



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 2, 2023

From: Steve Sodergren

**Executive Officer** 

**Subject: Workforce Development Action Plan** 

Due to an increase in the use of mental health services and the strain on the California health system caused by the pandemic, Californians are finding it more difficult to access the mental health services that they need. Currently, the mental health workforce appears to be insufficient to meet this increased demand, especially in some geographic areas. The mental health workforce includes approximately 130,000 board registrants and licensees as well as student trainees who are pursuing a degree that will lead to licensure with the Board.

In February of 2019, the California Future Health Workforce Commission published a report titled "Meeting the Demand For Health" (Link: Meeting Demand For Health Final Report 2019). This report forecasted, based upon current service utilization patterns, that by 2028 California will have 11% fewer psychologists, marriage and family therapists (LMFTs), social workers (LCSWs) and clinical counselors (LPCCs). It also indicated that "at the core the challenge is the simple fact that California does not have enough of the right types of health workers in the right places to meet the needs of its growing, aging, and increasingly diverse population."

As a regulatory agency, the Board's primary mandate is consumer protection. Ensuring Californians have access to needed mental health services is a consumer protection issue. It is important that the Board makes a concerted effort in to implement policy decisions and perform outreach that will serve to address the workforce shortage. When developing a workforce action plan, the Committee should focus on three main efforts:

- 1. Data Analysis
- 2. Reducing Barriers
- 3. Recruitment and Retention.

The following are suggested initial action items that may be considered by the Committee for each effort.

## 1. Data Analysis

A more comprehensive data collection and analysis will be necessary for the Committee to determine the best possible solutions to the workforce shortage as it pertains to its licensing population.

- Continuing to partner with the California Department of Health Care Access and Information (HCAI) to identify service gaps and review additional demographic data currently being collected from our licensees upon renewal.
- Performing analysis of the Board's licensing data to determine the dropout rate for candidates in the licensing pathway, whether the supervisory population is sufficient to meet future demand, and the effects licensee retirements may have on the mental health provider population.
- Adding a voluntary survey to Board-administered exams: the law & ethics exam, marriage and family clinical exam and the licensed educational psychologist standard written exam, to collect demographic data of exam candidates to identify possible pass rate disparities.

## 2. Reducing Barriers to Licensure

Mental health services are provided by a myriad of individuals, from behavioral health coaches to master level professionals. There are many barriers that may lessens ones resolve to become a licensed professional including: lack of understanding of the possible career paths, lack of financial resources, and confusion about the requirements and different pathways to licensure.

- Identify common application deficiencies and implement policies, procedures and outreach in order to reduce the application deficiency rates.
- Identify common reasons why applicants are not meeting the education requirements and determine if any adjustments should be made to the current requirements.
- Produce and publish outreach materials that clearly explain the licensure process for applicants.
- Review the current pass rates for Board administered and national exams to determine where disparities exist and work with education institutions to determine ways in which the Board can provide support in addressing these disparities.
- Identify possible ways to reduce the monetary burden of the licensing process by considering modification of exam retake fees, providing contuing education credits for licensees that act as supervisors, and considering the development of a no charge 3 hour Law & Ethics continuing education course for registrants.

 Review licensing requirements and application procedures to identify any current statutes and regulations that can be amended to reduce barriers to licensure while maintaining strong public protection.

## 3. Recruitment and Retention

The decision to enter into the mental health profession is a personal choice based on a variety of factors, including how one views the general area of mental health in our society and ones understanding of the roles each type of mental health professional. Increasing a diverse mental health workforce will require the efforts of many state, public and education institutions.

- Produce outreach materials that explain the various mental health professions, the role each profession plays in proving mental health services, and the various pathways to licensure.
- Work with staff to develop outreach presentations about the roles of its licensees that could be used by outside public health agencies and education institutions in the recruitment and retention of individuals from underrepresented and low-income backgrounds.
- Support HCAI's Healthcare Workforce Initiatives including the California Children and Youth Behavioral Health Initiative (<u>Link: Children and Youth Behavioral Health Initiative</u>)
- Support and promote of HCAI's loan repayment, scholarship and grant programs. (Link: HCAI Loans, Scholarships, Grants)

## Recommendation

Have an open discussion on the proposed action items. Direct staff to develop a project plan with short term and long term goals, and bring the document back to the Licensing Committee for review and further discussion.