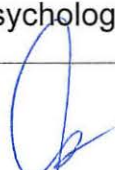




## MEMORANDUM

<b>DATE</b>	May 8, 2014
<b>TO</b>	Psychology Board Members
<b>FROM</b>	 Lavinia Snyder Licensing/Registration Coordinator
<b>SUBJECT</b>	Satisfaction Survey Results

**Background:**

Attached is the most current Satisfaction Survey Results available.

**Action Requested:**

This item is for informational purposes only, but will be a standing Committee item for updates.



<b>Application Process</b>															
5. Type of Application															
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	<b>Total</b>	<b>Percentage</b>	
Registration applications	1												1	50%	
License applications			1										1	50%	
													2	100%	
6. Please rate the ease of completing the application.															
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	<b>Total</b>	<b>Percentage</b>	
Excellent													0	0%	
Very Good													0	0%	
Good													0	0%	
Fair			1										1	50%	
Poor	1												1	50%	
													2	100%	
7. Was the application processed in a timely manner?															
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	<b>Total</b>	<b>Percentage</b>	
Yes													0	0%	
No		1	1										2	100%	
													2	100%	
8. Were you contacted in a timely manner regarding any deficiencies in your application?															
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	<b>Total</b>	<b>Percentage</b>	
Yes													0	0%	
No		1	1										2	100%	
Not applicable													0	0%	
													2	100%	
9. How would you rate the courteousness helpfulness and responsiveness of the state person who processed your application?															
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	<b>Total</b>	<b>Percentage</b>	
Excellent													0	0%	
Very Good													0	0%	
Good													0	0%	
Fair													0	0%	
Poor		1	1										2	100%	
													2	100%	
10. If a licensing application, how did you apply?															
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	<b>Total</b>	<b>Percentage</b>	
Online													0	0%	
US Mail			1										1	100%	
In Person													0	0%	
<b>Exam Process (Licensure Applicants Only)</b>													1	100%	

11. How would you rate your experience with the scheduling process to sit for the Examination for Professional Practice in Psychology (EPPP)														
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	<b>Total</b>	<b>Percentage</b>
Excellent													0	0%
Very Good													0	0%
Good		1	1										2	100%
Fair													0	0%
Poor													0	0%
Not applicable													0	0%
													2	100%
12. How would you rate your experience with the scheduling process for the California Psychology Supplemental Examination (CPSE)														
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	<b>Total</b>	<b>Percentage</b>
Excellent													0	0%
Very Good													0	0%
Good			1										1	100%
Fair													0	0%
Poor													0	0%
Not applicable													0	0%
													1	100%
13. How would you rate your overall experience with the BOP's Licensing /Registration Unit.														
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec	<b>Total</b>	<b>Percentage</b>
Excellent													0	0%
Very Good													0	0%
Good													0	0%
Fair													0	0%
Poor		1	1										2	100%
													2	100%