, was suffering from or suffered a disability. A disability is a physical or mental impairment that substantially limits one or more of the major life activities of an individual. Major life activities include, but are not limited to, caring for oneself, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, working, sitting, standing, lifting, reaching, sleeping, thinking, concentrating and interacting with others. An impairment is substantially limiting if it prohibits or significantly restricts an individual’s ability to perform a major life activity as compared to the ability of the average person in the general population to perform the same activity. The disability must be verified by a licensed physician or psychologist with special expertise in the area of the disability. Verification of the disability must include:

(A) the nature and extent of the disability;

(B) an explanation of how the disability substantially limits one or more major life activities; and

(C) an explanation of how the disability would hinder the licensee from completing the continuing education requirement given that such courses can be completed in the classroom, online or via home study; and

(D) the name, title, address, telephone number, professional license or certification number, and original signature of the licensed physician or psychologist verifying the disability.

Note: Authority Cited: Sections 4980.54, 4980.60, 4990.14, and 4996.22, Business and Professions Code. Reference: Sections 4980.54 and 4996.22, Business and Professions Code.
REQUEST FOR CONTINUING EDUCATION
EXCEPTION

(Please type or print clearly in ink)

Part 1 To be completed by applicant/licensee

*NAME:                        Last                                                             First                                                    Middle
BUSINESS TELEPHONE:                         RESIDENCE TELEPHONE:

ADDRESS OF RECORD: Number and Street
City
State
Zip Code

SOCIAL SECURITY NUMBER: LICENSE NUMBER:

RENEWAL PERIOD REQUESTING EXCEPTION FOR:

REASON FOR EXCEPTION: (Check √ one box only)

[ ] Health (Complete Part 2) [ ] Health-Family (Complete Part 2) [ ] Military (submit proof) [ ] Out of Country (submit proof)

Part 2 To be completed by attending physician/psychologist

Provide a description of the physical or mental disability and an explanation as to how the disability interferes with one or more major life activities, including the licensee’s ability to complete 36 hours of Continuing Education through classroom/seminar attendance, home study, Internet courses over a two-year period. Please attach additional sheets, if necessary.

____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________

Approximate date disability began:_____________________ disability is [ ] Temporary [ ] Permanent
If temporary, approximate date licensee will be able to continue his/her Continuing Education:____________________________.

Is licensee limited in working in his/her licensed capacity? [ ] Yes [ ] No
If yes, please explain limitations:

Attending Physician’s/Psychologist’s Name License Number Business Telephone
Attending Physician’s/Psychologist’s Address
City
State
Zip Code

I declare under penalty of perjury under the laws of the State of California that I have read and understand the foregoing and that I meet all of the criteria stated herein and the information submitted on this form is true and correct. Providing false information or omitting required information are grounds for disciplinary action.

Date

Signature of Licensee

Date

Signature of Physician/Psychologist

* Business and Professions Code Sections 4982(b) and 4992.3(b) gives the board the right to refuse issuance of any registration or license, or to suspend or revoke the registration or license of any registrant or licensee if the applicant secures the registration or license by fraud, deceit, or misrepresentation on any application for registration or licensure submitted to the board.

(OVER)
EXCEPTIONS FROM THE CE REQUIREMENT

Section 1887.2(c) of the California Code of Regulations outlines three reasons for which the board will grant exception and the board's procedure for processing these requests.

Exception Regulation
(c) A licensee may submit a written request for exception from the continuing education requirement, on a form prescribed by the board, for any of the reasons listed below. The request must be submitted to the board at least sixty (60) days prior to the expiration date of the license. The board will notify the licensee, within thirty (30) working days after receipt of the request for exception, whether the exception was granted. If the request for exception is denied, the licensee is responsible for completing the full amount of continuing education required for license renewal. If the request for exception is approved, it shall be valid for one renewal period. The board shall grant the exception if the licensee can provide evidence, satisfactory to the board, that:

(1) For at least one year during the licensee's previous license renewal period the licensee was absent from California due to military service;

(2) For at least one year during the licensee's previous license renewal period the licensee resided in another country; or

(3) During For at least one year during the licensee's previous license renewal period, the licensee or an immediate family member, including a domestic partner, where the licensee has is the primary responsibility for the care of a caregiver for that family member, was suffering from or suffered had a disability. A disability is a physical or mental impairment that substantially limits one or more of the major life activities of an individual. Major life activities include, but are not limited to, caring for oneself, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, working, sitting, standing, lifting, reaching, sleeping, thinking, concentrating, and interacting with others. An impairment is substantially limiting if it prohibits or significantly restricts an individual's ability to perform a major life activity as compared to the ability of the average person in the general population to perform the same activity. The disability must be verified by a licensed physician or psychologist with special expertise in the area of the disability. Verification of the disability must include:

(A) the nature and extent of the disability

(B) an explanation of how the disability substantially limits one or more major life activities;

(C) an explanation of how the disability would hinder the licensee from completing the continuing education requirement given that such courses can be completed in the classroom, on-line, or via home study; and

(D) the name, title, address, telephone number, professional license or certification number, and original signature of the licensed physician or psychologist verifying the disability;

How to Request Exception
To request an exception, complete the form on the reverse side and submit to the board, along with sufficient proof. The board will accept any documentation establishing the validity of your request, including military orders that demonstrate service outside California, a passport or visa showing the dates you resided out-of-country, a doctor's note, etc. Please remember that the documentation must supply all of the information required by Section 1887.2(c) above. After the board's review, you will be notified whether your request was granted.

Exceptions Cannot be Granted Before the Fact
The board can only grant exceptions when provided with proof that you have met the minimum criteria outlined in Section 1887.2(c). You may request exception after the situation has occurred, or during the situation as long as you have met the minimum criteria. For example, if your license expiration date is July 31, 2006, and you are going to live out of the country from May 2005 through November 2006, you can submit your request for exception due to living out of the country anytime after May 2006.

Renewal Application
Please send in your request for exception prior to submitting your renewal application. Courtesy renewal applications are mailed out 90 days prior to the expiration date. It takes 30 business days to process an application for exception. Do not submit your renewal application until you have received a written decision regarding your request for exception. If your request is denied, you will be required to complete the mandatory coursework and hours of continuing education prior to renewing your license in active status.

