

MINUTES OF BOARD MEETING
November 7-8, 2024

Department of Consumer Affairs
1747 N. Market Blvd., Ruby Room
Sacramento, CA 95834

Board Members Present

Lea Tate, PsyD, President
Shacunda Rodgers, PhD, Vice President
Sheryll Casuga, PsyD, CMPC
Marisela Cervantes, EdD, MPA
Seyron Foo
Mary Harb Sheets, PhD
Julie Nystrom
Stephen Phillips, JD, PsyD
Ana Rescate

Board Members Absent

None

Board Staff

Jonathan Burke, Interim Executive Officer
Stephanie Cheung, Licensing Manager
Sandra Monterrubio, Enforcement Program Manager
Cynthia Whitney, Central Services Manager
Troy Polk, CPD/Renewals Coordinator
Evan Gage, Special Projects Analyst
Cecilia Voon, Board Liaison
Anthony Pane, Board Counsel
Sam Singh, Regulatory Counsel

Thursday, November 7, 2024

Agenda Item #1: Call to Order/Roll Call/Establishment of a Quorum

Dr. Tate called the meeting to order at 8:34 a.m. A quorum was present and due notice had been sent to all interested parties.

Agenda Item #2: President's Welcome

Dr. Tate made opening comments and introduced Dr. Rodgers to lead a mindfulness exercise.

a) Mindfulness Exercise

45
46 Dr. Tate called for Board comment.

47
48 No Board comment was offered.

49
50 Dr. Tate called for public comment.

51
52 No public comment was offered.

53
54 **Agenda Item #3: Public Comment for Items Not on the Agenda. Note: The Board**
55 **May Not Discuss or Take Action on Any Matter Raised During this Public**
56 **Comment Section, Except to Decide Whether to Place the Matter on the Agenda**
57 **of a Future Meeting [Government Code sections 11125 and 11125.7(a)].**

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59 Dr. Tate called for public comment.

60
61 No public comment was offered.

62
63 **Agenda Item #4: Discussion and Possible Approval of the Board Meeting**
64 **Minutes: August 9, 2024**

65
66 It was (M)Phillips(S)Harb Sheets(C) to adopt and approve the August 9, 2024, Board
67 meeting minutes.

68
69 Dr. Tate called for public comment.

70
71 No public comment was offered.

72
73 Dr. Tate called for Board comment.

74
75 No Board comment was offered.

76
77 Votes

78 7 Ayes (Casuga, Cervantes, Foo, Harb Sheets, Nystrom, Phillips, Rodgers,), 2
79 Abstained (Tate, Rescate), 0 Noes

80
81 **Agenda Item #5: Discussion and Possible Approval of the Board Meeting**
82 **Minutes: August 15-16, 2024**

83
84 It was (M)Foo(S)Casuga(C) to approve the August 15-16, 2024, Board meeting
85 minutes.

86
87 Dr. Tate called for public comment.

88
89 No public comment was offered.

90
91 Dr. Tate called for Board comment.

92

No Board comment was offered.

Votes

8 Ayes (Casuga, Cervantes, Foo, Harb Sheets, Nystrom, Phillips, Rodgers, Tate), 1
Abstained (Rescate), 0 Noes

**Agenda Item #6: Discussion and Possible Approval of the Board Meeting
Minutes: September 13, 2024**

It was (M)Nystrom(S)Foo(C) to approve the August 9, 2024, Board meeting minutes.

Dr. Tate called for public comment.

No public comment was offered.

Dr. Tate called for Board comment.

No Board comment was offered.

Votes

7 Ayes (Casuga, Foo, Nystrom, Phillips, Rescate, Rodgers, Tate), 2 Abstained
(Cervantes, Harb Sheets), 0 Noes

Agenda Item #7: President's Report

a) Meeting Calendar

Dr. Tate provided the update on this item and called for Board comment.

No Board comment was offered.

Dr. Tate called for public comment.

No public comment was offered.

Mr. Foo commented that the Board typically tries to coordinate the date of its February
Board meetings to align with its visits to the Legislature.

No further Board comment was offered.

Agenda Item #8: Interim Executive Officer's Report

a) Personnel Update

Mr. Burke provided the update on this item, commenting that the board had filled its last
vacancies in the Enforcement and Licensing Units, and vacancies had been advertised
for two other positions in Central Services, namely the Legislative and Regulatory
Affairs Analyst, and the Renewals Coordinator.

140
141 Dr. Tate called for Board comment.

142
143 Dr. Phillips asked about the difference between the duties of the various analyst-track
144 positions being discussed.

145
146 Mr. Burke explained the differences between Office Technician (OT) and Staff Services
147 Analyst (SSA) in terms of clerical versus analytical responsibilities.

148
149 No further Board comment was offered.

150
151 Dr. Tate called for public comment.

152
153 No public comment was offered.

154
155 **Agenda Item #9: DCA Update**

156
157 Assistant Deputy Director of Board and Bureau Relations Yvonne Dorantes provided
158 the update on this item.

159
160 Ms. Dorantes commented on recent leadership changes to DCA's Diversity, Equity, and
161 Inclusion (DEI) Steering Committee and provided updates on the changes to several
162 training modules.

163
164 She commented that meal and other incidental travel expenses are being brought in line
165 with Federal standards.

166
167 Dr. Tate called for Board comment.

168
169 No Board comment was offered.

170
171 Dr. Tate called for public comment.

172
173 No public comment was offered.

174
175 **Agenda Item #10: Budget Report**

176
177 Ms. Whitney provided the update on this item, starting on page 55 of the meeting
178 materials.

179
180 Dr. Cervantes asked for clarification on how the board's projected revenue could be
181 greater than the budget appropriation.

182
183 Mr. Burke explained that these figures are based on license renewals and include the
184 anticipated rise in revenue from the renewal fee increase.

185
186 No further Board comment was offered.

187

Dr. Tate called for public comment.

No public comment was offered.

Agenda Item #16: Petition for Early Termination of Probation – Roberto A Francis, PsyD

Administrative Law Judge Wim van Rooyen presided. Deputy Attorney General Jade Wolanksy was present and represented the People of the State of California. Dr. Roberto A. Francis, PsyD., was present and represented himself.

Agenda Item #17: Petition for Early Termination of Probation – Sarwat Bashir Waraich, PsyD

Administrative Law Judge Wim van Rooyen presided. Deputy Attorney General Janssen Tan was present and represented the People of the State of California. Dr. Sarwat Bashir Waraich, PsyD., was present and represented herself.

CLOSED SESSION

Agenda Item #18: The Board will Meet in Closed Session Pursuant to Government Code Section 11126(c)(3) to Discuss Disciplinary Matters Including Petitions for Reinstatement, Modification, or Early Termination, Proposed Decisions, Stipulations, Petitions for Reconsideration, and Remands.

Agenda Item #19: Pursuant to Government Code Section 11126(e), the Board Will Convene into Closed Session to Receive Advice From Legal Counsel on Litigation.

Geffner v. Board of Psychology, Los Angeles County Superior Court, Case #22STCP00012

RETURN TO OPEN SESSION

Ms. Nystrom was absent for the rest of the first day's session.

Agenda Item #11: Enforcement Report

Ms. Monterrubio provided the update on this item, starting on page 61 of the meeting materials.

She commented that the board's Enforcement program currently has 53 Subject Matter Experts (SMEs), and that staff worked with the Office of the Attorney General and Division of Investigation in September to facilitate a group training for new and returning experts.

Dr. Tate asked Ms. Monterrubio how many SMEs participated in the September training.

Ms. Monterrubio reported that 19 SMEs participated; out of 32 applications that were received, 13 were denied.

Dr. Harb Sheets asked about the typical reasons an applicant might be denied being enrolled in the SME program.

Ms. Monterrubio replied that applications might be denied based on too-short professional experience, having been subject to disqualifying discipline, or failing a peer review by licensed former Board Members.

No further Board comment was offered.

Dr. Tate called for public comment.

No public comment was offered.

Agenda Item #12: Licensing Report

Ms. Cheung provided the update on this item, starting on page 64 of the meeting materials.

Dr. Tate called for Board comment.

No Board comment was offered.

Dr. Tate called for public comment.

No public comment was offered.

Agenda Item #13: Examination Report

Ms. Hansen provided the update on this item, starting on page 73 of the meeting materials.

Dr. Tate called for Board comment.

No Board comment was offered.

Dr. Tate called for public comment.

No public comment was offered.

Dr. Harb Sheets asked which jurisdictions the Examination for Professional Practice in Psychology (EPPP) testing statistics included, and Ms. Hansen commented that this report was for California takers of the EPPP.

Agenda Item #14: Continuing Professional Development and Renewals Report

284
285 Mr. Polk provided the update on this item, starting on page 75 of the meeting materials.

286
287 Dr. Tate called for Board comment.

288
289 Dr. Phillips asked whether there had not previously been a chart in the Continuing
290 Professional Development (CPD) report that showed the reasons why people were not
291 passing their audits.

