

BBS Board Meeting Notes

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I. Chair Report

Business and Professions Code section 4990 requires the Board to elect a Chair and Vice-Chair prior to June 1 of each year. During the May 2017 Board Meeting, Deborah Brown was re-elected as Board Chair and Betty Connolly was elected Vice Chair at this meeting.

II.. Executive Officer's Report

a. Budget Report

The Board's budget for Fiscal Year (FY) 2016/2017 is \$12,550,000. FY 2016/2017 expenditures received as of June 30, 2017 total \$11,083,923 (88%) of the Board's budget. As of June 30, 2017, the Board had collected \$10,054,616 in total revenue. The Board's budget for fiscal year 2017/2018 is \$11,316,000.

b. Operations Report

Overall, application volumes increased in the fourth quarter of FY 2016/2017 by 30%. The Board's Processing Times continue to be under 30 days for most applications. The slight increase in the LCSW examination processing times is due to a vacancy in this unit. A total of 1,440 initial licenses were issued in the fourth quarter. As of June 30, 2017, the Board has 108,662 licensees and registrants. This figure includes all licenses that have been issued that are current and/or eligible to renew.

A total 6,655 examinations were administered in the fourth quarter. Eight (8) examination development workshops were conducted from April through June. A revised Application for Re-Examination is now available on our website. The new form provides improved language regarding the 12-hour law and ethics course. Subject Matter Expert (SME) recruitment is ongoing. Additional Licensed Professional Clinical Counselor's (LPCC) and Licensed Educational Psychologist's (LEP) are needed. Interested licensees are encouraged to apply via the Board's website. The Occupational Analysis for LPCC's is scheduled to begin on October 18 and 19, 2017. To increase the pool of LPCC subject matter expert's recruitment contact letters were sent to all current LPCC's on August 2, 2017. Board staff continues to work collaboratively with OPES on workshop coordination and communication with testing vendors.

During the fourth quarter, the Enforcement staff received 477 consumer complaints and 223 criminal convictions in the fourth quarter. 622 cases were closed and 54 cases were referred to the Attorney General's office for formal discipline. 18 Accusations and 11 Statement of Issues were filed this quarter. The number of final citations for the fourth quarter is 69. The average number of days to complete Formal Discipline in the fourth quarter was 880 days. This statistic is measured from the date the Board receives the complaint to the date the discipline becomes effective. The average number of days the

case is with the Attorney General's Office in the fourth quarter is 469. This statistic is measured from the date the Board refers the matter to the Attorney General's to the date the case is complete. The average number of days to complete all Board investigations in the fourth quarter is 173 days.

The Board has audited a total of 542 licensees. Approximately 25-27% of those audited had some deficiency in their CEU's. For the period of January through June of 2017, the total number of notices that went out to LMFTs was 298. Of those who received the notice, 223 passed the audit and 75 failed.

The top reasons a licensee failed the Continuing Education Audit during this time period are as follows. Failure to complete the required coursework within the renewal period (e.g. law and ethics); First time renewals did not complete the HIV/AIDS course; Completing continuing education courses from unapproved providers. All licensees who fail the Continuing Education Audit are referred to the Board's Enforcement Unit for issuance of a citation and fine.

c. Personnel Report

The Board currently has five vacancies. One of the vacancies is the Management Services Technician (MST) / Licensing. This position will perform the duties related to the Licensed Marriage and Family Therapist (LMFT) as a Licensing Evaluator.

d. Strategic Plan Update

The Board adopted its current Strategic Plan in November 2013. The current Strategic Plan is active through 2017. A review of the 2014-2017 Strategic Plan reveals that many of the Board's goals and objectives have been accomplished. The Board will meet on October 19-20, 2017, in Sacramento, California to develop a new Strategic Plan. Staff from the Department of Consumer Affairs SOLID Training and Planning Solutions (SOLID) will assist the Board in preparing the plan. So that a relevant plan is developed, SOLID will seek information from Board staff, Board members, and Board stakeholders. The information will be gathered through interviews and surveys. Based on this information, the Board will develop its new Strategic Plan.

e. Web Site Redesign Update

The Board is in the process of redesigning its website to improve user experience and streamline access to important information. It is the intent to go live with the newly designed website in September 2017. Board staff discussed some of the changes that will be made to reorganize and redesign the website.

The Board said that they were hoping to improve the ease by which all applicants, including LMFTs and LMFT Registered Interns, are able to access important and commonly requested content, such as renewal forms, etc.