If you have any questions, please contact the board's CE program at (916) 574-7830.
Memorandum

To: Consumer Protection Committee

Date: December 28, 2006

From: Christy Berger
Legislation Analyst

Telephone: (916) 574-7847

Subject: Agenda Item VII - Review Supervisor Responsibility Statement

Background
The Committee asked for a review of the responsibility statement for supervisors of an Associate Clinical Social Worker (ASW) or Marriage and Family Therapist Intern (IMF) or Trainee.

Discussion
Current supervision law specifies the requirements to become a supervisor of an IMF, trainee, or ASW; the required structure of supervision and inherent responsibilities; and details the requirements of the supervisor’s employment or practice, depending on the work setting. Any supervisor of an IMF, trainee or ASW must sign a responsibility statement prior to the commencement of supervision. The responsibility statements are attached.

Development of Supervision Law
Prior to the late 1970’s, there was very little direction provided regarding supervision or supervisory responsibility. Over the years, more responsibility was incrementally placed on the supervisor to ensure that the IMF, trainee or ASW was working in an appropriate setting, receiving adequate supervision, and that proper care was being provided to the supervisee’s clients.

In 1986, a bill was passed (Ch. 1365) that directed the board to develop regulations pertaining to supervisors and supervision. In 1989, the board held a number of public hearings on the subject. At the time, approximately 25% of applicants were losing hours of experience for such reasons as working in inappropriate settings, without the correct supervision, and outside the scope of practice. Additionally, the Board had a number of disciplinary actions pending against IMFs, trainees, ASWs and supervisors for issues related to unlicensed practice.

As a result of these hearings, the California Association of Marriage and Family Therapists (CAMFT) sponsored legislation regarding supervision requirements (SB 224), and the Board enacted regulations which included the responsibility statement for supervisors of IMFs and trainees in 1991 (Title 16, California Code of Regulations Section 1833.1), and for supervisors of ASWs in 1999 (Title 16, California Code of Regulations Section 1870). The regulations for supervisors of ASWs also include the requirement for a supervisory plan (attached) which describes the need for ongoing assessment of the ASW including goals and objectives. Each of these completed forms is submitted by the applicant to the Board upon application for licensure.

Attachments
Responsibility Statement for Supervisors of a Marriage and Family Therapist Trainee or Intern
Responsibility Statement for Supervisors of an Associate Clinical Social Worker
Supervisory Plan (for Associate Clinical Social Workers)
Title 16, California Code of Regulations Section 1833 & 1833.1 requires any qualified licensed mental health professional who assumes responsibility for providing supervision to those working toward a Marriage and Family Therapist license to complete and sign, under penalty of perjury, the following statement.

As the supervisor:

1) I am licensed in California and have been so licensed for at least two years prior to commencing this supervision. The license I hold is:

   Marriage and Family Therapist................................................................. License #  Issue Date
   Licensed Clinical Social Worker............................................................. License #  Issue Date
   *Psychologist......................................................................................... License #  Issue Date
   *Physician certified in psychiatry by the ................................................. License #  Issue Date

American Board of Psychiatry and Neurology
[Business and Professions Code Section 4980.40(f)]

I have had sufficient experience, training, and education in marriage and family therapy to competently practice marriage and family therapy in California and I will keep myself informed about developments in marriage and family therapy.

2) I have and maintain a current license in good standing and will immediately notify any intern or trainee under my supervision of any disciplinary action taken against my license, including revocation or suspension, even if stayed, probation terms, inactive license status, or lapse in licensure, that affects my ability or right to supervise.

3) I have practiced psychotherapy for at least two (2) years within the five (5) year period immediately preceding this supervision and I have averaged at least five (5) patient/client contact hours per week.

4) I have had sufficient experience, training, and education in the area of clinical supervision to competently supervise trainees or interns.

5) I have completed six (6) hours of supervision training or coursework within the two-year period immediately preceding this supervision, and must complete such coursework every two years while supervising. If I have not completed such training or coursework, I will complete a minimum of six (6) hours of supervision training or coursework within sixty (60) days of the commencement of this supervision, and every two years thereafter.

6) I know and understand the laws and regulations pertaining to both the supervision of trainees and interns and the experience required for licensure as a marriage and family therapist.

7) I shall ensure that the extent, kind, and quality of counseling performed is consistent with the education, training, and experience of the intern or trainee.

* Psychologists and Physicians certified in psychiatry are not required to comply with #5.
8) I shall monitor and evaluate the extent, kind, and quality of counseling performed by the intern or trainee by direct observation, review of audio or video tapes of therapy, review of progress and process notes and other treatment records, or by any other means deemed appropriate.

9) I shall address with the intern or trainee the manner in which emergencies will be handled.

10) I agree not to provide supervision to a trainee unless the trainee is a volunteer or employed in a setting that meets all of the following: (A) lawfully and regularly provides mental health counseling or psychotherapy; (B) provides oversight to ensure that the trainee’s work at the setting meets the experience and supervision requirements and is within the scope of practice for the profession as defined in Section 4980.02; (C) is not a private practice owned by a licensed marriage and family therapist, a licensed psychologist, a licensed clinical social worker, a licensed physician and surgeon, or a professional corporation of any of those licensed professions.

11) I agree not to provide supervision to an intern unless the intern is a volunteer or employed in a setting that meets both of the following: (A) lawfully and regularly provides mental health counseling or psychotherapy; (B) provides oversight to ensure that the intern’s work at the setting meets the experience and supervision requirements and is within the scope of practice for the profession as defined in Section 4980.02.

12) If I am to provide supervision on a voluntary basis, a written agreement will be executed between myself and the organization in which the employer acknowledges that they are aware of the licensing requirements that must be met by the intern or trainee, they agree not to interfere with my legal and ethical obligations to ensure compliance with these requirements, and they agree to provide me with access to clinical records of the clients counseled by the intern or trainee.

13) I shall give at least (1) one week's written notice to any intern or trainee of my intent not to certify any further hours of experience for such person. If I have not provided such notice, I shall sign for hours of experience obtained in good faith where I actually provided the required supervision.

14) I shall obtain from any intern or trainee for which supervision will be provided, the name, address, and telephone number of the intern’s or trainee’s most recent supervisor and employer.