292
293 Discussion ensued, and Mr. Burke commented that this was not done regularly, but that
294 such information could be provided in future reports.

295
296 No further Board comment was offered.

297
298 Dr. Tate called for public comment.

299
300 Yanira Servin commented that her staff are still confused about the CPD requirements.

301
302 Mr. Polk commented that board staff are still receiving questions about the
303 requirements, and that there is still some confusion about what activities might satisfy
304 different categories of CPD. He is looking to hold an informational webinar in the first
305 quarter of 2025.

306
307 No further public comment was offered.

308
309 **Agenda Item #15: Outreach and Communications Committee Report and**
310 **Consideration of and Possible Action on Committee Recommendations**

311
312 Dr. Rodgers introduced this item.

313
314 a) Strategic Plan Action Plan Update

315
316 Mr. Burke provided the update on this item, starting on page 79 of the meeting
317 materials.

318
319 Dr. Rodgers called for public comment.

320
321 No public comment was offered.

322
323 b) Social Media Update

324
325 Ms. Whitney provided the update on this item, starting on page 101 of the meeting
326 materials.

327
328 Dr. Rodgers asked Ms. Whitney about engagement with the Board's new LinkedIn
329 page. Ms. Whitney replied that LinkedIn currently had 13 followers.

Ms. Cervantes commented that staff should evaluate which social media platform is likely to foster the most engagement, and that if, for example, X or Facebook is not reaching enough viewers, then staff efforts should be directed more towards platforms with the most engagement.

Ms. Rescate asked whether LinkedIn could be linked to the website, the way X and Facebook icons currently appear, and Ms. Whitney confirmed this could be done.

Dr. Rodgers called for public comment.

No public comment was offered.

c) Website Statistics Update

Ms. Whitney provided the update on this item, starting on page 103 of the meeting materials.

Dr. Rodgers called for Board comment.

No Board comment was offered.

Dr. Rodgers called for public comment.

No public comment was offered.

d) Newsletter Update

Mr. Burke provided the update on this item, starting on page 110 of the meeting materials.

Dr. Rodgers called for Board comment.

No Board comment was offered.

Dr. Rodgers called for public comment.

No public comment was offered.

e) Outreach Activities Update

Mr. Burke provided the update on this item, starting on page 127 of the meeting materials.

Dr. Rodgers called for Board comment.

Dr. Casuga commented that she hoped the board would be able to participate in the CPA Annual Conference in 2025.

379 No further Board comment was offered.

381 Dr. Rodgers called for public comment.

383 Dr. Winkelman commented that CPA would welcome the board's participation in the
384 upcoming CPA conference in Long Beach, CA.

386 No further public comment was offered.

388 f) Review Barriers to Telehealth Survey and Identify Next Steps

390 Mr. Burke provided the update on this item, starting on page 128 of the meeting
391 materials.

393 He explained the decision by staff to present the survey results in a narrative format,
394 given the complexities of the data. He commented that this narrative could be sent out
395 to interested parties with links to salient data within the report.

397 Dr. Harb Sheets asked whether this survey was a departure from the way the board
398 communicates telehealth information with consumers.

400 Mr. Burke commented that the intention of the survey was to find a way around the
401 barriers identified in the survey.

403 Dr. Cervantes commented that the data as presented does not address the issues
404 behind the original intent of the survey. She expressed difficulty in being able to take
405 this data to a partner agency for developing solutions, since this data as presented
406 appears to be lacking in demographic markers.

408 Mr. Burke commented that DCA has guidelines that restrict the sorts of demographic
409 information we may seek.

411 Board discussion ensued as how best to use this data to engage with stakeholders.

413 Dr. Casuga suggested a more visual approach to presenting the survey results,
414 something like an infographic that would be updated live as new information came into
415 play.

417 Dr. Cervantes appealed to any colleagues at UCSF who might be monitoring this
418 meeting, whether they might be interested in analyzing the survey data.

420 Dr. Tate commented that both University of California and the Little Hoover Commission
421 had been approached and both had declined to analyze the data.

423 Mr. Foo suggested software called Tableau might be worth a try for analyzing this data,
424 and he commented that a lot of different government agencies already use it.

426 Dr. Rodgers called for further Board comment.

No further Board comment was offered.

Dr. Rodgers called for public comment.

Dr. Elizabeth Winkelman commented that the federal government has a lot of good information about barriers to access to telehealth.

No further public comment was offered.

Agenda Item #20: Research Psychoanalyst Committee Report and Consideration of Committee Recommendations

Dr. Phillips introduced this item, and Ms. Whitney provided the update starting on page 130 of the meeting materials.

BUSINESS AND PROFESSIONS CODE - BPC

DIVISION 2. HEALING ARTS [25 - 4999.129]

(Division 2 enacted by Stats. 1937, Ch. 399.)

CHAPTER 6.6. Psychologists [2900 - 2999]

(Chapter 6.6 repealed and added by Stats. 1967, Ch. 1677.)

ARTICLE 9. PSYCHOLOGICAL CORPORATIONS [2995 - 2999]

(Article 1 added by Stats. 1980, Ch. 1314.)

Business and Professions Codes 25, 28, 490, 726, 729, 2914, 2915, 2915.4, 2915.5, 2936, 2936.5, 2950, 2951, 2952, ~~2953~~, and 2954, 2960.1, 2963, and 2966

25.

Any person applying for a license, registration, or the first renewal of a license, after the effective date of this section, as a licensed marriage and family therapist, a licensed clinical social worker, a licensed psychologist, research psychoanalyst, or a licensed professional clinical counselor shall, in addition to any other requirements, show by evidence satisfactory to the agency regulating the business or profession, that they have completed training in human sexuality as a condition of licensure or registration.

The training shall be creditable toward continuing education or continuing professional development requirements as deemed appropriate by the agency regulating the business or profession, and the course shall not exceed more than 50 contact hours.

The Board of Psychology shall exempt from the requirements of this section any

persons whose field of practice is such that they are not likely to have use for this training.

“Human sexuality” as used in this section means the study of a human being as a sexual being and how a human being functions with respect thereto.

The content and length of the training shall be determined by the administrative agency regulating the business or profession and the agency shall proceed immediately upon the effective date of this section to determine what training, and the quality of staff to provide the training, is available and shall report its determination to the Legislature on or before July 1, 1977.

If a licensing board or agency proposes to establish a training program in human sexuality, the board or agency shall first consult with other licensing boards or agencies that have established or propose to establish a training program in human sexuality to ensure that the programs are compatible in scope and content.

(Amended by Stats. 2019, Ch. 351, Sec. 3. (AB 496) Effective January 1, 2020.)

28.

(a) The Legislature finds that there is a need to ensure that professionals of the healing arts who have demonstrable contact with victims and potential victims of child, elder, and dependent adult abuse, and abusers and potential abusers of children, elders, and dependent adults are provided with adequate and appropriate training regarding the assessment and reporting of child, elder, and dependent adult abuse that will ameliorate, reduce, and eliminate the trauma of abuse and neglect and ensure the reporting of abuse in a timely manner to prevent additional occurrences.

(b) The Board of Psychology and the Board of Behavioral Sciences shall establish required training in the area of child abuse assessment and reporting for all persons applying for initial licensure and renewal of a license as a psychologist, clinical social worker, professional clinical counselor, or marriage and family therapist, or registration as a research psychoanalyst. This training shall be required one time only for all persons applying for initial licensure, initial registration, or for renewal of licensure or registration renewal.

(c) All persons applying for initial licensure or renewal of a license as a psychologist, clinical social worker, professional clinical counselor, or marriage and family therapist, or registration or renewal of a registration as a research psychoanalyst shall, in addition to all other requirements for licensure, registration or renewal, have completed coursework or training in child abuse assessment and reporting that

meets the requirements of this section, including detailed knowledge of the Child Abuse and Neglect Reporting Act (Article 2.5 (commencing with Section 11164) of Chapter 2 of Title 1 of Part 4 of the Penal Code). The training shall meet all of the following requirements:

(1) Be obtained from one of the following sources:

(A) An accredited or approved educational institution, as defined in Sections 2902, 4980.36, 4980.37, 4996.18, and 4999.12, including extension courses offered by those institutions.

(B) A continuing education provider as specified by the responsible board by regulation.

(C) A course sponsored or offered by a professional association or a local, county, or state department of health or mental health for continuing education and approved or accepted by the responsible board.

(2) Have a minimum of seven contact hours.

(3) Include the study of the assessment and method of reporting of sexual assault, neglect, severe neglect, general neglect, willful cruelty or unjustifiable punishment, corporal punishment or injury, and abuse in out-of-home care. The training shall also include physical and behavioral indicators of abuse, crisis counseling techniques, community resources, rights and responsibilities of reporting, consequences of failure to report, caring for a child's needs after a report is made, sensitivity to previously abused children and adults, and implications and methods of treatment for children and adults.

(4) An applicant shall provide the appropriate board with documentation of completion of the required child abuse training.

(d) The Board of Psychology and the Board of Behavioral Sciences shall exempt an applicant who applies for an exemption from this section and who shows to the satisfaction of the board that there would be no need for the training in the applicant's practice because of the nature of that practice.