III. Presentation Regarding Board Licensure Examination Development – Office of Professional Examination Services

The staff of the Office of Professional Examination Services (OPES) offered an overview of the exam development process. This office provides psychometric analysis, and input regarding examination development to the Department of Consumer Affairs. They described the process of training and working with the various subject matter experts on the topic of examination development. OPES conducts four examination development workshops, each of which focuses upon a core aspect of exam development: 1. Item Writing, 2. Item Review, 3. Exam Construction, and 4. Exam Analysis.

In developing the clinical exams, they focus on: 1. What does the candidate need to demonstrate in terms of minimum competence necessary for independent practice? 2. What do they think a newly licensed practitioner is likely to encounter during his or her first five years of practice?

They explained that every year the board tries to recruit subject matter experts to participate in the exam development process. It is always desirable to have a large selection of qualified experts, because the minimum standards are being conceptualized based upon the input of these experts and upon the “occupational analysis” of each profession which is overseen by the Board. Another occupational analysis is going to be conducted sometime next year.

There was considerable discussion regarding the issue of pass rates. Stakeholders challenged OPES presenters regarding the low pass rates, pointed out that the pass rates were significantly lower on the new clinical exam, compared to the prior exams, and wondered whether there was an unreasonable decline in pass rates. OPES staff stated that they do not have an expectation as to what the pass rates “should be” for any given exam. They state that they do not try to “manipulate” tests to achieve a particular pass rate. In the most recent quarter, there was approximately a 60% pass rate. OPES state that the pass rates are perceived as rising on the clinical exam, and they anticipate that the pass rates will “stabilize” around 60-70%, as seen with the prior exams. Ms. Madsen said she will work with OPES to try and look more closely at the issue of diminished pass rates and see if there could be further analysis of the population of test takers which may yield improved understanding of pass-rate variance. Ms. Madsen repeatedly stressed that she had “one hundred percent confidence” in the exams and in the examination development process. There was some concern expressed by stakeholders as to the possibility that the core content being tested did not accurately reflect what is being taught and whether the questions addressed what is necessary for a newly licensed practitioner to engage in safe and competent practice.

IV. Presentation Regarding the Association of Social Work Boards Practice Mobility Strategy – Mary Jo Monahan, Association of Social Work Boards Executive Director

Association of Social Work Boards (ASWB) is a non-profit entity which exists for the primary mission of advising regulatory boards concerning social work practice in all 50 states, Canada, and many other countries. Every 5-7 years, they conduct a “practice analysis” of social work. The presentation focused on their efforts to try to develop a “model of mobility/portability” that will make it easier for social workers who are licensed on one jurisdiction to become licensed in another jurisdiction. They define mobility as: The ability to get an equivalent license to practice social work in another state or province.” The presenter stated that ASWB strongly believes that it is possible to develop secure databases of

information regarding practitioners, so any state could obtain copies of key source documents about a practitioner, in order to expedite licensure of that person in their own state.

V. Policy and Advocacy Committee Recommendations

a. Discussion and Possible Action Regarding Recommendation to Propose Legislation to Delete Business and Professions Code Section 650.4 - MFT Referral Service Registrations

The Board discussed the issuance of MFT referral service registrations, and whether these registrations are necessary to ensure public protection. Existing Law prohibits a licensed healing arts practitioner from offering, delivering, receiving, or accepting a rebate, refund, commission, preference, discount, or other consideration, monetary or not, as compensation for referring patients, clients or customers to someone. Currently the Board has 25 registered MFT referral services. The majority of these were issued between 1998 and 2003. However, the last one was issued in 2010. The Breeze system currently does not have the capacity to issue MFT referral service registrations. There is no fee charged for the issuance of a MFT referral service registration, and they do not need to be renewed. All of the registered referral services list an expiration date of January 1, 2050 (BBS says that is likely a computer system default). At its June 23, 2017 meeting, the Policy and Advocacy Committee discussed the need for the Board to register MFT referral services, and whether these registrations serve to protect the public.

The Board discussed the history of legislation concerning the regulation of approved MFT Referral Service Registrations. They were intended to create a mechanism for MFTs to be able to receive referrals from a central resource and to financially support that entity without it being construed as illegal payment for referrals. The popularity and apparent need for, MFT Referral Service Registrations has sharply declined over the years. Board members and stakeholders present expressed the opinion that MFT Referral Service Registrations were probably outdated and unnecessary and that the development of advertising via the Internet probably led to their limited utility.