15) In any setting that is not a private practice, I shall evaluate the site(s) where an intern or trainee will be gaining hours of experience toward licensure and shall determine that: (1) the site(s) provides experience which is within the scope of marriage and family therapist; and (2) the experience is in compliance with the requirements set forth in Title 16, California Code of Regulations Sections 1833 & 1833.1.

16) Upon written request of the Board, I shall provide to the board any documentation which verifies my compliance with the requirements set forth in this section.

I declare under penalty of perjury under the laws of the State of California that I have read and understand the foregoing and that I meet all criteria stated herein and that the information submitted on this form is true and correct.

____________________  ______________________  ____________
Printed Name of Qualified Supervisor  Signature of Qualified Supervisor  Date

____________________  ______________________  ______________________
Mailing Address:  Number and Street  City  State  Zip Code

Qualified Supervisor’s Daytime Telephone Number: _______(___________)____________________________

THE SUPERVISOR SHALL PROVIDE ANY INTERN OR TRAINEE BEING SUPERVISED WITH THE ORIGINAL OF THIS SIGNED STATEMENT PRIOR TO THE COMMENCEMENT OF ANY COUNSELING OR SUPERVISION.
Title 16, California Code of Regulations Section 1870 requires any qualified licensed mental health professional who assumes responsibility for providing supervision to those working toward a license as a Clinical Social Worker to complete and sign, under penalty of perjury, the following statement.

As the supervisor:

1) I am licensed in California. The license I hold is:

   Licensed Clinical Social Worker ...........................................
   License #                          Issue Date

   *Marriage and Family Therapist ...........................................
   License #                          Issue Date

   *Psychologist .................................................................
   License #                          Issue Date

   *Physician certified in psychiatry by the ...................................
   American Board of Psychiatry and Neurology
   License #                          Issue Date

2) I have and will maintain a current license in good standing and will immediately notify the associate of any disciplinary action, including revocation or suspension, even if stayed, probation terms, inactive license status, or lapse in licensure, that affects my ability or right to supervise.

3) I have practiced psychotherapy as part of my clinical experience for at least two (2) years within the last five (5) years immediately preceding this supervision.

4) I have completed a minimum of fifteen (15) contact hours in supervision training obtained from a state agency or approved continuing education provider.**

5) I have had sufficient experience, training, and education in the area of clinical supervision to competently supervise associates.

6) I know and understand the laws and regulations pertaining to both the supervision of associates and the experience required for licensure as a clinical social worker.

7) I shall ensure that the extent, kind, and quality of clinical social work performed is consistent with the training and experience of the associate.

8) I shall review client/patient records, monitor and evaluate assessment and treatment decisions of the associate clinical social worker, and monitor and evaluate the ability of the associate to provide services at the site(s) where he or she will be practicing and to the particular clientele being served, and ensure compliance with all laws and regulations governing the practice of clinical social work.

* MFTs, Psychologists, and Physicians certified in psychiatry must be licensed for two years prior to commencement of supervision.

** Psychologists and Physicians board certified in psychiatry are not required to comply with #4.
9) I shall develop a supervisory plan as described in Section 1870.1 of the California Code of Regulations. The original signed plan shall be submitted to the board upon the associate’s application for licensure.

10) I shall provide the board with this original signed form within 30 days of commencement of any supervision. I shall provide a copy of this form to the associate.

11) I shall give at least one (1) week’s written notice to the associate of my intent not to certify any further hours of experience for such person. If I have not provided such notice, I shall sign for hours of experience obtained in good faith where I actually provided the required supervision.

12) I shall complete an assessment of the ongoing strengths and weaknesses of the associate at least once a year and upon completion or termination of supervision and will provide copies of all assessments to the associate.

13) Upon written request of the board, I shall provide to the board any documentation which verifies my compliance with the requirements set forth in this section.

I declare under penalty of perjury under the laws of the State of California that I have read and understand the foregoing and that I meet all criteria stated herein and the information submitted on this form is true and correct.

___________________________________       __________________________________   ________________
Printed Name of Qualified Supervisor                              Signature of Qualified Supervisor                                Date

__________________________________________________________________________________________
Mailing Address:          Number and Street                                     City                                           State                    Zip Code

Qualified Supervisor's Daytime Telephone Number:    (         )____________________________________

A copy of this form must be provided to the associate by the supervisor.

The original of this form must be mailed to:

Board of Behavioral Sciences
1625 North Market Blvd, Suite S 200
Sacramento CA 95834
Title 16, California Code of Regulations Section 1870.1 requires all associate clinical social workers and licensed clinical social workers or licensed mental health professionals acceptable to the Board as defined in Section 1874 who assume responsibility for providing supervision to those working toward a license as a Clinical Social Worker to complete and sign the following supervisory plan. The original signed plan shall be submitted by the Associate Clinical Social Worker to the board upon application for licensure.

### I. ASSOCIATE: *(Please type or print clearly in ink.)*

<table>
<thead>
<tr>
<th>LEGAL NAME:</th>
<th>LAST</th>
<th>FIRST</th>
<th>MIDDLE</th>
<th>ASW NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADDRESS:</td>
<td>NUMBER AND STREET</td>
<td>CITY</td>
<td>STATE</td>
<td>ZIP CODE</td>
</tr>
<tr>
<td>BUSINESS TELEPHONE</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

### II. LICENSED SUPERVISOR: *(Please type or print clearly in ink.)*

<table>
<thead>
<tr>
<th>NAME:</th>
<th>LAST</th>
<th>FIRST</th>
<th>MIDDLE</th>
<th>LICENSE NUMBER</th>
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<tbody>
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<td>ADDRESS:</td>
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<td></td>
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</tr>
<tr>
<td>a. Private Practice</td>
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<td></td>
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<td></td>
</tr>
<tr>
<td>b. Governmental Entity</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>c. Nonprofit and Charitable Corporation</td>
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</tr>
<tr>
<td>d. School, College, or University</td>
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<tr>
<td>e. Licensed Health Facility</td>
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<td></td>
</tr>
<tr>
<td>f. Social Rehabilitation Facility/Community Treatment Facility</td>
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<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g. Pediatric Day Health and Respite Care Facility</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>h. Licensed Alcoholism or Drug Abuse Recovery or Treatment Facility</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**BRIEFLY DESCRIBE THE GOALS AND OBJECTIVES**