(e) It is the intent of the Legislature that a person licensed as a psychologist, clinical social worker, professional clinical counselor, or marriage and family therapist, or registered as a research psychoanalyst have minimal but appropriate training in the areas of child, elder, and dependent adult abuse assessment and

reporting. It is not intended that, by solely complying with this section, a practitioner is fully trained in the subject of treatment of child, elder, and dependent adult abuse victims and abusers.

(f) The Board of Psychology and the Board of Behavioral Sciences are encouraged to include coursework regarding the assessment and reporting of elder and dependent adult abuse in the required training on aging and long-term care issues prior to licensure, registration, or renewal of a license ~~renewal or registration~~.

(Amended by Stats. 2019, Ch. 351, Sec. 5. (AB 496) Effective January 1, 2020.)

490. Grounds for suspension or revocation; Discipline for substantially related crimes; Conviction; Legislative findings

(a) In addition to any other action that a board is permitted to take against a licensee, a board may suspend or revoke a license on the ground that the licensee has been convicted of a crime, if the crime is substantially related to the qualifications, functions, or duties of the business or profession for which the license was issued.

(b) Notwithstanding any other provision of law, a board may exercise any authority to discipline a licensee for conviction of a crime that is independent of the authority granted under subdivision (a) only if the crime is substantially related to the qualifications, functions, or duties of the business or profession for which the licensee's license was issued.

(c) A conviction within the meaning of this section means a plea or verdict of guilty or a conviction following a plea of nolo contendere. An action that a board is permitted to take following the establishment of a conviction may be taken when the time for appeal has elapsed, or the judgment of conviction has been affirmed on appeal, or when an order granting probation is made suspending the imposition of sentence, irrespective of a subsequent order under Section 1203.4 of the Penal Code.

(d) The Legislature hereby finds and declares that the application of this section has been made unclear by the holding in *Petropoulos v. Department of Real Estate* (2006) 142 Cal.App.4th 554, and that the holding in that case has placed a significant number of statutes and regulations in question, resulting in potential harm to the consumers of California from licensees who have been convicted of crimes. Therefore, the Legislature finds and declares that this section establishes an independent basis for a board to impose discipline upon a licensee, and that the amendments to this section made by Chapter 33 of the Statutes of 2008 do not constitute a change to, but rather are declaratory of, existing law.

(Amended by Stats. 2010, Ch. 328, Sec. 2. (SB 1330) Effective January 1, 2011.)

726. (sexual relations)

(a) The commission of any act of sexual abuse, misconduct, or relations with a patient, client, or customer constitutes unprofessional conduct and grounds for disciplinary action for any person licensed under this division or under any initiative act referred to in this division.

(b) This section shall not apply to consensual sexual contact between a licensee and his or her spouse or person in an equivalent domestic relationship when that licensee provides medical treatment, other than psychotherapeutic treatment, to his or her spouse or person in an equivalent domestic relationship.

(Amended by Stats. 2015, Ch. 510, Sec. 3. (AB 179) Effective January 1, 2016.)

729. (sexual exploitation)

(a) Any physician and surgeon, psychotherapist, research psychoanalyst, student research psychoanalyst, alcohol and drug abuse counselor or any person holding himself or herself out to be a physician and surgeon, psychotherapist, research psychoanalyst, student research psychoanalyst, or alcohol and drug abuse counselor, who engages in an act of sexual intercourse, sodomy, oral copulation, or sexual contact with a patient or client, or with a former patient or client when the relationship was terminated primarily for the purpose of engaging in those acts, unless the physician and surgeon, psychotherapist, research psychoanalyst, student research psychoanalyst, or alcohol and drug abuse counselor has referred the patient or client to an independent and objective physician and surgeon, psychotherapist, research psychoanalyst, student research psychoanalyst, or alcohol and drug abuse counselor recommended by a third- party physician and surgeon, psychotherapist, research psychoanalyst, student research psychoanalyst, or alcohol and drug abuse counselor for treatment, is guilty of sexual exploitation by a physician and surgeon, psychotherapist, research psychoanalyst, student research psychoanalyst, or alcohol and drug abuse counselor.

(b) Sexual exploitation by a physician and surgeon, psychotherapist, research psychoanalyst, student research psychoanalyst, or alcohol and drug abuse counselor is a public offense:

(1) An act in violation of subdivision (a) shall be punishable by imprisonment in a county jail for a period of not more than six months, or a fine not exceeding one thousand dollars (\$1,000), or by both that imprisonment and fine.

(2) Multiple acts in violation of subdivision (a) with a single victim, when the

offender has no prior conviction for sexual exploitation, shall be punishable by imprisonment in a county jail for a period of not more than six months, or a fine not exceeding one thousand dollars (\$1,000), or by both that imprisonment and fine.

(3) An act or acts in violation of subdivision (a) with two or more victims shall be punishable by imprisonment pursuant to subdivision (h) of Section 1170 of the Penal Code for a period of 16 months, two years, or three years, and a fine not exceeding ten thousand dollars (\$10,000); or the act or acts shall be punishable by imprisonment in a county jail for a period of not more than one year, or a fine not exceeding one thousand dollars (\$1,000), or by both that imprisonment and fine.

(4) Two or more acts in violation of subdivision (a) with a single victim, when the offender has at least one prior conviction for sexual exploitation, shall be punishable by imprisonment pursuant to subdivision (h) of Section 1170 of the Penal Code for a period of 16 months, two years, or three years, and a fine not exceeding ten thousand dollars (\$10,000); or the act or acts shall be punishable by imprisonment in a county jail for a period of not more than one year, or a fine not exceeding one thousand dollars (\$1,000), or by both that imprisonment and fine.

(5) An act or acts in violation of subdivision (a) with two or more victims, and the offender has at least one prior conviction for sexual exploitation, shall be punishable by imprisonment pursuant to subdivision (h) of Section 1170 of the Penal Code for a period of 16 months, two years, or three years, and a fine not exceeding ten thousand dollars (\$10,000). For purposes of subdivision (a), in no instance shall consent of the patient or client be a defense. However, physicians and surgeons shall not be guilty of sexual exploitation for touching any intimate part of a patient or client unless the touching is outside the scope of medical examination and treatment, or the touching is done for sexual gratification.

(c) For purposes of this section:

(1) "Psychotherapist" has the same meaning as defined in Section 728.

(2) "Research psychoanalyst" has the same meaning as defined in Section 2950.

(3) "Student research psychoanalyst" has the same meaning as defined in Section 2950.

(24) "Alcohol and drug abuse counselor" means an individual who holds himself or

herself out to be an alcohol or drug abuse professional or paraprofessional.

(35) "Sexual contact" means sexual intercourse or the touching of an intimate part of a patient for the purpose of sexual arousal, gratification, or abuse.

(46) "Intimate part" and "touching" have the same meanings as defined in Section 243.4 of the Penal Code.

(d) In the investigation and prosecution of a violation of this section, no person shall seek to obtain disclosure of any confidential files of other patients, clients, or former patients or clients of the physician and surgeon, psychotherapist, research psychoanalyst, student research psychoanalyst, or alcohol and drug abuse counselor.

(e) This section does not apply to sexual contact between a physician and surgeon and his or her spouse or person in an equivalent domestic relationship when that physician and surgeon provides medical treatment, other than psychotherapeutic treatment, to his or her spouse or person in an equivalent domestic relationship.

(f) If a physician and surgeon, psychotherapist, research psychoanalyst, student research psychoanalyst, or alcohol and drug abuse counselor in a professional partnership or similar group has sexual contact with a patient in violation of this section, another physician and surgeon, psychotherapist, research psychoanalyst, student research psychoanalyst, or alcohol and drug abuse counselor in the partnership or group shall not be subject to action under this section solely because of the occurrence of that sexual contact.

(Amended by Stats. 2011, Ch. 15, Sec. 6. (AB 109) Effective April 4, 2011. Operative October 1, 2011, by Sec. 636 of Ch. 15, as amended by Stats. 2011, Ch. 39, Sec. 68.)

2914.

(a) An applicant for licensure as a psychologist or registration as a research psychoanalyst shall not be subject to denial of licensure or registration under Division

1.5 (commencing with Section 475).

(b) (1) On and after January 1, 2020, an applicant for licensure shall possess an earned doctoral degree in any of the following:

(A) Psychology with the field of specialization in clinical, counseling, school, consulting, forensic, industrial, or organizational psychology.

(B) Education with the field of specialization in counseling psychology, educational psychology, or school psychology.

(C) A field of specialization designed to prepare graduates for the professional practice of psychology.

(2) (A) Except as provided in subparagraph (B), the degree or training obtained pursuant to paragraph (1) shall be obtained from a college or institution of higher education that is accredited by a regional accrediting agency recognized by the United States Department of Education.

(B) Subparagraph (A) does not apply to any student who was enrolled in a doctoral program in psychology with the field of specialization in clinical, counseling, school, consulting, forensic, industrial, or organizational psychology or in education with the field of specialization in counseling psychology, educational psychology, or school psychology at a nationally accredited or approved institution as of December 31, 2016.

