MEETING MINUTES
Examination Program Review Committee
February 2, 2009

Department of General Services
The Ziggurat, Executive Dining Room
707 Third Street
West Sacramento, CA 95605

Committee Members Present: Elise Froistad, MFT Member, Chair

Staff Present:
Paul Riches, Executive Officer
Kim Madsen, Assistant Executive Officer

Committee Members Absent: Joan Walmsley, LCSW Member

Guest List:
Dr. Tracy Montez, Applied Measurement Services, LLC
Guest list on file

Elise Froistad, Committee Chair, called the meeting to order at approximately 9:00 a.m.

I. Introductions
The Examination Program Review Committee (Committee) members introduced themselves in place of roll. A quorum was not established. Board staff and meeting guests also introduced themselves.

II. Purpose of the Committee
Ms. Froistad briefly revisited the purpose of the Committee, which is to conduct a holistic review of the Board’s examination programs and evaluate the issues regarding the examinations.

III. Review and Approval of the December 8, 2008 Meeting Minutes
No action was taken on this item due to the lack of a quorum. There were no comments made regarding the December 8, 2008 minutes.

IV. Presentation of the Occupational Analysis by Dr. Tracy Montez
Dr. Montez began her presentation by reminding meeting participants who had attended the previous meeting about what was discussed at that time.
She offered information regarding the purpose of and need for an occupational analysis, indicating that the study is intended to define an occupation or practice in terms of the actual activities performed. Further, it forms the basis of a fair, job-related, and legally defensible description of the practice, as well as the basis of related legislation and policies.

Dr. Montez reviewed the professional guidelines and technical standards applicable to the process, including the 1) Standards for Educational and Psychological Testing; 2) Federal Uniform Guidelines for Employee Selection Procedures; and 3) California Business and Professions Code, Section 139. Dr. Montez indicated that, pursuant to these guidelines and standards, an occupational analysis should be conducted every three to seven years, with five years being the recommended time frame between each analysis.

Steps to be taken toward completion of an occupational analysis were also outlined. The process begins with a study of the occupation to gather information on the tasks performed and knowledge required to perform those tasks. Licensees, also known as Subject Matter Experts (SME), are interviewed. The information that is obtained during the interviews is reviewed and refined during workshops with licensees, and is then incorporated into a survey which the Board distributes to a stratified random sample of licensees. The data obtained from the survey is analyzed and lastly, workshops are conducted with SMEs to evaluate the data and create a new examination plan. Dr. Montez emphasized that the SMEs receive training at each workshop to ensure they are clear on the process to be followed.

V. Group Assignment

The meeting participants broke into two groups, and were assigned to review an examination plan and then draft a task statement and corresponding knowledge statement. The objective of the exercise was to generally familiarize participants with the complexity involved in drafting these statements.

Each group’s task and knowledge statements were reviewed and discussed among meeting participants. Dr. Montez spoke about the importance of applying psychometric criteria to professional expertise in developing an occupational analysis questionnaire that is clear and accurately captures the current profession. She indicated that should there be litigation or concern expressed about an examination, the court will look at the occupational analysis as a strong link between the test and the job.

Dr. Montez noted that the Board has historically been mindful and respectful of the importance of the occupational analysis, and has regularly adhered to the related professional guidelines and standards.

Discussion ensued about related issues, including the influence of the occupational analysis process on the area of public policy. Mr. Riches stated that although public policy can be influenced by the results of the occupational analysis, the Board does not attempt to create public policy through the process. He indicated that the occupational analysis is an objective survey of what is going on in the profession, and offers valuable information that can be used by the Board as appropriate.

The Committee adjourned for a break at 11:38 a.m. and reconvened at 11:48 a.m.
VI. Discussion of Concerns Relating to all Standard Written and Clinical Vignettes Examinations

Ms. Froistad reported that when the Committee met in December, questions were asked about areas of concern that could be considered by the Committee. Two of those issues were discussed.

a. Use of Therapist Jargon in the Exam

Ms. Froistad deferred to Dr. Montez for input regarding this issue. Dr. Montez emphasized that when SMEs are drafting task and knowledge statements and examination questions, they must balance the use of professional jargon with the rules of grammar and fairness to candidates. SMEs are asked, in addition to linking test questions to the exam plan, to also link them back to reference material. Therefore, the SMEs must keep in mind the language that is used in the reference material. She noted that, due to reasons like the size of the state as well as differences between agencies, acronyms or phrases may be used differently. Examination candidates should not be penalized because they may not be familiar with those differences.

Amy Welch Gandy, Office of Professional Examination Services (OPES) and formerly known as the Office of Examination Resources (OER), provided as an example the SMEs inclination to generally use the term “CPS” although there may be a different name for such an agency at different locations throughout the state. She indicated that SMEs are instructed to instead use language such as “a child protection services agency” to make the item more generic while still clear.

Christine Ford, California State University Fullerton, raised the subject of how this issue came to light. Was there a concern that jargon was mixed in to exam questions? Dr. Montez stated it was her recollection that the issue involved the examination not using the jargon with which clinicians are familiar. Mr. Riches added that he has heard on numerous occasions the complaint that there is some terminology connected to certain theoretical orientations, and the use of that language in test questions results in the questions being perceived as elliptical or vague.

It was noted that often in “prep schools” or examination preparation courses, jargon may be used, and therefore the candidates expect that is what will be encountered on the actual examination. Dr. Montez noted that some of the Committee questionnaires reflect concerns about the prep schools.

Ms. Welch Gandy added that an attempt is made to avoid use of vocabulary or jargon on the exam.