---

*I certify that I understand the responsibilities regarding clinical supervision, including the supervisor’s responsibility to perform ongoing assessments of the supervisee, and I declare under penalty of perjury under the laws of the State of California that the information submitted on this form is true and correct.*

<table>
<thead>
<tr>
<th>SUPERVISOR’S SIGNATURE</th>
<th>DATE SIGNED</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASSOCIATE’S SIGNATURE</td>
<td>DATE SIGNED</td>
</tr>
</tbody>
</table>

The **original** of this form must be submitted to the board upon application for licensure.
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State of California
Board of Behavioral Sciences

Memorandum

To: Consumer Protection Committee  Date: December 22, 2006
From: Pearl Yu  Telephone: (916) 574-7865
Enforcement Analyst

Subject: Biofeedback as Part of the Marriage and Family Therapy Practice.

Background

Board staff has received inquiries from marriage and family therapists (MFT) requesting clarification regarding whether or not their MFT license permits them to utilize biofeedback in their practice. The standard response Board staff’s has been providing to MFTs is that they can use biofeedback as a psychotherapeutic technique so long as they are working within their scope of practice and scope of competence as established by their education, training, and experience. Since the Board’s statutes and regulations do not specifically address the use of biofeedback as a psychotherapeutic technique, Board staff is seeking clarification regarding this issue to ensure that we are providing our licensees the correct information.

Discussion

According to information from the Association for Applied Psychophysiology and Biofeedback (AAPB), Biofeedback is “the process of recording physiological signals (such as muscle tension or brain waves) and displaying them to the person being recorded in real time as they are being recorded.” It is a technique in which people are trained to improve their health by learning to control certain internal bodily process that normally occur involuntarily, such as blood pressure, skin temperature, heart rate, and muscle tension. Biofeedback is primarily used to treat high blood pressure, tension and migraine headache, chronic pain, and urinary incontinence. However, it can also be useful in treating many types of conditions including anxiety, depression, autism, learning disabilities, and anorexia nervosa.

There does not appear to be any restriction as to who may offer biofeedback therapy nor are there any certification requirements. However, many biofeedback providers are certified by the Biofeedback Certification Institute of America (BCIA). Individuals providing biofeedback therapy include psychiatrist, psychologist, dentist, internist, nurses, occupational therapist, marriage and family therapists, and social workers. It appears that mental health professionals use biofeedback as part of their treatment to help tense and anxious clients learn to relax.

Information obtained from The California Association of Marriage and Family Therapist (CAMFT) website indicates that MFT may utilize therapeutic techniques such as biofeedback in their practice, as the laws do not specifies which particular therapeutic
technique MFTs may or may not use. CAMFT believes the MFTs can use biofeedback and other therapeutic techniques as long as the MFT is working within his or her scope of competence as determined by his or her education, training, and experience.
The Enforcement Program’s statistical reports are attached for the Committee’s review and discussion.
# BOARD OF BEHAVIORAL SCIENCES

## BREAKDOWN OF ENFORCEMENT COMPLAINT ACTIVITY BY LICENSEE POPULATION

2006 - 2007

FISCAL YEAR (1)

<table>
<thead>
<tr>
<th>LICENSEE POPULATION</th>
<th>OPENED</th>
<th>CLOSED</th>
<th>PENDING</th>
<th>LICENSES IN EFFECT (2)</th>
<th>% OF LICENSES TO PENDING COMPLAINTS</th>
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<tbody>
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Note: (1) Activity is from July 1, 2006 through November 30, 2006. Pending as of November 30, 2006.

(2) Licenses in effect as of November 1, 2006. Does not include cancelled, revoked, or voluntary surrender of licenses.

(3) Dual licensees are those that hold dual licenses with BBSE. Dual w/BOP are licensed with BBSE and the Board of Psychology.

Note: These statistics are for informational purposes only and should not be used as the sole source to analyze the Board's enforcement program.
## BOARD OF BEHAVIORAL SCIENCES
### BREAKDOWN OF ENFORCEMENT COMPLAINT CLOSURES BY TYPE
#### 2006 - 2007
##### FISCAL YEAR (1)

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<th>Mediated (3)</th>
<th>Citation (4)</th>
<th>Violation (5)</th>
<th>Inv. (6)</th>
<th>District Attorney (7)</th>
<th>Rfrd Disp. (8)</th>
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<td>0</td>
<td>0</td>
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<tr>
<td>DUAL LICENSEES (10)</td>
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<td>DUAL W/BOP (10)</td>
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<td>0</td>
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<tr>
<td>TOTAL</td>
<td>203</td>
<td>0</td>
<td>53</td>
<td>205</td>
<td>9</td>
<td>0</td>
<td>12</td>
<td>22</td>
<td>504</td>
</tr>
</tbody>
</table>

**40% Unactionable** | **60% Actionable**

### Note:
1. Closure activity is from July 1, 2006 through November 30, 2006.
2. Unactionable: Complaints which after review are closed no violation, insufficient evidence, no jurisdiction etc.
3. Mediated: Complaints which have no violation, but where a resolution was reached between parties.
4. Citation: Complaints in which after review, violations have been found and the complaint was closed upon the issuance of a citation.
5. Violation: Complaints which after review, violations have been found and were closed upon the issuance of a cease and desist or warning letter.
6. Inv.: Complaints which were closed after an investigation was conducted.
7. District Attorney: Complaints which, after review, a determination is made that the matter should be referred to the DA's office.
8. Rfrd Disp: Complaints which are referred directly to the Attorney General's office for disciplinary action (no investigation was required).
9. Other: Complaints closed in any manner which does not fit within one of the other categories.
10. Dual licensees are those that hold dual licenses with BBSE. Dual w/BOP are licensed with BBSE and the Board of Psychology.