(3) The board shall make the final determination as to whether a degree meets the requirements of this subdivision.

(4) Until January 1, 2020, the board may accept an applicant who possesses a doctoral degree in psychology, educational psychology, or in education with the field of specialization in counseling psychology or educational psychology from an institution that is not accredited by an accrediting agency recognized by the United States Department of Education, but is approved to operate in this state by the Bureau for Private Postsecondary Education on or before July 1, 1999, and has not, since July 1, 1999, had a new location, as described in Section 94823.5 of the Education Code.

(5) An applicant for licensure trained in an educational institution outside the United States or Canada shall demonstrate to the satisfaction of the board that the applicant possesses a doctoral degree in psychology or education as specified in paragraphs (1) and (2) that is equivalent to a degree earned from a regionally accredited academic institution in the United States or Canada by providing the board with an evaluation of the degree by a foreign credential evaluation service that is a member of the National Association of Credential Evaluation Services (NACES), or by the National Register of Health Services Psychologists (NRHSP), and any other documentation the board deems necessary. The member of the NACES or the NRHSP shall submit the evaluation to the board directly and shall include in the evaluation all of the following:

(A) A transcript in English, or translated into English by the credential evaluation service, of the degree used to qualify for licensure.

(B) An indication that the degree used to qualify for licensure is verified using primary sources.

(C) A determination that the degree is equivalent to a degree that qualifies for licensure pursuant to paragraphs (1) and (2).

(c) (1) An applicant for licensure shall have engaged for at least two years in supervised professional experience under the direction of a licensed psychologist, the specific requirements of which shall be defined by the board in its regulations, or under suitable alternative supervision as determined by the board in regulations duly adopted under this chapter, at least one year of which shall have occurred after the applicant was awarded the qualifying doctoral degree. Any supervision may be provided in real time, which is defined as through in-person or synchronous audiovisual means, in compliance with federal and state laws related to patient health confidentiality. The supervisor shall submit verification of the experience to the trainee as prescribed by the board. If the supervising licensed psychologist fails to provide verification to the trainee in a timely manner, the board may establish alternative procedures for obtaining the necessary documentation. Absent good cause, the failure of a supervising licensed psychologist to provide the verification to the board upon request shall constitute unprofessional conduct.

(2) The board shall establish qualifications by regulation for supervising psychologists.

(d) An applicant for licensure shall take and pass the examination required by Section 2941 unless otherwise exempted by the board under this chapter. An applicant for licensure who has completed all academic coursework required for a doctoral degree as required by subdivision (b), as documented by a written certification from the registrar of the applicant's educational institution or program, shall be eligible to take any and all examinations required for licensure. If a national licensing examination entity approved by the board imposes additional eligibility requirements beyond the completion of academic coursework, the board shall implement a process to verify that an applicant has satisfied those additional eligibility requirements. For purposes of this subdivision, "academic coursework" does not include participation in an internship or writing a dissertation or thesis.

(e) An applicant for licensure as a psychologist or registration as a research

psychoanalyst shall complete coursework or provide evidence of training in the detection and treatment of alcohol and other chemical substance dependency.

(f) An applicant for licensure as a psychologist or registration as a research psychoanalyst shall complete coursework or provide evidence of training in spousal or partner abuse assessment, detection, and intervention.

(Amended by Stats. 2023, Ch. 425, Sec. 1. (AB 282) Effective January 1, 2024.)

2915.

(a) Except as provided in this section, the board shall issue a renewal license only to a licensed psychologist or a research psychoanalyst who has completed 36 hours of approved continuing professional development in the preceding two years.

(b) A licensed psychologist or a research psychoanalyst who renews or applies to reinstate their license issued pursuant to this chapter shall certify under penalty of perjury that they are in compliance with this section and shall retain proof of this compliance for submission to the board upon request. False statements submitted pursuant to this section shall be a violation of Section

(c) Continuing professional development means certain learning activities approved in four different categories:

(1) Professional activities.

(2) Academic activities.

(3) Sponsored continuing education coursework.

(4) Board certification from the American Board of Professional Psychology.

The board may develop regulations further defining acceptable continuing professional development activities.

(d) Continuing education courses approved to meet the requirements of this section shall be approved for credit by organizations approved by the board. An organization previously approved by the board to provide or approve continuing education is deemed approved under this section.

(e) The board may accept continuing education courses approved by an entity that has demonstrated to the board in writing that it has, at a minimum, a 10-year history

of providing educational programming for psychologists and has documented procedures for maintaining a continuing education approval program. The board shall adopt regulations necessary for implementing this section.

(f) The administration of this section may be funded through professional license fees and continuing education provider and course approval fees, or both. The fees related to the administration of this section shall not exceed the costs of administering the corresponding provisions of this section.

(Amended by Stats. 2021, Ch. 647, Sec. 9. (SB 801) Effective January 1, 2022.)

2915.4.

(a) Effective January 1, 2020, an applicant for licensure as a psychologist or registration as a research psychoanalyst shall show, as part of the application, that they have completed a minimum of six hours of coursework or applied experience under supervision in suicide risk assessment and intervention. This requirement shall be met in one of the following ways:

(1) Obtained as part of the applicant's qualifying graduate degree program. To satisfy this requirement, the applicant shall submit to the board a transcript indicating completion of this coursework. In the absence of this coursework title in the transcript, the applicant shall submit a written certification from the registrar, department chair, or training director of the educational institution or program from which the applicant graduated stating that the coursework required by this section is included within the institution's curriculum required for graduation at the time the applicant graduated, or within the coursework that was completed by the applicant.

(2) Obtained as part of the applicant's applied experience. Applied experience can be met in any of the following settings: practicum, internship, or formal postdoctoral placement that meets the requirement of Section 2911, or other qualifying supervised professional experience. To satisfy this requirement, the applicant shall submit to the board a written certification from the director of training for the program or primary supervisor where the qualifying experience has occurred stating that the training required by this section is included within the applied experience.

(3) By taking a continuing education course that meets the requirements of subdivision (e) or (f) of Section 2915 and that qualifies as a continuing education learning activity category specified in paragraph (2) or (3) of subdivision (c) of Section 2915. To satisfy this requirement, the applicant shall

submit to the board a certification of completion.

(b) Effective January 1, 2020, as a one-time requirement, a licensee prior to the time of their first renewal after the operative date of this section, or an applicant for reactivation or reinstatement to an active license status, shall have completed a minimum of six hours of coursework or applied experience under supervision in suicide risk assessment and intervention, as specified in subdivision (a). Proof of compliance with this section shall be certified under penalty of perjury that they are in compliance with this section and shall be retained for submission to the board upon request.

(Amended by Stats. 2023, Ch. 510, Sec. 53. (SB 887) Effective January 1, 2024.)

2915.5.

~~(a) Any applicant for licensure as a psychologist as a condition of licensure~~Any applicant for licensure as a psychologist or registration as a research psychoanalyst shall show, as part of the application, a minimum of six contact hours of coursework or applied experience in aging and long-term care, which may include, but need not be limited to, the biological, social, and psychological aspects of aging. This coursework shall include instruction on the assessment and reporting of, as well as treatment related to, elder and dependent adult abuse and neglect.

(b) In order to satisfy the coursework requirement of this section, the applicant shall submit to the board a transcript indicating completion of this coursework. In the absence of this coursework title in the transcript, the applicant shall submit a written certification from the registrar, department chair, or training director of the educational institution or program from which the applicant graduated stating that the coursework required by this section is included within the institution's required curriculum for graduation at the time the applicant graduated, or within the coursework, that was completed by the applicant.

(c) (1) If an applicant does not have coursework pursuant to this section, the applicant may obtain evidence of compliance as part of their applied experience in a practicum, internship, or formal postdoctoral placement that meets the requirement of Section 2911, or other qualifying supervised professional experience.

(2) To satisfy the applied experience requirement of this section, the applicant shall submit to the board a written certification from the director of training for the program or primary supervisor where the qualifying experience occurred stating that the training required by this section is included within the applied experience.

(d) If an applicant does not meet the curriculum or coursework requirement pursuant to this section, the applicant may obtain evidence of compliance by taking a continuing education course that meets the requirements of subdivision (d) or (e) of Section 2915 and that qualifies as a learning activity category specified in paragraph (2) or (3) of subdivision (c) of Section 2915. To satisfy this requirement, the applicant shall submit to the board a certification of completion.

(e) A written certification made or submitted pursuant to this section shall be done under penalty of perjury.

(Amended by Stats. 2023, Ch. 510, Sec. 54. (SB 887) Effective January 1, 2024.)

2936.