The Committee concluded that these registrations are outdated and no longer needed, and recommended that the Board pursue legislation to strike BPC Section 650.4.

b. Discussion and Possible Action Regarding Recommendation to Propose Legislation to Amend Business and Professions Code Sections 4980.72, 4996.17, and 4999.60 – Supervised Experience Requirements for Out-of-State Applicants

The law for licensed clinical social workers (LCSWs) requires an applicant who is licensed out-of state to have supervised experience that is substantially equivalent to California's supervised experience requirements. If the applicant has been licensed for at least four years immediately preceding the date of application in California, the law does not require that the applicant have the required 3,200 experience hours, as long as the Board determines their experience was substantially equivalent. However, if the applicant has been licensed in the other state for less than four years immediately preceding the date of application in California, the Board must verify that the individual has the 3,200 hours of supervised experience. Such an applicant gets credit for time licensed at a rate of 100 hours per month, up to a maximum of 1,200 hours.

The Board voted to accept staff's proposed minor clarifying amendments to the language in BPC §§4980.72(b)(3)(i) and 4999.60(b)(3)(i) to make the LMFT and LPCC licensing laws similar to the law for LCSW out-of-state applicants.

VI. Exempt Setting Committee Update

The third meeting of the Exempt Committee was held on June 23, 2017. During this meeting, committee members and stakeholders reviewed and approved two surveys. The first survey is directed to school placement coordinators. The survey's goal is to determine whether current laws related to students in practicum or fieldwork performing services at a work site need to be changed. The second survey is directed to Board licensees, Board registrants, and exempt setting agency directors. The survey's goal is to obtain information that will help determine whether consumers may be harmed by unlicensed staff performing clinical services; and, to assist the Board in defining the terms "private practice" "exempt" and other types of settings. Both surveys will close in a few weeks. The data will be analyzed and the results will be presented at the September 15 meeting.

The Committee discussed two other topics: Employment through temporary staffing agencies and the 90-day rule. The concern with temporary staffing agencies is that these entities place an associate in a work setting to provide clinical services. However, the associate is not considered an employee in the work setting in which they are placed. As a result, the associate may receive a 1099 from the work site, suggesting he/she is an independent contractor, which is prohibited. Or, the associate receives a W-2 listing the address of the temporary staffing agency as the associate's employer. The temporary staffing agency does not provide clinical services therefore, the hours are disallowed. The committee members directed board staff to draft language specific to temporary staffing agencies that will allow for this practice to continue; but, with specific guidelines so that an associate may receive credit for supervised work hours. Discussion regarding the 90-day rule will continue at the next Exempt Setting Committee meeting. The next Exempt Setting Committee is scheduled for September 15, 2017 in Sacramento.

VII. Discussion and Possible Action Regarding Association of Marital Family Therapy Board's Mobility Pathway

The AMFTRB Mobility Proposal resolves several key barriers to out of state licensure: Education – The proposal recognizes that the degree obtained to qualify for initial licensure met the educational requirements for licensure as a marriage and family therapist at that time; regardless of the number of units within the degree program or age of the degree. The proposal provides the opportunity for licensees with older degrees to become licensed other states; Post-Graduate Clinical Supervised Experience – The proposal recognizes that the individual completed the clinical supervised experience hours required in the initial state of licensure; regardless of the number of hours. The proposal also recognizes the individual is fully licensed and practicing. Therefore, there is little value or enhancement to consumer protection by requiring the individual to gain additional supervised clinical experience as a condition of licensure; Passing the Clinical Examination – The proposal recognizes both the national MFT and California Clinical MFT examinations as acceptable examinations for MFT licensure. Both examinations are developed in accordance with professional licensure testing standards. This eliminates

the requirement for applicants to take and pass a second clinical examination for licensure. The AMFTRB Mobility Proposal creates the opportunity for an efficient process for licensure in other states. Recognizing that the licensee has satisfied the minimum competencies required for initial MFT licensure eliminates the burdensome tasks to demonstrate completion of supervised work experience hours or retaking a clinical examination. Additionally, the AMFTRB Mobility Proposal allows states to retain any additional requirements for licensure such as fingerprinting or passing a jurisprudence examination. The Mobility Proposal also addresses concerns related becoming licensed in another state to provide teletherapy. Specifically, the difficulty in becoming licensed in another state. The use of teletherapy across state lines is increasing. Providing an efficient licensure process across state lines promotes compliance with state licensing requirements. As a result, consumers receiving teletherapy services are protected.