**Note:** These statistics are for informational purposes only and should not be used as the sole source to analyze the Board's enforcement program.
**AGENCY CATEGORY** | **CE** | **UL** | **AP** | **DL** | **DP** | **AS** | **LC** | **IM** | **MF** | **LEP** | **TOTAL**
--- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | ---
Fraud | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 0 | 1 | 0 | 3
Fraudulent License | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1
Insurance, Medi-Cal | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0
Non-Jurisdictional | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 3 | 0 | 5
Custody | 0 | 3 | 0 | 0 | 1 | 0 | 6 | 0 | 21 | 0 | 31
Fee Disputes | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 1 | 0 | 2
Exempt from licensure | 0 | 1 | 0 | 1 | 0 | 1 | 0 | 1 | 4 | 0 | 8
Negligence | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 0 | 2
Beyond Scope | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 2
Dual Relationship | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1
Abandonment | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 0 | 1 | 0 | 3
Improper Supervision | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 1
Misdagnosis | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0
Failure/Report Abuse | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0
Aiding & Abetting | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 1
Other | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0
Mental Illness | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 0 | 1 | 0
Self Use Drugs/Alcohol | 0 | 0 | 0 | 0 | 0 | 0 | 5 | 2 | 6 | 2 | 15
Conviction of Crime | 0 | 0 | 0 | 0 | 0 | 0 | 13 | 6 | 10 | 12 | 0
Unprofessional Conduct | 1 | 0 | 0 | 1 | 0 | 2 | 20 | 11 | 46 | 2 | 83
Sexual Misconduct | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 4 | 7 | 0 | 12
Breach of Confidentiality | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 4 | 1 | 8 | 0
Emotional/Phys. Harm | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 2 | 0
Advertising / Misrepresentation | 0 | 2 | 0 | 0 | 0 | 0 | 1 | 1 | 5 | 4 | 0
Unlicensed Practice | 1 | 25 | 0 | 0 | 0 | 0 | 2 | 0 | 3 | 0 | 31
Repressed Memory | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0
Third Party Complaint | 0 | 2 | 0 | 1 | 0 | 1 | 7 | 3 | 7 | 0 | 21
Unsafe/Sanitary Conditions | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0
Discipline by Another State | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1
Criminal Convictions - Renewal Reported | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 2 | 0 | 0
Non Compliance with CE Audit | 0 | 0 | 0 | 1 | 0 | 0 | 8 | 0 | 15 | 0 | 24
Applicant Referral for Criminal Conviction | 0 | 0 | 36 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 37
Subvert Licensing Exam | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0
**TOTAL** | 2 | 33 | 38 | 5 | 5 | 29 | 66 | 49 | 146 | 2 | 375

*Note: These statistics are for informational purposes only and should not be used as the sole source to analyze the Board's enforcement program.*
## BOARD OF BEHAVIORAL SCIENCES
### ENFORCEMENT AGING DATA
#### 2006 - 2007 FISCAL YEAR (1)

<table>
<thead>
<tr>
<th></th>
<th>0-3 mo</th>
<th>4-6 mo</th>
<th>7-9 mo</th>
<th>10-12 mo</th>
<th>1-2 years</th>
<th>2-3 years</th>
<th>Over 3 Years</th>
<th>Total</th>
</tr>
</thead>
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<td>Pending Complaints (2)</td>
<td>188</td>
<td>76</td>
<td>39</td>
<td>14</td>
<td>10</td>
<td>0</td>
<td>0</td>
<td>327</td>
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<tr>
<td>Pending Investigations (3)</td>
<td>9</td>
<td>18</td>
<td>3</td>
<td>9</td>
<td>8</td>
<td>0</td>
<td>0</td>
<td>47</td>
</tr>
<tr>
<td><strong>Total Pending Complaints (Includes Inv) (4)</strong></td>
<td>197</td>
<td>94</td>
<td>42</td>
<td>23</td>
<td>18</td>
<td>0</td>
<td>0</td>
<td>374</td>
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</tbody>
</table>

<p>| | | | | | | | | |</p>
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<thead>
<tr>
<th></th>
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<th></th>
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<th></th>
<th></th>
<th></th>
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</thead>
<tbody>
<tr>
<td>Pending Cases at the AG - Pre Accusation (5)</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>27</td>
</tr>
<tr>
<td>Pending Cases at the AG - Post Accusation (6)</td>
<td>7</td>
<td>12</td>
<td>5</td>
<td>5</td>
<td>4</td>
<td>0</td>
<td>2</td>
<td>35</td>
</tr>
<tr>
<td><strong>Total Pending Cases at the AG's Office</strong></td>
<td>18</td>
<td>21</td>
<td>9</td>
<td>7</td>
<td>4</td>
<td>1</td>
<td>2</td>
<td>62</td>
</tr>
</tbody>
</table>

(1) Pending as of November 30, 2006.
(2) Pending Complaints are those complaints which are not currently being investigated by the Division of Investigation.
(3) Pending Investigations are those complaints which are being investigated by the Division of Investigation.
(4) Total Pending Complaints includes pending complaints and pending investigations.
(5) Pre Accusation are those pending cases at the AG's office where an accusation or statement of issues has not been filed yet.
(6) Post Accusation are those pending cases at the AG's office where a accusation or statement of issues has been filed.

Note: These statistics are for informational purposes only and should not be used as the sole source to analyze the Board's enforcement program.
# BOARD OF BEHAVIORAL SCIENCES

## REIMBURSEMENT OF PROBATION PROGRAM

<table>
<thead>
<tr>
<th></th>
<th>02/03</th>
<th>03/04</th>
<th>04/05</th>
<th>05/06</th>
<th>06/07 *</th>
</tr>
</thead>
<tbody>
<tr>
<td># Cases Ordered</td>
<td>1</td>
<td>3</td>
<td>4</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Amount Ordered Per Year ($1,200)</td>
<td>$6,000.00</td>
<td>$16,800.00</td>
<td>$19,200.00</td>
<td>$24,000.00</td>
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</tr>
<tr>
<td>Amount Collected</td>
<td>0</td>
<td>$1,900.00</td>
<td>$3,800.00</td>
<td>$2,700.00</td>
<td></td>
</tr>
</tbody>
</table>

* 06/07 Fiscal Year through: November 30, 2006

**Note:** These statistics are for informational purposes only and should not be used as the sole source to analyze the Board’s enforcement program.
## BOARD OF BEHAVIORAL SCIENCES
### RECOVERY COSTS