~~The board shall adopt a program of consumer and professional education in matters relevant to the ethical practice of psychology. The board shall establish as its standards of ethical conduct relating to the practice of psychology, the "Ethical Principles of Psychologists and Code of Conduct" published by the American Psychological Association (APA). Those standards shall be applied by the board as the accepted standard of care in all licensing examination development and in all board enforcement policies and disciplinary case evaluations.~~

~~To facilitate consumers in receiving appropriate psychological services, all licensees and registrants shall be required to post, in a conspicuous location in their principal psychological business office, a notice which reads as follows:~~

~~"NOTICE TO CONSUMERS: The Department of Consumer Affairs' Board of Psychology receives and responds to questions and complaints regarding the practice of psychology. If you have questions or complaints, you may contact the board by email at bopmail@dca.ca.gov, on the Internet at www.psychology.ca.gov, by calling 1-866- 503-3221, or by writing to the following address:~~

~~Board of Psychology
1625 North Market Boulevard, Suite N-215
Sacramento, California 95834"~~

~~*(Amended by Stats. 2014, Ch. 316, Sec. 10. (SB 1466) Effective January 1, 2015.)*~~

2936.5

The board shall adopt a program of consumer and professional education in matters relevant to the ethical practice of psychoanalysis. The board shall establish as its standards of ethical conduct relating to the practice of psychoanalysis and psychoanalytic therapy, the "APsA Code of Ethics" published by the American

Psychoanalytic Association (APsA). Those standards shall be applied by the board as the accepted standard of care in all research psychoanalyst and student research psychoanalyst development and in all board enforcement policies and disciplinary case evaluations.

To facilitate consumers in receiving appropriate psychoanalysis and psychoanalytic services, all registrants shall be required to post, in a conspicuous location in their principal psychoanalytic business office, a notice which reads as follows:

“NOTICE TO CONSUMERS: The Department of Consumer Affairs Board of Psychology receives and responds to questions and complaints regarding the practice of psychoanalysis. If you have questions or complaints, you may contact the board by email at bopmail@dca.ca.gov, on the Internet at www.psychology.ca.gov, by calling 1- 866-503-3221, or by writing to the following address:

Board of Psychology
1625 North Market Boulevard, Suite N-215
Sacramento, California 95834”

2950.

(a) Graduates of psychoanalytic institutes which belong to the American Psychoanalytic Association or the International Psychoanalytical Association, or institutes deemed equivalent by the board who have completed clinical training in psychoanalysis may engage in psychoanalysis as an adjunct to teaching, training, or research and hold themselves out to the public as psychoanalysts, and students in those institutes may engage in psychoanalysis under supervision, if the students and graduates do not hold themselves out to the public by any title or description of services incorporating the words “psychological,” “psychologist,” “psychology,” “psychometrists,” “psychometrics,” or “psychometry,” or that they do not state or imply that they are licensed to practice psychology.

(b) Those students and graduates seeking to engage in research psychoanalysis under this article shall register with the board, presenting evidence of their student or graduate status. The board may suspend or revoke the exemption of those persons for unprofessional conduct as defined in Sections 28, 490, 726, 729, 2936, 2960, 2960.1, 2960.6, 2963, 2966, 2969, and 2996.

(c) Each application for registration as a research psychoanalyst or student research psychoanalyst shall be made upon an online electronic form, or other form, provided by the board, and each application form shall contain a legal verification by the applicant certifying under penalty of perjury that the information provided by the applicant is true and correct and that any information in supporting documents

provided by the applicant is true and correct.

(Added by Stats. 2023, Ch. 294, Sec. 30. (SB 815) Effective January 1, 2024. Operative January 1, 2025, pursuant to Section 2954.)

2951.

(a) The use of any controlled substance or the use of any of the dangerous drugs specified in Section 4022, or of alcoholic beverages, to the extent, or in such a manner as to be dangerous or injurious to the registrant, or to any other person or to the public, or to the extent that this use impairs the ability of the registrant to practice safely or more than one misdemeanor or any felony conviction involving the use, consumption, or self-administration of any of the substances referred to in this section, or any combination thereof, constitutes unprofessional conduct. The record of the conviction is conclusive evidence of this unprofessional conduct.

(b) A plea or verdict of guilty or a conviction following a plea of nolo contendere is deemed to be a conviction within the meaning of this section. The board may order discipline of the registrant in accordance with Article 4 (commencing with Section 2960) or may order the denial of the registration when the time for appeal has elapsed or the judgment of conviction has been affirmed on appeal or when an order granting probation is made suspending imposition of sentence, irrespective of a subsequent order under the provisions of Section 1203.4 of the Penal Code allowing this person to withdraw their plea of guilty and to enter a plea of not guilty, or setting aside the verdict of guilty, or dismissing the accusation, complaint, information, or indictment.

2952.

(a) Each person to whom registration is granted under the provisions of this chapter shall pay into the Psychology Fund a fee to be fixed by the board at a sum of one hundred fifty dollars (\$150).

(b) Each person shall pay into the Psychology Fund a fingerprint processing fee of forty- nine dollars (\$49).

~~(c) The money in the Psychology Fund shall be used for the administration of this chapter. Any moneys within the Contingent Fund of the Medical Board of California collected pursuant to Section 2529.5 as it read before the enactment of the statute that added this section, shall be deposited in the Psychology Fund.~~

The fee for Fingerprint Hard Card Processing for Out of State Applicants shall be one hundred eighty-four dollars (\$184). Applicants shall also pay the actual cost to the board of processing the fingerprint hard card with the Department of Justice and

Federal Bureau of Investigation.

(b~~d~~) The registration shall expire after two years. The registration may be renewed biennially at a fee fixed by the board at a sum not in excess of seventy-five dollars (\$75). Students seeking to renew their registration shall present to the board evidence of their continuing student status. The money in the Psychology Fund shall be used for the administration of this chapter. Any moneys within the Contingent Fund of the Medical Board of California collected pursuant to Section 2529.5 as it read before the enactment of the statute that added this section, shall be deposited in the Psychology Fund.

(d~~e~~) The board may employ, subject to civil service regulations, whatever additional clerical assistance is necessary for the administration of this article.

(Added by Stats. 2023, Ch. 294, Sec. 30. (SB 815) Effective January 1, 2024. Operative January 1, 2025, pursuant to Section 2954.)

2953.

~~(a) Except as provided in subdivisions (b) and (c), the board shall revoke the registration of any person who has been required to register as a sex offender pursuant to Section 290 of the Penal Code for conduct that occurred on or after January 1, 2017.~~

~~(b) This section shall not apply to a person who is required to register as a sex offender pursuant to Section 290 of the Penal Code solely because of a misdemeanor conviction under Section 314 of the Penal Code.~~

~~(c) This section shall not apply to a person who has been relieved under Section 290.5 of the Penal Code of their duty to register as a sex offender, or whose duty to register has otherwise been formally terminated under California law.~~

~~(d) A proceeding to revoke a registration pursuant to this section shall be conducted in accordance with Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code.~~

~~*(Added by Stats. 2023, Ch. 294, Sec. 30. (SB 815) Effective January 1, 2024. Operative January 1, 2025, pursuant to Section 2954.)*~~

2954.

This article shall take effect on January 1, 2025.

(Added by Stats. 2023, Ch. 294, Sec. 30. (SB 815) Effective January 1, 2024.)

2960.1.

Notwithstanding Section 2960, any proposed decision or decision issued under this chapter in accordance with the procedures set forth in Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, that contains any finding of fact that the licensee or registrant engaged in any act of sexual contact, as defined in Section 2960, shall contain an order of revocation. The revocation shall not be stayed by the administrative law judge. A proposed or issued decision that contains a finding that the licensee or registrant engaged in an act of sexual abuse, sexual behavior, or sexual misconduct, as those terms are defined in Section 2960, may contain an order of revocation.

(Amended by Stats. 2022, Ch. 298, Sec. 2. (SB 401) Effective January 1, 2023.)

2963. Matters deemed conviction

A plea or verdict of guilty or a conviction following a plea of nolo contendere made to a charge which is substantially related to the qualifications, functions and duties of a psychologist, ~~or psychological assistant~~ associate, or research psychoanalyst, or student research psychoanalyst, is deemed to be a conviction within the meaning of this article. The board may order the license suspended or revoked, or may decline to issue a license when the time for appeal has elapsed, or the judgment of conviction has been affirmed on appeal or when an order granting probation is made suspending the imposition of sentence, irrespective of a subsequent order under Section 1203.4 of the Penal Code allowing the person to withdraw his or her plea of guilty and to enter a plea of not guilty, or setting aside the verdict of guilty, or dismissing the accusation, information or indictment.

(Amended by Stats. 1989, Ch. 888, Sec. 33.)

2966. Suspension during incarceration for felony conviction; Determination of substantial relationship of felony to functions of psychologist; Discipline or denial of license or registration

(a) A psychologist's license, or psychological associate or research psychoanalyst or student research psychoanalyst registration shall be suspended automatically during any time that the holder of the license is incarcerated after conviction of a felony, regardless of whether the conviction has been appealed. The board shall, immediately upon receipt of the certified copy of the record of conviction, determine whether the license ~~of the psychologist or registration~~ has been automatically suspended by virtue of the psychologist's licensee's or registrants' incarceration, and if so, the duration of that suspension. The board shall notify the ~~psychologist licensee or registrant~~ of the license or registration suspension and of the right to elect to have

the issue of penalty heard as provided in this section.