The final draft of the AMFTRB Mobility Proposal will be presented to members during the 2017 Annual Delegate Meeting in Atlanta, Georgia. Kim Madsen discussed that she plans to attend the meeting in Atlanta and expressed that the Board is very positive about the proposal and the likelihood that mobility and license portability will continue to improve, based upon the concepts discussed at the recent meetings and discussion in Denver. The Board expressed their strong desire to continue to support the issue of licensure mobility and portability. The Board president expressed an interest in attending the Atlanta meetings on this topic if possible, to demonstrate the Board's strong interest in the issues being discussed. It was not determined at this time whether any Board members will be able to attend the Atlanta meeting.

VIII. Status on Board-Sponsored Legislation, Board-Supported Legislation, and Board Monitored Legislation

a. Assembly Bill 93 (Medina) - Healing Arts: Marriage and Family Therapists, Clinical Social Workers, Professional Clinical Counselors: Required Experience and Supervision

This bill proposal represents the work of the Board's Supervision Committee. Its amendments focus on strengthening the qualifications of supervisors, supervisor responsibilities, types of supervision that may be provided, and acceptable work settings for supervisees. The bill also strives to make the Board's supervision requirements more consistent across its licensed professions. This bill proposal was approved by the Board at its November 4, 2016 meeting. Minor technical amendments to the bill were approved at the Board's March 3, 2017 meeting.

Status: AB 93 is a two-year bill

b. Senate Bill 800 - Proposed Technical and Non-Substantive Amendments to Business and Professions Code Sections 801, 801.1, 802, 4980.09, 4999.12.5, 4980.44, 4984.7, 4999.32, 4999.42, 4999.53, 4999.62, 4999.63, 4999.120, 4984.4, 4984.7, 4996.3, 4996.6, 4999.32, 4999.33, 4999.60, 4999.61, 4984.9, 4992.8, 4989.46, 4999.18, 4980.72, 4996.17, 4999.53; Evidence Code Section 1010(f)(o); and Penal Code Section 11165.7(a)(25) and (a)(40)

This proposal, approved by the Board at its November 4, 2016 meeting, makes minor, technical, and non-substantive amendments to add clarity and consistency to current licensing law.

Status: This bill is currently in the Assembly Appropriations Committee.

c. Assembly Bill 191 (Wood) - Mental Health: Involuntary Treatment

This bill adds licensed marriage and family therapists and licensed professional clinical counselors to the list of professionals who are authorized to be the secondary signatory to extend involuntary commitments, under certain circumstances. At its May 12, 2017 meeting, the Board took a “support” position on this bill.

Status: This bill is on third reading in the Senate.

d. Assembly Bill 456 (Thurman) – Healing Arts: Associate Clinical Social Workers

This bill would extend the Board’s “90-day rule” to applicants for registration as an associate clinical social worker (ASW). Currently, the 90-day rule allows applicants for registration as a marriage and family therapist intern or a professional clinical counselor intern to count post degree hours of supervised experience before receiving a registration number, as long as they apply for their intern registration within 90 days of the granting of their qualifying degree. At its May 12, 2017 meeting, the Board took a “support” position on this bill.

Status: This is a two-year bill.

e. Assembly Bill 508 (Santiago) – Health Care Practitioners: Student Loans

This bill would remove a healing art board’s ability to issue a citation and fine and its ability to deny an application for a license or renewal of a license due to the licensee or applicant being in default on a U.S. Department of Health and Human Services education loan. At its May 12, 2017 meeting, the Board took a “support” position on this bill.

Status: This bill is on third reading in the Senate.

f. Assembly Bill 1116 (Grayson) – Peer Support and Crisis Referral Services Act

This bill establishes that a communication between an emergency service personnel worker and a peer support team member, crisis hotline staffer, or a crisis referral service staffer is privileged for a noncriminal proceeding to the same extent and limitations as a communication between a patient and a psychotherapist. At its May 12, 2017 meeting, the Board took a “support” position on this bill.

Status: This bill is in the Senate Appropriations Committee.

g. Assembly Bill 1188 (Nazarian) – Health Professions Development: Loan Repayment

This bill would increase the Mental Health Practitioner Education Fund fee that licensed marriage and family therapists and licensed clinical social workers pay upon license renewal 128 from \$10 to \$20. It

would also require LPCCs to pay a \$20 fee into the fund upon renewal, and would allow LPCCs and PCC interns to apply for the loan repayment grant if they work in a mental health professional shortage area. At its May 12, 2017 meeting, the Board took a “support if amended” position on this bill, asking for minor amendments and a delayed implementation until July 1, 2018. Since the Board meeting, the Board’s requested amendments were made, and therefore the Board now has a “support” position.