<table>
<thead>
<tr>
<th></th>
<th>02/03</th>
<th>03/04</th>
<th>04/05</th>
<th>05/06</th>
<th>06/07*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number Cases Ordered</td>
<td>12</td>
<td>9</td>
<td>12</td>
<td>11</td>
<td>7</td>
</tr>
<tr>
<td>Total Amount Ordered</td>
<td>$36,258.50</td>
<td>$25,497.50</td>
<td>$73,791.25</td>
<td>$47,751.25</td>
<td>$38,536.00</td>
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<tr>
<td>Stipulation - Revocation (1)</td>
<td>$1,320.00</td>
<td>$1,350.50</td>
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<tr>
<td>Stipulation - Voluntary Surrender (2)</td>
<td>$36,008.25</td>
<td>$11,286.50</td>
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<td>Stipulation - Probation</td>
<td>$1,500.00</td>
<td>$25,899.00</td>
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<tr>
<td>Decision - Revocation</td>
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<td></td>
<td></td>
<td>$6,410.50</td>
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<tr>
<td>Decision - Probation</td>
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<td></td>
<td>$2,512.50</td>
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<tr>
<td>Total Amount Collected (3)</td>
<td>$57,867.25</td>
<td>$20,600.08</td>
<td>$23,791.89</td>
<td>$15,168.57</td>
<td>$4,426.33</td>
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<tr>
<td>Intercepted by FTB Program</td>
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<td></td>
<td></td>
<td>$314.73</td>
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<tr>
<td>Cost Collected in Payments</td>
<td>$8,058.34</td>
<td>$2,386.83</td>
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<tr>
<td>Cost Collected in Lump Sum</td>
<td>$6,795.50</td>
<td>$2,039.50</td>
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</tbody>
</table>

(1) Cost recovery only required if the respondent pursues reinstatement (may never be recovered).
(2) Cost recovery only required if the respondent reapplyes for licensure (may never be recovered).
(3) May reflect collection of cost recovery ordered in previous fiscal years.

* 06/07 Fiscal Year through: November 30, 2006
Note: These statistics are for informational purposes only and should not be used as the sole source to analyze the Board's enforcement program.
## BOARD OF BEHAVIORAL SCIENCES
### CITATIONS ISSUED BY CATEGORY

**Agency Category Types**

<table>
<thead>
<tr>
<th>Category</th>
<th>02/03</th>
<th>03/04</th>
<th>04/05</th>
<th>05/06</th>
<th>06/07*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual Misconduct</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>Improper Supervision</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td>Aiding &amp; Abetting</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>Failure/Report Abuse</td>
<td>1</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Breach of Confidence</td>
<td>2</td>
<td>6</td>
<td>5</td>
<td>5</td>
<td>2</td>
</tr>
<tr>
<td>Advertising/Misrepresentation</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unlicensed Practice</td>
<td>4</td>
<td>3</td>
<td>7</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Failure Report Conviction on Renewal</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td>1</td>
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<tr>
<td>Non Compliance with CE Audit</td>
<td>12</td>
<td>6</td>
<td>44</td>
<td>148</td>
<td>44</td>
</tr>
<tr>
<td>Failure Report Conviction on Application</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Subvert Licensing Exam</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Practicing Beyond Scope</td>
<td>1</td>
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<td></td>
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<tr>
<td>Client Abandonment</td>
<td>2</td>
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<td>2</td>
<td>2</td>
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</tr>
<tr>
<td>Unprofessional Conduct</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>24</td>
<td>19</td>
<td>63</td>
<td>160</td>
<td>54</td>
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**Number Citations Ordered**

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<tr>
<th>02/03</th>
<th>03/04</th>
<th>04/05</th>
<th>05/06</th>
<th>06/07*</th>
</tr>
</thead>
<tbody>
<tr>
<td>24</td>
<td>19</td>
<td>63</td>
<td>160</td>
<td>54</td>
</tr>
</tbody>
</table>

**Fines Assessed**

<table>
<thead>
<tr>
<th>02/03</th>
<th>03/04</th>
<th>04/05</th>
<th>05/06</th>
<th>06/07*</th>
</tr>
</thead>
<tbody>
<tr>
<td>$61,650.00</td>
<td>$24,200.00</td>
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</table>

**Fines Collected (1)**

<table>
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<tr>
<th>02/03</th>
<th>03/04</th>
<th>04/05</th>
<th>05/06</th>
<th>06/07*</th>
</tr>
</thead>
<tbody>
<tr>
<td>$37,150.00</td>
<td>$18,700.00</td>
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<td></td>
<td></td>
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</tbody>
</table>

---

(1) May reflect collection of fines ordered in previous fiscal years.

* 06/07 Fiscal Year through: November 30, 2006

**Note:** These statistics are for informational purposes only and should not be used as the sole source to analyze the Board's enforcement program.
## BOARD OF BEHAVIORAL SCIENCES
### CATEGORY TYPES OF DISCIPLINARY ACTION TAKEN
#### 2006 - 2007
##### FISCAL YEAR *

<table>
<thead>
<tr>
<th>Category</th>
<th>MFT</th>
<th>LCSW</th>
<th>IMF</th>
<th>AWS</th>
<th>LEP</th>
<th>APPLICANT</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>REVOC. STAYED: PROB ONLY</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unprofessional Conduct</td>
<td>1</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Aiding and Abetting</td>
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<td></td>
</tr>
<tr>
<td>Sexual Misconduct</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discipline by Another State Agency</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Conviction of a Crime</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
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<td>1</td>
<td></td>
<td></td>
<td>0</td>
</tr>
<tr>
<td><strong>REVOC. STAYED: PROB, SUSPENSION</strong></td>
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</tr>
<tr>
<td>Conviction of a Crime</td>
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<td>1</td>
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<tr>
<td><strong>REVOKED</strong></td>
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<tr>
<td>Improper Supervision</td>
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</tr>
<tr>
<td>Conviction of a Crime</td>
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<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Sexual Misconduct</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
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<td><strong>SURRENDER OF LICENSE</strong></td>
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<td>Unprofessional Conduct</td>
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</tr>
<tr>
<td>Mental Illness</td>
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<td></td>
</tr>
<tr>
<td>Emotional / Physical Harm</td>
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<tr>
<td>Sexual Misconduct</td>
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</tr>
<tr>
<td>Conviction of a Crime</td>
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<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
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<td>1</td>
<td></td>
<td></td>
<td>0</td>
</tr>
<tr>
<td><strong>OTHER DISCIpline</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discipline by Another State Agency</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Subtotal</strong></td>
<td>1</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
<td>1</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td>9</td>
<td>4</td>
<td>4</td>
<td>1</td>
<td>0</td>
<td></td>
</tr>
</tbody>
</table>