(b) Upon receipt of the certified copy of the record of conviction, if after a hearing it is determined therefrom that the felony of which the licensee or registrant was convicted was substantially related to the qualifications, functions, or duties of a ~~psychologist~~ licensee or registrant, the board shall suspend the license or registration until the time for appeal has elapsed, if an appeal has not been taken, or until the judgment of conviction has been affirmed on appeal or has otherwise become final, and until further order of the board. The issue of substantial relationship shall be heard by an administrative law judge sitting alone or with a panel of the board, in the discretion of the board.

(c) Notwithstanding subdivision (b), a conviction of any crime referred to in Section 187, 261, 288, or former Section 262, of the Penal Code shall be conclusively presumed to year if not renewed. To renew an unexpired registration, the registrant shall, on or before the date on which it would otherwise expire, apply for renewal on a form provided by the Board, accompanied by a required verification and the prescribed renewal fee.

Subsequent to January 1, 20XX, all registrations expire biannually and become invalid at 11:59 pm Pacific Standard Time two years following the date of issuance if not renewed. To renew an unexpired registration, the registrant shall, on or before the date on which it would otherwise expire, apply for renewal on a form provided by the Board, accompanied by a required verification and the prescribed renewal fee.

The annual renewal fee required in section XXX must be submitted to renew the registration. A registration renewed 30 days after its expiration must be accompanied by the delinquency fee referenced in section 163.5 of the Business and Professions Code in order to be renewed.

A research psychoanalyst who has been registered with the Board but whose registration has expired and has not been renewed shall not function as a research psychoanalyst.

A registration not renewed by the research psychoanalyst within 60 days after its expiration shall be cancelled and shall not be reinstated. A new registration must be obtained to perform psychological functions as a research psychoanalyst.

NOTE: Authority cited: Sections 2930 and 2950, Business and Professions Code, Reference: Sections 2930 and 2950, Business and Professions Code.

[END OF STATUTORY LANGUAGE]

DEPARTMENT OF CONSUMER AFFAIRS
TITLE 16. PROGRAM

PROPOSED REGULATORY LANGUAGE
Research Psychoanalyst

Legend:	Added text is indicated with an underline. Omitted text is indicated by (* * * *) Deleted text is indicated by strikeout .
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1371 – Adjunct Defined

A research psychoanalyst may engage in psychoanalysis as an adjunct to teaching, training or research. “Adjunct” means that the research psychoanalyst may not engage in a full-time clinical practice rendering psychoanalytic services on a fee-for-service basis. A research psychoanalyst may render psychoanalytic services ~~on a fee-for-service basis for not more than an average of one-third of his or her~~ to a patient or client for not more than 1700 hours per renewal cycle. Verification of specified hours shall be provided to the Board upon request. The remainder of total professional time including time should be spent in practice, teaching, training or research. Such teaching, training or research shall be the primary activity of the research psychoanalyst. This primary activity may be demonstrated by:

- (a) A full-time faculty appointment at the University of California, ~~at the state-California State university University or college~~, or an accredited or approved educational institution as defined by Section XXXX, subdivisions (a) and (b), of the Education Code.
- (b) Significant ongoing responsibility for teaching or training as demonstrated by the amount of time devoted to such teaching or training or the number of students trained; or
- (c) A significant research effort demonstrated by publications in professional journals or publication of books.

Existing Medical Board of California Language:

~~1378 – Expiration of Registration~~

~~All registrations expire and become invalid at midnight on the last day of February of each even-numbered year if not renewed. To renew an unexpired registration, the registrant shall, on or before the date on which it would otherwise expire, apply for renewal on a form provided by the Board, accompanied by a required verification and the prescribed renewal fee.~~

Proposed Board of Psychology Language:

For registrations prior to January 1, 20XX, all registrations expire and become invalid at 11:59 pm Pacific Standard Time on the last day of February of each even-numbered year if not renewed. To renew an unexpired registration, the registrant shall, on or before the date on which it would otherwise expire, apply for renewal on a form provided by the Board, accompanied by a required verification and the prescribed renewal fee. Subsequent to January 1, 20XX, all registrations expire biannually and become invalid at 11:59 pm Pacific Standard Time two years following the date of issuance if not renewed. To renew an unexpired registration, the registrant shall, on or before the date on which it would otherwise expire, apply for renewal on a form provided by the Board, accompanied by a required verification and the prescribed renewal fee.

The annual renewal fee required in section XXX must be submitted to renew the registration. A registration renewed 30 days after its expiration must be accompanied by the delinquency fee referenced in section 163.5 of the Business and Professions Code in order to be renewed.

A research psychoanalyst who has been registered with the Board but whose registration has expired and has not been renewed shall not function as a research psychoanalyst.

A registration not renewed by the research psychoanalyst within 60 days after its expiration shall be cancelled and shall not be reinstated. A new registration must be obtained to perform psychological functions as a research psychoanalyst.

NOTE: Authority cited: Sections 2930 and 2950, Business and Professions Code, Reference: Sections 2930 and 2950, Business and Professions Code.

[END OF REGULATORY LANGUAGE]

It was (M)Phillips(S)Foo(C) to adopt the Research Psychoanalyst Committee's recommended changes to the statutory and regulatory language.

Dr. Phillips expanded on Ms. Whitney's comments to explain that Research Psychoanalysts were not being licensed to provide mental health services. Instead, they undergo lengthy and rigorous analytic training, and spend up to a third of their time doing analysis work with patients. He commented that there had been resistance to the requirement to complete CPD among this population.

Mr. Pane commented that effective January 1, 2025, the board would have jurisdiction, with existing enforcement authority. The regulatory packages would be additional pieces coming over from MBC that were not in the statutory changes.

Dr. Phillips commented that for many Research Psychoanalysts, the move from MBC to the Board of Psychology was overwhelming, and he could understand the fear and uncertainty that some had expressed about the change. He cautioned that the regulatory packages should be crafted in a way to acknowledge the significant differences in how the program had been run previously and how it would be run now.

Dr. Phillips called for public comment.

No public comment was offered.

Dr. Phillips called for Board comment.

Mr. Foo commented that people could refer to recordings of Board meetings on YouTube to follow the discussions and votes on this subject.

Dr. Phillips commented that it would be useful to have a CPD webinar to familiarize new registrants with the requirements.

Votes

8 Ayes (Casuga, Cervantes, Foo, Harb Sheets, Phillips, Rescate, Rodgers, Tate), 1
Absent (Nystrom), 0 Noes

**Agenda Item #24: Discussion and Possible Action on the Board's 2025 Sunset
Review Report**

Mr. Burke provided the update on this item, starting on page 24 of the hand-carry
meeting materials.

Dr. Tate called for Board comment.

No Board comment was offered.

Dr. Tate called for public comment.

No public comment was offered.

Agenda Item #27: Legislative and Regulatory Affairs Committee Update

Dr. Cervantes introduced this item, and Mr. Polk provided the update, starting on page
273 of the meeting materials.

a) Legislative Proposals

- 1) SB 1526 – Consumer Affairs – Psychological Associates: Business and
Professions Code Section 2913: Change of Supervisor Fee: Business and
Professions Code Section 2987: Health and Safety Code 124260

Dr. Cervantes called for public comment.

No public comment was offered.

b) Bills with Active Position Taken by the Board

- 1) AB 2270 (Maienschein) Healing arts: continuing education: menopausal mental
and physical health
- 2) AB 2581 (Maienschein) Healing arts: continuing education: maternal mental
health
- 3) AB 2703 (Aguiar-Curry) Federally qualified health centers and rural health clinics:
psychological associates
- 4) SB 1451 (Ashby) Professions and vocations

Dr. Cervantes called for public comment.

No public comment was offered.

c) Watch Bills

- 1) AB 1991 (Bonta) Licensee and Registrant Records

2) SB 1120 (Becker) Health care coverage: utilization review

Dr. Cervantes called for Board comment.

No Board comment was offered.

Dr. Cervantes called for public comment.

No public comment was offered.

d) Legislative Items for Future Meeting. The Board May Discuss Other Items of Legislation in Sufficient Detail to Determine Whether Such Items Should be on a Future Board Meeting Agenda and/or Whether to Hold a Special Meeting of the Board to Discuss Such Items Pursuant to Government Code section 11125.4.

Dr. Cervantes called for Board comment.

No Board comment was offered.

Dr. Cervantes called for public comment.

No public comment was offered.

Agenda Item #28: Regulatory Update, Review, and Consideration of Additional Changes

Dr. Cervantes introduced this item, and Mr. Polk provided the update, starting on page 295 of the meeting materials.