Ben Caldwell, Alliant International University, reported hearing that the language of test questions seems stilted as a result of trying to avoid using jargon. Attempts to avoid use of one or two words commonly accepted as related to a particular theoretical orientation result in a lengthy definition that makes the question more challenging to read and understand.

Ms. Froistad asked why, if a term or language is commonly accepted in the community, it would not be used on the exam. Would the language be intentionally avoided because it is so obvious? Dr. Montez responded that the issue is the format of the question. Rather than ask a definitional question, the question should be asked in a way that requires the candidate to know the definition but apply it to the scenario in the question. Ms. Ford asked if the SMEs could successfully argue for the use of the jargon if it would make the
test item more clear than use of a lengthy definition. Dr. Montez responded that the question should be clearly stated, but should be formatted in a manner so it is not definitional but requires the candidate to have appropriate knowledge. She indicated that what should be avoided is presenting a test that can be passed by someone simply because they can read books, memorize definitions and terms, and know test taking strategies.

b. Out of State Licensee’s Exam Challenges

Dr. Montez indicated that California’s licensure exam is based on entry-level practice for the state. She stated that candidates who have been licensed and specialized in another state and have tenure in that state will be challenged by an entry-level examination. She added that when SMEs are participating in a passing score workshop and are taking a test that has been constructed in a prior workshop, these licensed clinicians will also struggle.

Mr. Riches spoke about complaints received regarding out of state or national testing. Generally, the concerns fall into two dimensions. One involves the candidate who has been licensed in another state for many years and is a highly regarded practitioner in that state, but has difficulty passing the California examination. Based on his or her accomplishments as a licensee in another state, the candidate does not want to have to retest in California. Mr. Riches described this as a license portability issue in terms of wanting to practice in California but having a basis for licensure elsewhere that is different.

The other dimension pertains to policy implications in terms of issues such as funding for stipends or loan forgiveness programs, and recruitment from other states of much needed practitioners to offset shortages of practitioners in some parts of California. The national licensing examination cuts across several dimensions in terms of where it’s coming from and what the issues are.

Mr. Riches indicated that, as it pertains to the ASWB or social work examination, the Board completed the audit of the national examination and has received the audit report. One significant outcome of the audit report was concern about the manner in which the task and knowledge statements were characterized in their occupational analysis, and the ability to change that to something that is more like the task and knowledge statements related to the California social work examination. A new occupational analysis is underway at the national level, and Mr. Riches indicated the Board would be providing data in order to ensure that a healthy sample of California practitioners was included in that analysis. He stated that because California has not used the national examination in some time, the tendency has been not to survey very broadly in California. Therefore, the Board wants to ensure that this time the ASWB has the benefit of a healthy California sample. He stated that this is an ongoing process.

Ms. Ford expressed that even if the decision was made to again use the national examination for social workers, a separate test regarding law and ethics would still be appropriate. She asked if other states have a separate exam pertaining to law and ethics. Mr. Riches responded affirmatively, and indicated his understanding that the state and law and ethics exam was not generally viewed as a major hurdle. Dr. Montez added that likely this was because an out-of-state licensee coming to practice in California would recognize that law and ethics was something that needed to be studied in order to pass the exam and practice in California. On the other hand, the same person might not prepare in the same manner for an all encompassing exam, thinking that their experience as a licensee would preclude the need for that extent of preparation.
Ben Caldwell asked if the Board can engage in some kind of examination of the results of licensing exams for people who are coming in from out of state. Is there a connection to how long they have been licensed elsewhere, or not? Mr. Riches responded that he would need to look at what data is currently collected and how it is collected, but stated it could be possible to obtain numbers that are close.

Cathy Atkins, California Association of Marriage and Family Therapists (CAMFT), asked if there is a difference in difficulty between the national examination and the California examination. Mr. Riches responded that he did not have readily available the pass/fail information pertaining to the national examination. Mr. Wong added that it is a difficult comparison to make and offered the variation in the pass rate on the California LCSW exam as the basis for his stated position. A brief discussion followed regarding factors that could raise challenges in making such a comparison.

Dr. Montez clarified that the difficulty of the examination should be the same because the criterion is entry-level practice. The pass rates may be different, but the difficulty as defined by a criterion should be the same whether speaking of the national examination or the California examination. She stated the importance of remembering that the difficulty of an examination and the pass rate on the examination are two different issues.

Mr. Wong asked if it would be possible to obtain information about how difficulty is measured and evaluated. Mr. Riches responded that the subject would be addressed at a future committee meeting when passing scores are discussed.

Mr. Caldwell commented that what is heard from people who have taken the national examination and then come to California is that much of the material is the same in terms of what knowledge is needed. The difference seems to be the structure of the California examination, particularly with regard to the clinical vignette examination.

VII. Future Meeting Dates

The next Committee meeting is scheduled for March 23, 2009 in Irvine. Subsequent meetings are slated for May 4, 2009 in San Jose, and June 29, 2009 in the Los Angeles area.

VIII. Suggestions for Future Agenda Items

No suggestions were provided.

Mr. Riches commented that the pace of the Committee meetings would abate a bit in the coming year. He indicated that due to the budget impasse the Committee had been on a “forced march” through the second half of the current year to meet the Committee’s objectives. He explained that the Committee is funded through the Department of Mental Health through MHSA on an annual basis, and therefore there is a finite resource base that needs to be used this fiscal year. The same amount will be allotted to the Committee for use in the next fiscal year. Therefore, the almost monthly scheduling of meetings should be reduced in 2009/2010.

The meeting was adjourned at approximately 12:00 p.m.