* Time frame: July 1, 2006 through November 30, 2006

**Note:** These statistics are for informational purposes only and should not be used as the sole source to analyze the Board’s enforcement program.
### Breakdown of Enforcement Activity - Cases at the AG's Office

By Licensee Population

2006 - 2007 Fiscal Year

<table>
<thead>
<tr>
<th>Category</th>
<th>Pending</th>
<th>Licenses In Effect</th>
<th>% of Licenses to Pending Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>UNLICENSED</td>
<td>0</td>
<td>n/a</td>
<td>n/a</td>
</tr>
<tr>
<td>APPLICANTS</td>
<td>5</td>
<td>n/a</td>
<td>n/a</td>
</tr>
<tr>
<td>SUSEQUENT DISP. (3)</td>
<td>3</td>
<td>n/a</td>
<td>n/a</td>
</tr>
<tr>
<td>DUAL LICENSEES (4)</td>
<td>1</td>
<td>n/a</td>
<td>n/a</td>
</tr>
<tr>
<td>DUAL W/BOP (4)</td>
<td>4</td>
<td>n/a</td>
<td>n/a</td>
</tr>
<tr>
<td>CE PROVIDERS</td>
<td>0</td>
<td>2262</td>
<td>0.00</td>
</tr>
<tr>
<td>ASW</td>
<td>4</td>
<td>7032</td>
<td>0.06</td>
</tr>
<tr>
<td>LCSW</td>
<td>8</td>
<td>16438</td>
<td>0.05</td>
</tr>
<tr>
<td>IMF</td>
<td>8</td>
<td>10225</td>
<td>0.08</td>
</tr>
<tr>
<td>MFT</td>
<td>28</td>
<td>28228</td>
<td>0.10</td>
</tr>
<tr>
<td>LEP</td>
<td>1</td>
<td>1721</td>
<td>0.06</td>
</tr>
<tr>
<td>TOTAL</td>
<td>62</td>
<td>65906</td>
<td>0.09</td>
</tr>
</tbody>
</table>

**Note:**

1. Pending as of November 30, 2006.
2. Licenses in effect as of November 1, 2006. Does not include cancelled, revoked, or voluntary surrender of licenses.
3. Subsequent Discipline for violation of probation.
4. Dual licensees are those that hold dual licenses with BBSE. Dual w/BOP are licensed with BBSE and the Board of Psychology.

**Note:** These statistics are for informational purposes only and should not be used as the sole source to analyze the Board's enforcement program.
**BOARD OF BEHAVIORAL SCIENCES**

*Overview of Enforcement Activity*

<table>
<thead>
<tr>
<th>Fiscal Years</th>
<th>01/02</th>
<th>02/03</th>
<th>03/04</th>
<th>04/05</th>
<th>05/06</th>
<th>06/07*</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Complaints / Cases Opened</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Complaints Received</td>
<td>493</td>
<td>514</td>
<td>560</td>
<td>626</td>
<td>801</td>
<td>318</td>
</tr>
<tr>
<td>Criminal Convictions Received</td>
<td>397</td>
<td>384</td>
<td>383</td>
<td>384</td>
<td>455</td>
<td>194</td>
</tr>
<tr>
<td><strong>Total Complaints Received</strong></td>
<td>890</td>
<td>898</td>
<td>943</td>
<td>1010</td>
<td>1256</td>
<td>512</td>
</tr>
<tr>
<td>Investigations Opened</td>
<td>42</td>
<td>25</td>
<td>11</td>
<td>25</td>
<td>44</td>
<td>25</td>
</tr>
<tr>
<td>Cases Sent to AG</td>
<td>31</td>
<td>41</td>
<td>17</td>
<td>25</td>
<td>55</td>
<td>15</td>
</tr>
</tbody>
</table>

| **Filings** |       |       |       |       |       |        |
| Citations Issued | 30   | 24    | 19    | 63    | 160   | 54     |
| Accusations Filed | 27   | 17    | 22    | 17    | 29    | 12     |
| Statement of Issues (SOI's) filed | 7    | 4     | 4     | 2     | 1     | 3      |
| Temporary Restraining Order | 0     | 0     | 0     | 0     | 0     | 0      |
| Interim Suspension Orders | 0     | 0     | 1     | 0     | 1     | 0      |

| **Withdrawals/Dismissals** |       |       |       |       |       |        |
| Accusations Withdrawn or Dismissed | 3     | 1     | 0     | 1     | 1     | 1      |
| SOI's Withdrawn or Dismissed | 1     | 1     | 0     | 0     | 0     | 0      |
| Declined by the AG | 0     | 7     | 3     | 1     | 3     | 1      |

| **Disciplinary Decision Outcomes** |       |       |       |       |       |        |
| Revoked | 14    | 4     | 10    | 4     | 7     | 2      |
| Revoked, Stayed, Susp & Probation | 2     | 2     | 1     | 2     | 0     | 2      |
| Revoked, Stayed, Probation | 12    | 6     | 5     | 2     | 4     | 3      |
| Surrender of License | 6     | 7     | 7     | 7     | 9     | 1      |
| Suspension | 0     | 0     | 0     | 0     | 0     | 0      |
| Susp., Stayed, Susp & Prob | 0     | 0     | 0     | 0     | 0     | 0      |
| Susp., Stayed Probation | 0     | 1     | 0     | 0     | 0     | 0      |
| Susp & Prob Only | 0     | 0     | 0     | 0     | 0     | 0      |
| License Probation Only | 1     | 0     | 0     | 0     | 0     | 0      |
| Reprimand / Reproval | 0     | 1     | 0     | 0     | 0     | 0      |
| Other Decisions | 0     | 0     | 0     | 0     | 0     | 1      |
| **Total Decisions** | **35** | **21** | **23** | **15** | **20** | **9** |

| **Decisions (By Violation Type)** |       |       |       |       |       |        |
| Fraud | 1     | 1     | 0     | 1     | 0     | 1      |
| Health & Safety | 0     | 0     | 0     | 1     | 2     | 0      |
| Sexual Misconduct | 13    | 5     | 5     | 5     | 5     | 0      |
| Competence / Negligence | 1     | 2     | 9     | 2     | 2     | 0      |
| Personal Conduct | 7     | 7     | 3     | 4     | 7     | 5      |
| Unprofessional Conduct | 8     | 4     | 4     | 2     | 4     | 3      |
| Unlicensed Activity | 0     | 0     | 0     | 0     | 0     | 0      |
| Other | 0     | 0     | 0     | 0     | 0     | 0      |
| Violation of Probation | 5     | 2     | 2     | 0     | 0     | 0      |

