



Board of Behavioral Sciences

Memo

1625 North Market Blvd., Suite S-200
Sacramento, CA 95834
(916) 574-7830, (916) 574-8625 Fax
www.bbs.ca.gov

To: Committee Members

Date: January 12, 2024

From: Steve Sodergren
Executive Officer

Subject: Recommendation Regarding Licensure Pathway Survey

To gain more insight into possible barriers that an individual may face while on the pathway to licensure, the Board staff recommends conducting a survey of registrants and licensees. The survey will focus on an individual's education, supervision, and examination experience.

The thirty-question survey will ask questions regarding:

- The quality of an individual's master program in relation to an institution and method of instruction.
- The impact financial resources may have on an individual's overall education experience.
- Possible barriers that exist in finding a supervisor and in the supervision process.
- The impact of an individual's supervision experience in relation to a site setting or method of supervision.
- An individual's overall satisfaction with the supervision experience.
- The impact that various test preparation methods may have on the success of an examination candidate.
- The extent to which individuals believe education, supervision, or test preparation courses were effective.

Staff will distribute the survey through social media and through email. Additionally, professional associations will be asked to alert their members of the survey. The goal is to have the survey results presented at the Workforce Development committee meeting in April.

Staff has compiled a list of potential survey questions. Based on today's discussion, staff recommends that Committee members and stakeholders review the questions (**Attachment A**) and determine if any additional questions should be added. Staff will then compile the questions and solicit survey responses.

Attachments

Attachment A: Proposed Licensure Pathway Survey Questions

DRAFT QUESTIONS FOR LICENSURE PATHWAY SURVEY

GENERAL QUESTIONS

- 1. Are you currently a:**
 - a. Registrant (AMFT, ASW, APCC) (Mark all that apply)
 - b. Licensee (LMFT, LCSW, LEP, LPCC) (Mark all that apply)

- 2. What year was your master's degree conferred?**

- 3. What year did you obtain your:**
 - a. California Registration (AMFT, ASW, APCC) (Comment Box or N/A)
 - b. California License (LMFT, LCSW, LEP, LPCC) (Comment Box or N/A)

EDUCATION EXPERIENCE

- 4. Was your master's program:**
 - a. Online
 - b. In-Person
 - c. Hybrid (Online and In-Person)

- 5. Was your master's program from a:**
 - a. Public institution (CSU)
 - b. Public institution (UC)
 - c. Private institution

- 6. Were you able to attend school full time during your master's program?**
 - a. Yes
 - b. No

- 7. Did you work in addition to attending your master's program?**
 - a. I did not work during my master's program (other than practicum)
 - b. I worked less than 10 hours per week.
 - c. I worked 10-20 hours per week.
 - d. I worked 20-30 hours per week.
 - e. I worked 30-40 hours per week.
 - f. I worked more than 40 hours per week.

- 8. Did your university educate you about (mark all that apply):**
 - a. Pathways to licensure (How to obtain a license)
 - b. California Law & Ethics Examinations
 - c. Clinical Licensure Examinations
 - d. Telehealth

- 9. Did you experience any issues or barriers in obtaining your master's degree?**
- a. Yes
 - b. No
- Comment (If yes, please explain)

SUPERVISION EXPERIENCE

- 10. On a scale of 1 to 5, how difficult was it to find a supervisor?**

- 1= Extremely Difficult
- 2= Difficult
- 3= Neither Difficult nor Easy
- 4= Easy
- 5= Extremely Easy

Comment (Do you have any additional comments about your experience finding a supervisor)

- 11. How many supervisors do you/or have you had?**

- 12. Is/was your supervision experience gained in:**

- a. Private Practice
- b. Government Agency
- c. Non-Profit
- d. Other

- 13. Is/was your supervision:**

- a. In Person
- b. Via Videoconferencing
- c. Mixture of Both

- 14. If you receive(d) supervision via videoconferencing, on a scale of 1 to 5, do you feel it is/was as effective as in person supervision?**

- 1= Extremely Ineffective
- 2= Ineffective
- 3= Neither Ineffective nor Effective
- 4= Effective
- 5= Extremely Effective

Comment (Do you have any additional comments about supervision via videoconferencing)

15. Do/did you pay for supervision?

- a. Yes
- b. No

Comment (If yes, how much per supervision session)

16. On a scale of 1 to 5, how satisfied are you with your overall supervision experience?

- 1= Extremely Dissatisfied
- 2= Dissatisfied
- 3= Neither Dissatisfied nor Satisfied
- 4= Satisfied
- 5= Extremely Satisfied

Comment (Do you have any additional comments about your supervision experience)

17. Did you experience any issue or barriers obtaining your supervised experience?

- a. Yes
- b. No

Comment (If yes, please explain)

EXAMINATION EXPERIENCE

22. What Board exams have you participated in:

- a. California Law & Ethics Exam
- b. LMFT Clinical Exam
- c. ASWB Clinical Exam
- d. NCMHCE Clinical Exam
- e. Other
- f. N/A

23. Did you have to retake a law and ethics exam?

- a. Yes
- b. No
- c. N/A

24. Did you have to retake a clinical exam?

- a. Yes
- b. No
- c. N/A

25. How did you prepare for the examination? (Select all that apply)

- a. Self-study
- b. Study group with peers
- c. Exam preparation program or course
- d. Other (Comment)
- e. N/A

26. On a scale of 1 to 5, how effective was your education in preparing you for the licensure exam(s)?

- 1= Extremely Ineffective
- 2= Ineffective
- 3= Neither Ineffective nor Effective
- 4= Effective
- 5= Extremely Effective
- 6= N/A

Comment (Do you have any additional comments).

27. On a scale of 1 to 5, how effective was your supervision in preparing you for the exam(s)?

- 1= Extremely Ineffective
- 2= Ineffective
- 3= Neither Ineffective nor Effective
- 4= Effective
- 5= Extremely Effective
- 6= N/A

Comment (Do you have any additional comments).

28. If you took an exam prep program, how effective was it in preparing you for the exam?

- 1= Extremely Ineffective
- 2= Ineffective
- 3= Neither Ineffective nor Effective
- 4= Effective
- 5= Extremely Effective
- 6= N/A

Comment (Do you have any additional comments)

29. What did your exam prep program cost? (Comment box)

30. Did you experience any issues or barriers during the examination process?

- a. Yes
- b. No (If yes, please explain)
- c. N/A