- a) 16 CCR sections 1391.13, and 1391.14 – Inactive Psychological Associates Registration and Reactivating a Psychological Associate Registration
- b) 16 CCR 1395.2 – Disciplinary Guidelines and Uniform Standards Related to Substance-Abusing Licensees
- c) 16 CCR sections 1380.3, 1381, 1381.1, 1381.2, 1381.4, 1381.5, 1382, 1382.3, 1382.4, 1382.5, 1386, 1387, 1387.1, 1387.2, 1387.3, 1387.4, 1387.5, 1387.6, 1387.10, 1388, 1388.6, 1389, 1389.1, 1391, 1391.1, 1391.3, 1391.4, 1391.5, 1391.6, 1391.8, 1391.11, and 1391.12 – Pathways to Licensure
- d) 16 CCR sections 1380.6, 1393, 1396, 1396.1, 1396.2, 1396.4, 1396.5, 1397, 1397.1, 1397.2, 1397.35, 1397.37, 1397.39, 1397.50, 1397.51, 1397.52, 1397.53, 1397.54, 1397.55 - Enforcement Provisions
- e) 16 CCR sections 1397.35 – 1397.40 – Corporations
- f) 16 CCR sections 1381, 1387, 1387.10, 1388, 1388.6, 1389, and 1389.1 – EPPP-2 – Discussion and Possible Approval of proposed language related to the initial application fee.
- g) Sections 1390 – 1390.14 of Division 13.1 of Title 16 of the California Code of Regulations – Research Psychoanalyst Regulation

Dr. Cervantes called for Board comment.

Dr. Harb Sheets commented on item b, 16 CCR 1395.2, asking what kinds of changes would be in that regulatory package.

Mr. Polk replied that the changes would be bringing the disciplinary guidelines up to date with current practices regarding substance abuse by licensees.

Dr. Phillips commented that a lot of the substance abuse language is dictated by statute, and that the Board has some discretion as to testing schedules and related standards. This regulatory package is an effort to conform the Board's disciplinary practices to current practice as per statute.

Mr. Foo commented that part of the reasoning behind this regulatory package was to address issues coming out of the Licensure Committee regarding the 72-month limit for Registered Psychological Associates, namely that the clock could be paused in light of significant life events rather than that an extension would need to be sought as it expired.

Dr. Cervantes called for public comment.

No public comment was offered.

ADJOURNMENT OF FIRST DAY

Mr. Polk commented that attendance at the meeting today provided 6 hours of CPD credit under Category 1.

The meeting adjourned at 4:24 p.m.

Friday, November 8, 2024

Agenda Item #21: Call to Order/Roll Call/Establishment of a Quorum

Dr. Tate called the meeting to order at 8:37 a.m. A quorum was present and due notice had been sent to all interested parties.

Agenda Item #22: Update, Presentation and Discussion on California Psychology Internship Council (CAPIC) Sunset

Dr. Tate announced that item 22 would be taken up on the agenda of the February, 2025 Board meeting.

Agenda Item #23: Discussion and Possible Action Regarding the Board's Position on the EPPP Part 2

Dr. Tate introduced this item, and Mr. Burke provided the update, starting on page 153 of the meeting materials. Public comment submitted prior to today's session can be found starting on page 2 of the hand-carry materials.

Mr. Burke commented that, as of October 2024, ASPPB was no longer going forward with implementing the EPPP Part 2 effective January 1, 2026. Board staff ceased developing an implementation plan for the exam. Staff would instead focus their efforts on the implementation of the regulatory package for AB 282 (Aguiar-Curry).

Dr. Mariann Burnetti-Atwell, CEO of ASPPB, joined the meeting via WebEx. Present at the Board meeting were Dr. Jacqueline Horn, who worked on the EPPP for ASPPB, and Dr. Hao Song, Associate Executive Officer of Examination Services.

Dr. Song commented that ASPPB would undertake a new initiative to reimagine the EPPP and EPPP2 as one exam, integrating both knowledge and skills. She described a four-step process for launching this initiative:

- 1) At the December 2024, Board of Directors meeting, discussion would center on calling upon volunteers to form a work group in January 2025.
- 2) Call Town Hall meetings with all jurisdictions to collect input and report progress on a quarterly basis
- 3) Board of Directors will form a Subcommittee to lead this work group
- 4) Job Test Analysis (JTA) Committee will continue their work in progress on analyzing the content of the exam(s)

Dr. Horn commented that ASPPB encountered very strong anti-regulatory resistance in some jurisdictions, particularly in the United States, and that this was one reason ASPPB paused the implementation of EPPP2.

Dr. Burnetti-Atwell commented that ASPPB remains committed to maintaining the EPPP as a competency-based exam while accommodating the mental health challenges and needs of the modern post-COVID world.

Dr. Tate opened the floor for Board discussion.

Dr. Casuga commented that the uncertainty around the timing of release of the new examination causes difficulty for the Board's regulatory process, which needs ample time and information to go through the rulemaking process. She asked for further explanation of the pause.

Dr. Burnetti-Atwell commented that ASPPB's use of the term 'pause' created confusion about whether ASPPB would restart implementation of EPPP2 after a short time. She commented that this was not the intended message; rather, the decision was made that the EPPP2 was not going to work, and so the four steps previously spelled out were the way forward, a way to build on the work already put into the EPPP2.

Dr. Casuga asked whether it was safe to assume that the 'reimagined' EPPP examination now in the early stages of development would still be some five to ten years in the future.

Dr. Burnett-Atwell commented that the JTA Committee would be finishing their analysis in the early part of 2025, and that any implementation would be less than the five-to-ten year window normally expected to develop a new examination.

Dr. Song commented that the concept of a competency-based examination is not a new one, and that it is already familiar to people on some level. She said that ASPPB has received positive feedback from early-adopter states, citing the desire to allow new licensees to practice independently while protecting the public and the profession. Keeping in mind the four steps outlined previously, a more practical timeline would be two, maybe three to five years.

Dr. Horn commented that the normal timeline for developing or updating examinations is roughly seven to ten years, starting with the job task analysis. This process was already about to start for both parts of the EPPP; the JTA Committee had already been formed. As such, the Committee would now be looking at a combined examination rather than two separate ones. She commented that the resulting examination will look different, but will still have all the same parts.

Dr. Phillips asked how ASPPB incorporated or involved historically-underrepresented communities in the test development program, in light of accusations of exclusion and of this being a biased test.

Dr. Song commented a well-designed examination will reveal a bell curve in the overall performance of test-takers. She said that bias is something always to guard against, and that with her own status as coming from a non-English background, she kept this very much in the foreground with the development of this examination. She said that ASPPB utilizes a review committee formed in 2021, comprised of nine experts who specialize in working with different populations.

Dr. Phillips commented that there was a lack of awareness in the profession of just how sensitive ASPPB was to the differences people experienced coming from diverse backgrounds. He asked for clarification on the difference between validity for a licensing exam versus for a typical psychometric assessment instrument. He commented that many accusations of bias had arisen on the grounds that the examination should utilize predictive validity, which is not a concern as far as taking the license examination, but rather to test whether people have the knowledge, and under the new examination to find out whether they have the skills.

Dr. Horn affirmed Dr. Phillip's comment, saying that she perceived a lack of understanding on the part of the traditional psychological psychometric community about the distinction between the licensing examination and a psychological testing instrument. She commented that being able to pass the knowledge-based examination is no predictor of a licensee being a skilled psychologist in practice.

1499 Dr. Phillips asked whether there would be portability issues for licensees who want to
1500 practice in a jurisdiction where the EPPP2 was required, and whether they would have
1501 to take the EPPP2 to practice in those states.
1502

1503 Dr. Horn commented that there are a few states that will continue to use the EPPP2,
1504 and any licensees wanting to practice there would be required to pass the EPPP2. She
1505 commented that until the examination is released in a combined format, it is not
1506 possible to say what those states would do regarding the EPPP2 requirement.
1507

1508 Dr. Phillips asked Dr. Horn whether ASPPB would continue to update EPPP2
1509 indefinitely if a new combined examination were released to replace it.
1510

1511 Dr. Horn replied that the workgroup would make that decision in the future, but that
1512 ASPPB would likely phase out the separate EPPP2 once the new combined
1513 examination was released.
1514

1515 Dr. Burnett-Atwell commented that this is a new situation, and that ASPPB is going to
1516 meet with the jurisdictions that currently use the EPPP2, to ascertain what this change
1517 of direction will mean to them.
1518

1519 Dr. Harb Sheets commented that the Board has heard from representatives of
1520 associations speaking on behalf of underrepresented groups, who shared their
1521 concerns about the different performance level the EPPP2 presents to the groups they
1522 represent. She asked whether there was an avenue for these groups to bring this
1523 information to the attention of ASPPB.
1524

1525 Dr. Song commented that she and Dr. Matty had been meeting with some of these
1526 groups, and that ASPPB is anxious to hear from all sides, especially where there might
1527 be misinformation circulating.
1528

1529 Dr. Harb Sheets commented that when a group can see on one hand the examination's
1530 overall passing rate while noting that the pass rate for their own group is significantly
1531 lower, this is not necessarily misinformation. She asked how ASPPB addresses those
1532 concerns.
1533

1534 Dr. Horn commented that the item review committee has reviewed two-thousand items,
1535 and took out eight instances of differential performance. Therefore, she said there
1536 shouldn't be a different pass rate between groups taking the examination.
1537

1538 Mr. Foo commented that if Group A was doing worse than Group B on the exam, this
1539 maybe was to be expected due to differentiation. He asked how it could be, in that case,
1540 that the exam was not biased towards Group A. When the difference in pass rates is
1541 statistically insignificant, this wouldn't matter, but Group A's pass rates in this example
1542 are much more significant, and this would point to the exam not working equally for all
1543 groups.
1544

Dr. Song commented that ASPPB is confident that their examination is not biased, but that the differences in pass rates might have more basis in socioeconomic differences than in any bias in the examination.