*Fiscal Year Period: 7/1/06 through 11/30/06.*

Note: These statistics are for informational purposes only and should not be used as the sole source to analyze the Board's enforcement program.
At the September 20, 2006 Committee Meeting, the Committee discussed the numerous problems candidates were experiencing with the examination process. The complaints included issues with scheduling the examination; problems at the test sites, and examination results not being received or results have the wrong examination information listed on the result.

In an effort to assist the candidates with the examination process and informing them of their rights and responsibilities, staff drafted a Candidate Bill of Rights. Once approved, this document will be provided to candidates with the Notice of Examination Eligibility and will also be provided to them at the testing site.

Action Requested

Review draft and provide suggested edits/comments for staff consideration.
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CANDIDATE EXPECTATIONS AND RESPONSIBILITIES

What the CANDIDATE CAN EXPECT:

• To receive a Candidate Handbook prior to a scheduled examination date.
• To have a professional testing experience within a safe and secure testing facility.
• To have a testing experience free from disruptions.
• To receive a personalized introduction to the testing system before beginning the examination.
• To be given the appropriate time allowed for the examination as defined in the candidate handbook.
• To be provided, upon prior request and approval from the Board, testing accommodations or auxiliary aids or services.
• To receive a printed score report of the examination that includes an overall score and grade, number of questions answered correctly, and a sub-score that reveals how the candidate performed on each major section of the test as defined by the examination plan.
• To receive an exit survey at the end of the examination.

It is the RESPONSIBILITIES OF THE CANDIDATE:

• To have read and understood the examination information located within the Candidate Handbook.
• To abide by the Security Procedures as outlined in the candidate handbook.
• To provide proper identification before the examination.
• To immediately notify a test site proctor of any disruption or difficulty during the examination.
• To change or cancel their appointment, if the need arises, three full working days prior to the scheduled date of their examination.
• To sit for an examination within one year of being notified of eligibility or for a re-examination within one year of a failed examination.
• To contact Thomson Prometric with any questions concerning examination scheduling.
• To immediately notify the Board of any problems encountered at a testing facility.

If a disruption or problem occurs that you believe will substantially impact the outcome of your examination:

• You should document your concerns on the exit survey at the end of your examination
• You should document such events on a Candidate Comment Form available at all test centers. Complete all the information requested on the Candidate Comment Form, stamp it and mail it. If you requested to be contacted regarding your comments, the Board will contact you within fifteen (15) days of receiving the form.
• You may also document any problems you encountered by either sending or e-mailing a complaint letter to the Board at BBSWebMaster@bbs.ca.gov. You must include your full name, file number or SSN, date of examination, time of examination, test site location and a brief explanation/description of the problem/incident.

<table>
<thead>
<tr>
<th>All questions regarding examination scheduling should be directed to:</th>
<th>Questions regarding examination content or problems at the testing facility should be directed to:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thomson Prometric</td>
<td>Board of Behavioral Sciences</td>
</tr>
<tr>
<td>1260 Energy Lane</td>
<td>1625 North Market Blvd., S200</td>
</tr>
<tr>
<td>St. Paul, MN 55108</td>
<td>Sacramento, CA 95834</td>
</tr>
<tr>
<td>800-897-2046</td>
<td>916-574-7830</td>
</tr>
<tr>
<td>TDD Users: 800-790-3926</td>
<td>Web: <a href="http://www.bbs.ca.gov">www.bbs.ca.gov</a></td>
</tr>
<tr>
<td>Web: <a href="http://www.experiononline.com">www.experiononline.com</a></td>
<td></td>
</tr>
</tbody>
</table>
The Board of Behavioral Sciences (Board) has contracted with Dr. Lindle Hatton to facilitate its strategic planning process. Dr. Hatton led the Board through a prior strategic planning process in 2005. Over the next few months, Dr. Hatton will be meeting with Board stakeholders to assist in evaluating the organization's effectiveness and establishing a framework for crafting the strategic direction that will guide our organization over the next five years.

Today’s presentation is designed to give committee members and the public an overview of the strategic planning process. Dr. Hatton will give this presentation before each of the Board’s committees. A full strategic planning work session will be conducted with the entire board members and the public at a future meeting.

Dr. Hatton is a native of Kentucky where he received his BS in Management and Strategy. While attending the University of Colorado he received his MPA in Financial Management. Later, returning to the University of Kentucky he completed his Doctoral studies in Strategic Management.


Dr. Hatton has worked with other state agencies on strategic planning, including other boards in the Department of Consumer Affairs, and is a professor of strategic management at California State University, Sacramento.
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In the interest of easing scheduling for both committee members and public participants, it would be useful to set future meeting dates for the committee. Meetings should occur approximately halfway between regularly scheduled board meetings.

Meetings will occur in various locations much as board meetings are held in various locations around the state to maximize opportunities for public participation. The following dates are suggested and fit the prior pattern of scheduling meetings. Board meeting dates are provided for reference.

**Suggest Committee Meeting Dates**

- Wednesday, April 11, 2007
- Wednesday, June 27, 2007
- Wednesday, September 26, 2007

**Scheduled Board Meeting Dates**

- February 15-16, 2007, Riverside
- May 24-25, 2007, Sacramento
- August 2-3, 2007, Los Angeles
- November 8-9, 2007, Bay Area

At this time the Committee and audience members may suggest future agenda items for consideration.
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