Status: This bill is in the Senate Appropriations Committee.

h. Assembly Bill 1372 (Levine) – Health Professions Development: Loan Repayment

This bill allows a certified crisis stabilization unit that provides specialty mental health services, at its discretion, to provide medically necessary crisis stabilization services to individuals beyond the allowable treatment time of 24 hours under certain circumstances. At its May 12, 2017 meeting, the Board took a “support” position on this bill.

Status: This bill is in the Senate Appropriation Committee’s Suspense File.

i. Assembly Bill 1591 (Berman) – Medi-Cal: Federally Qualified Health Centers and Rural Health Center: Licensed Professional Clinical Counselors

This bill would allow Medi-Cal reimbursement for covered mental health services provided by a licensed professional clinical counselor employed by a federally qualified health center or a rural health clinic. At its May 12, 2017 meeting, the Board took a “support” position on this bill.

Status: This bill is in the Senate Appropriation Committee’s Suspense File.

j. Senate Bill 27 (Morrell) – Professions and Vocations: Licensees: Military Service

This bill would require licensing boards within the Department of Consumer Affairs (DCA) to grant fee waivers for the application for and issuance of an initial license to an applicant who has served as an active duty member of the California National Guard or the U.S. Armed Forces and was honorably discharged. At its May 12, 2017 meeting, the Board took a “support” position on this bill.

Status: This is a two-year bill

k. Senate Bill 355 (Lara) – Privacy: Agencies: Personal Information

This bill would provide additional privacy protections for personal information that is submitted to state agencies from an applicant for public services or programs. At its May 12, 2017 meeting, the Board took a “support” position on the May 3, 2017 version of this bill. Amendments have been made to the bill since that time, some of which may be substantive.

Status: This bill is in the Assembly Appropriations Committee.

l. Senate Bill 374 (Newman) – Health Insurance: Discriminatory Practices: Mental Health

This bill grants the Department of Insurance the authority to require that large group health insurance policies and individual or small group health insurance policies must provide all covered mental health and substance use disorder benefits in compliance with federal law. This is parallel to current authority already given to the Department of Managed Health Care for its regulation of large, individual or small group health care service plans. At its May 12, 2017 meeting, the Board took a “support” position on this bill.

Status: This bill was signed by the Governor (Chapter 162, Statutes of 2017).

m. Assembly Bill 89 (Levine) – Psychologists: Suicide Prevention Training

This bill would require, beginning January 1, 2020, an applicant for licensure as a psychologist, or a licensed psychologist, upon renewal of his or her license, to demonstrate completion of at least six hours of coursework or supervised experience in suicide risk assessment and intervention. At its May 12, 2017 meeting, the Board decided to remain neutral on this bill.

Status: This bill is on third reading in the Senate

n. Assembly Bill 700 (Jones-Sawyer) – Public Health: Alcoholism or Drug Abuse Recovery: Substance Use Disorder Counseling

This bill would establish a career ladder for substance use disorder counselors, with classifications for substance use disorder counselor certification or registration. At its May 12, 2017 meeting, the Board discussed the bill, and requested an amendment to clarify that Board trainees and registrants do not have to have a substance use disorder certification to engage in the practice of substance use disorder counseling. This amendment has now been made.

Status: This is a two-year bill.

o. Assembly Bill 767 (Quirk-Silva) – Master Business License Act

This bill creates a master business license system under the Governor’s Office of Business and Economic Development. It would allow a person who needs to apply for more than one business license to submit a single master application through GO-Biz, which would then distribute the application information to the various relevant licensing entities. At its May 12, 2017 meeting, the Board decided to take a “support if amended” position on this bill, and ask that the Board be exempted from the bill’s provisions.

Status: This is a two-year bill.

p. Senate Bill 715 (Newman) – Department of Consumer Affairs: Regulatory Boards: Removal of Board Members

This bill would allow the Governor to remove a board member appointed by him or her for failure to attend board meetings. At its May 12, 2017 meeting, the Board decided to watch this bill. St

Status: This bill has been placed in the Assembly Inactive File.

q. Senate Bill 762 (Hernandez) – Healing Arts License: License Activation Fee Waiver

This bill would require all healing arts boards under the Department of Consumer Affairs (DCA) to waive the renewal fee for an inactive licensee returning to active status, if the licensee will solely be providing voluntary, unpaid services to indigent patients in medically underserved or critical-need population areas. At its May 12, 2017 meeting, the Board took an “oppose unless amended” position on this bill, asking that it be excluded from the bill’s provisions.