Mr. Foo asked whether, in light of accusations that different groups are performing differently on the exam, ASPPB would release the data on the different characteristics of a group's pass rates. He remarked that he had not seen those characteristics broken down other than by schools, or APA-versus-non-APA accreditation. He commented that by releasing the full range of characteristics, the accusations would be overcome.

Dr. Phillips commented that the situation is more complex than this data on the characteristics of pass rates by different populations can depict. He pointed to the fact that non-accredited schools tend to have a larger representation of people in communities of color, and it is not clear whether these schools are as good at preparing people with the basic knowledge related to psychology. He commented that race is not the only variable, and to look only at that characteristic would be to take a skewed view of the issue. He shared Dr. Song's concern that the examination not have implicit bias and emphasized the need to understand the influence of economic and educational disadvantages on pass rates on certain populations.

Dr. Cervantes commented that she appreciated all the feedback received during meetings over the years. She commented that transparency is critical and that ASPPB should not get ahead of the jurisdictions, but rather to work and communicate continually so that people considering entering the profession are not faced with the prospect of a new examination while having little to no information on how to prepare for it.

Mr. Foo commented that it should not have taken such dramatic action as a Federal Trade Commission (FTC) complaint and bylaw change to get to this point in the discussion with ASPPB about the new examination. He said that it should have been brought about as a collaborative process with full stakeholder engagement.

Dr. Casuga asked about the makeup of the workgroup, whether it would be Board Members, staff from each jurisdiction.

Dr. Burnetti-Atwell commented that the workgroup would be comprised of twelve to fifteen jurisdictional members, exam program committees within the Association, staff and liaison groups, as well as board representation.

Dr. Phillips commented that the language ASPPB uses in some of its communications can be confusing; the word 'paused' for example caused a lot of confusion because of what different people interpreted it to mean regarding the implementation of EPPP2.

Dr. Burnetti-Atwell pledged to take the Board's comments and suggestions back to ASPPB.

Dr. Tate called for further Board comment.

1593 No further Board comment was offered.

1595 Dr. Tate called for public comment.

1597 Dr. Janet Farrell commented that ASPPB paused implementation of EPPP2 because it
1598 feared a loss of revenue. She commented that Texas filed the FTC complaint alleging
1599 violation of antitrust laws by not involving the Texas Board in the development of the
1600 examination. She said that when Texas sought legislative funding for a less-costly
1601 alternative to the EPPP2, ASPPB paused implementation, in her opinion to repackage
1602 the examination and implement it at a later date with a higher cost. She pointed to a
1603 conflict of interest between ASPPB's dual role as a jurisdictional corporation at the same
1604 time they are operating as a test publisher profiting from a captive market.

1606 Dr. Elizabeth Winkelman of CPA commented that she appreciated the Board's decision
1607 to not move forward with implementation of the EPPP2, adding that CPA opposed the
1608 adoption of EPPP2 as an unnecessary barrier to licensure, along with the added costs
1609 and burdens, the delayed access to care, and the potential disproportionate impact on
1610 underrepresented groups, as well as the concerns over lack of transparency and
1611 meaningful stakeholder input. She asked whether any action was needed on CPA's part
1612 now that the Board was ceasing work on implementation of the EPPP2.

1614 Mr. Pane replied that no further formal action by the Board was necessary.

1616 Synde Manion asked whether the purpose of the EPPP2 was to develop uniformity in
1617 competency to practice, and whether any studies had been done on individuals who
1618 had been disciplined, leading to an analysis of pass rates among such individuals to
1619 show correlation between the pass rate and effectiveness of the examination to prepare
1620 them for competent practice.

1622 Dr. Song commented that such data is extremely sparse, and points to individuals who
1623 have not practiced in many years, in which case an analysis of these cases would not
1624 provide meaningful data when applied to the current examination climate.

1626 Cindy Bradbury from UCLA voiced her appreciation for the way the Board, CPA, and
1627 ASPPB have worked together and discussed EPPP2 going back several years, and she
1628 hoped that this was an inflection point for devising a better and more equitable test. She
1629 commented that on staff at UCLA are clinical and quantitative psychologists with
1630 expertise that could assist in developing this examination with those goals in mind. She
1631 hoped the Board and ASPPB fully utilized this expertise going forward.

1633 Dr. Marilyn Imoos from CDCR expressed her thanks and appreciation to the Board for
1634 their diligence and persistence in bringing together various stakeholders and keeping
1635 the information flowing. She commented that in correctional mental health,
1636 psychologists and clinicians have special competencies for working with incarcerated
1637 populations as well as other clinical areas of practice. She added that CDCR would
1638 welcome the opportunity to participate in gathering information, especially contributing
1639 as it applies to the very diverse population of patients within CDCR's program.

Dr. Louisa Troemel from CDCR echoed Dr. Imoos' comments about CDCR having a very unique and diverse population, and commented that the Board might look beyond academia for such resources. She commented that incarcerated populations are rarely considered in terms of appropriate mental health services that apply to the general outside population.

Dr. Tyler Rinde of CPA expressed his thanks to the Board and ASPPB for bringing this conversation to today's meeting. He requested that when ASPPB conducts the quarterly town hall meetings, that they should be open to the public in the spirit of transparency and collaboration with all stakeholders.

No further public comments were offered.

Dr. Horn commented that there actually are already people from CDCR and the University of California system working on both exams.

Agenda Item #29: Election of Officers

Dr. Tate introduced Mr. Pane to lead the process of elections.

Mr. Pane commented that Officer elections occur at the last meeting of the year, with the effective date of January 1st of the next year. He called for nominations in alphabetical order for the Office of President.

Dr. Casuga nominated Dr. Tate for President. There were no other nominations for President.

Dr. Tate accepted the nomination for President.

It was (M)Foo(S)Rescate(C) to elect Dr. Tate as Board President effective January 1, 2025.

Mr. Pane called for Board comment.

No Board comment was offered.

Mr. Pane called for public comment.

No public comment was offered.

Votes

9 Ayes (Casuga, Cervantes, Foo, Harb Sheets, Nystrom, Phillips, Rescate, Rodgers, Tate), 0 Noes

Mr. Pane called for nominations for the Office of Vice President.

Dr. Casuga nominated Dr. Rodgers for Vice President.

1689 Dr. Rodgers accepted the nomination for Vice President.

1690

1691 It was (M)Foo(S)Phillips(C) to elect Dr. Rodgers as Board Vice President effective
1692 January 1, 2025.

1693

1694 Mr. Pane called for Board comment.

1695

1696 No Board comment was offered.

1697

1698 Mr. Pane called for public comment.

1699

1700 No public comment was offered.

1701

1702 Votes

1703 9 Ayes (Casuga, Cervantes, Foo, Harb Sheets, Nystrom, Phillips, Rescate, Rodgers,
1704 Tate), 0 Noes

1705

1706 **Agenda Item #30: Recommendations for Agenda Items for Future Board Meetings**

1707

1708 Dr. Tate called for Board recommendations.

1709

1710 Dr. Casuga recommended that Dr. Rodgers lead a mindfulness activity at the February
1711 2025, meeting, and that HCAI be allowed to present their update since they were
1712 unable to do so as usual at the August 2024, Board meeting.

1713

1714 Mr. Foo asked whether this request could possibly be moved to a future undated
1715 meeting in the event that Executive Officer interviews were underway at the February
1716 meeting.

1717

1718 Dr. Casuga commented that it could potentially be held off until August 2025, but
1719 hopefully sooner, depending on when the presentation took place in the scholarship
1720 cycle.

1721

1722 No further Board recommendations were offered.

1723

1724 Dr. Tate called for public comment.

1725

1726 Dr. Farrell recommended that the Board talk to other states about the feasibility of an
1727 alternative licensing exam, and also talk to ASPPB about limiting their costs on the
1728 upcoming exam.

1729

1730 Dr. Tate commented that at a previous meeting, the Board presented a study on the
1731 cost impact if California were to implement its own exam, and it was shown that it would
1732 be very expensive.

1733

1734 No further public comment was offered.

1735

1736 Mr. Polk commented that attendance at the meeting today provided 2.25 hours of CPD
1737 credit under Category 1.

1738

1739 **ADJOURNMENT**

1740

1741 Mr. Polk commented that attendance at the meeting today provided 2.25 hours of CPD
1742 credit under Category 1.

1743

1744 The meeting adjourned at 10:40 am.