Status: This is a two-year bill

IX. Status of Board Rulemaking Proposals

a. English as a Second Language: Additional Examination Time: Add Title 16. California Code of Regulations Section 1805.2

This proposal would allow the Board to grant time-and-a-half (1.5x) on a Board-administered examination to an English as a second language (ESL) applicant, if the applicant meets specific criteria demonstrating limited English proficiency. The proposal was approved by the Board at its meeting in November 2015. It was published in the California Regulatory Notice Register on January 1, 2016. Upon review by the Office of Administrative Law (OAL), staff was notified of wording changes necessary for approval. The proposed changes were approved by the Board in March 2017. This regulation has now been approved by OAL. The regulations will be effective October 1, 2017.

b. Supervision: Amend Title 16, California Code of Regulations Sections 1820, 1821, 1833, 1833.1, 1833.2, 1870 and 1870.1; Add Sections 1821.1, 1821.2, 1821.3, 1833.1.5, 1834, 1869, 1870.5 and 1871; Repeal Sections 1822 and 1874

This proposal would: Revise the qualifications to become supervisor; Require supervisors to perform a self-assessment of qualifications and submit the self-assessment to the Board; Set forth requirements for substitute supervisors; Update and strengthen supervisor training requirements; Strengthen supervisor responsibilities, including provisions pertaining to monitoring and evaluating supervisees; Strengthen requirements pertaining to documentation of supervision; Make supervision requirements consistent across the three licensed professions; and Address supervision gained outside of California. The proposal was approved by the Board at its meeting in November 2016, but the review process cannot begin until the Board’s supervision legislation (AB 93, now a two-year bill) has been signed

c. Enforcement: Amend Title 16, California Code of Regulations Sections 1823, 1845, 1858, 1881, 1886.40, 1888 and Uniform Standards Related to Substance Abuse and Disciplinary Guidelines

This proposal would result in updates to the Board’s disciplinary process. It would also make updates to the Board’s “Uniform Standards Related to Substance Abuse and Disciplinary Guidelines (Revised October 2015),” which are incorporated by reference into the Board’s regulations. The proposed changes fall into three general categories: 1. Amendments seeking to strengthen certain penalties that

are available to the Board; 2. Amendments seeking to update regulations or the Uniform Standards/Guidelines in response to statutory changes to the Business and Professions Code; and 3. Amendments to clarify language that has been identified as unclear or needing further detail. The proposal was approved by the Board at its meeting in February 2017, and is in the new “initial review phase” process required by DCA. Upon completion of the DCA review, the proposal will be submitted to OAL for publishing to initiate the 45-day public comment period.

d. Application Processing Times and Registrant Advertising: Amend Title 16. California Code of Regulations, Sections 1805.1 and 1811

This proposal would amend the Board’s advertising regulations in line with SB 1478 (Chapter 489, Statutes of 2016) which changes the term “intern” to “associate” effective January 1, 2018, and makes several technical changes. This proposal would also amend the regulation that sets forth minimum and maximum application processing time frames. The final proposal was approved by the Board at its meeting in November 2016. The proposal has passed the new “initial review phase” process required by DCA. The proposal was then published in the California Regulatory Notice Register on July 7, 2017. The 45-day public comment period ended on August 21, 2017. The proposal is pending approval from the OAL.

e. Contact Information; Application Requirements; Incapacitated Supervisors: Amend Title 16. California Code of Regulations, Sections 1804, 1805 and 1820.7; Add Section 1815.8

This proposal would: Require all registrants and licensees to provide and maintain a current, confidential telephone number and email address with the Board; Codify the Board’s current practice of requiring applicants for registration or licensure to provide the Board with a public mailing address, and ask applicants for a confidential telephone number and email address. 133 (Board of Behavioral Sciences Memo; Codify the Board’s current practice of requiring applicants to provide documentation that demonstrates compliance with legal mandates, such as official transcripts; to submit a current photograph; and for examination candidates to sign a security agreement; Require certain applications and forms to be signed under penalty of perjury; Provide standard procedures for cases where a registrant’s supervisor dies or is incapacitated before the completed hours of experience have been signed off. The proposal was approved by the Board at its meeting in March 2017, and is in the new “initial review phase” process required by DCA, which can take four or more months. Upon completion of the DCA review, the proposal will be submitted to OAL for publishing to initiate the 45-day public comment period.