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To: Board Members Date: February 25,

2021

From: Rosanne Helms Telephone: (916) 574-7897

Legislative Manager

Subject: Required Coursework: "Prognosis" versus "Treatment Planning"

In the 2019 omnibus bill (SB 786, which was signed into law and became effective January 1, 2020), the Board sponsored an amendment to Business and Professions Code (BPC) sections 4980.36, 4980.37, 4980.81, 4999.32, and 4999.33.

Previously those sections, which list required education and practicum for LMFT and LPCC licensure, required coursework in assessment, diagnosis, and prognosis.

The Board proposed an amendment replacing the term "prognosis" with the term "treatment planning," because it believed treatment planning is a more accurate representation of the course of psychotherapy. This became law via SB 786.

However, stakeholders have alerted Board staff that based on recent discussions, other mental health professions may be interpreting the Board's law change as meaning LMFTs and LPCCs are not permitted to perform prognosis. Staff does not believe this was Board's intent when it decided to pursue the law change.

Attachment A is an email request from Dr. Ben Caldwell, PsyD, LMFT.

**Attachment B** contains the proposed language should the Board decide to proceed with the requested amendments.

### Policy and Advocacy Committee Recommendation

At its February 5, 2021 meeting, the Policy and Advocacy Committee discussed whether BPC sections 4980.36, 4980.37, 4980.81, 4999.32, and 4999.33 should be amended to add the term "prognosis" back where it was previously deleted, to be included along with the term "treatment planning." It recommended that the Board should proceed with these amendments, shown in **Attachment B**.

## **Recommendation**

Conduct an open discussion about the proposed language shown in **Attachment B**. Direct staff to make any discussed changes, and any non-substantive changes, and pursue as a legislative proposal.

### **Attachments**

**Attachment A:** Email request from Dr. Dr. Ben Caldwell, PsyD, LMFT, dated November 24, 2020

**Attachment B:** Proposed Language

#### **ATTACHMENT A**

 From:
 Benjamin Caldwell

 To:
 Helms, Rosanne@DCA

 Cc:
 Cathy Atkins; Angela Caldwell

**Subject:** Request for amendment to MFT training requirements (for Feb P&A)

**Date:** Tuesday, November 24, 2020 2:54:39 PM

[EXTERNAL]: ben@bencaldwell.com

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#### Hi Rosanne-

In the 2019 DCA omnibus bill (SB786), the word "prognosis" was removed from the MFT training requirements and replaced with "treatment planning" (BPC 4980.36(d)(1)(B)(iv)(II) and (d)(2)(A), 4980.37(c)(1) and (e)(1), and 4980.81(a) (1)). As I understand it, this was intended as a non-substantive change to modernize the language of these sections of statute. However, I believe this change may have unintended consequences, and am writing to ask the board to adjust this to "prognosis and treatment planning" or equivalent language in 2021 omnibus legislation.

While the development of a prognosis is vital to effective treatment planning, MFTs sometimes develop prognoses for clients outside of treatment planning contexts. For example, MFTs delivering expert witness testimony are well-qualified to opine on a client's prognosis for the purposes of a court proceeding, though they are not planning treatment in that instance.

Similarly, MFTs often issue discharge summaries and other clinical documentation that includes a prognosis, but is not necessarily part of a treatment planning process. Such prognoses may be helpful in establishing appropriate continuity of care, and medical necessity for the provision and reimbursement of future mental health services.

I understand the desire to ensure that the statutory language of training requirements reflects modern terminology and usage. As such, I would respectfully suggest "prognosis and treatment planning" or similar language as a correction going forward. As the previous change was clearly not intended to limit MFTs' training, scope, or functions, and this correction is similarly not intended to expand MFTs' training, scope, or functions, I believe that omnibus legislation remains the appropriate vehicle.

Please let me know if you have any questions. Feel free to share this with the

Board, staff, and relevant stakeholders as you see fit.

Warm regards, Ben Caldwell, PsyD, LMFT

# ATTACHMENT B PROPOSED LANGUAGE

## <u>LMFT</u>

§ 4980.36. QUALIFYING DEGREE PROGRAM FOR LICENSURE OR REGISTRATION; BEGINNING GRADUATE STUDY AFTER AUGUST 1, 2012 OR COMPLETING GRADUATE STUDY AFTER DECEMBER 31, 2018

- (a) This section shall apply to the following:
  - (1) Applicants for licensure or registration who begin graduate study before August 1, 2012, and do not complete that study on or before December 31, 2018.
  - (2) Applicants for licensure or registration who begin graduate study before August 1, 2012, and who graduate from a degree program that meets the requirements of this section.
  - (3) Applicants for licensure or registration who begin graduate study on or after August 1, 2012.
- (b) To qualify for a license or registration, applicants shall possess a doctoral or master's degree meeting the requirements of this section in marriage, family, and child counseling, marriage and family therapy, couple and family therapy, psychology, clinical psychology, counseling psychology, or either counseling or clinical mental health counseling with an emphasis in either marriage, family, and child counseling or marriage and family therapy. The degree shall be obtained from a school, college, or university approved by the Bureau for Private Postsecondary Education, or accredited by either the Commission on Accreditation for Marriage and Family Therapy Education, or a regional or national institutional accrediting agency that is recognized by the United States Department of Education. The board has the authority to make the final determination as to whether a degree meets all requirements, including, but not limited to, course requirements, regardless of accreditation or approval.
- (c) A doctoral or master's degree program that qualifies for licensure or registration shall be a single, integrated program that does the following:
  - (1) Integrate all of the following throughout its curriculum:
    - (A) Marriage and family therapy principles.

- (B) The principles of mental health recovery-oriented care and methods of service delivery in recovery-oriented practice environments, among others.
- (C) An understanding of various cultures and the social and psychological implications of socioeconomic position, and an understanding of how poverty and social stress impact an individual's mental health and recovery.
- (2) Allow for innovation and individuality in the education of marriage and family therapists.
- (3) Encourage students to develop the personal qualities that are intimately related to effective practice, including, but not limited to, integrity, sensitivity, flexibility, insight, compassion, and personal presence.
- (4) Permit an emphasis or specialization that may address any one or more of the unique and complex array of human problems, symptoms, and needs of Californians served by marriage and family therapists.
- (5) Provide students with the opportunity to meet with various consumers and family members of consumers of mental health services to enhance understanding of their experience of mental illness, treatment, and recovery.
- (d) The degree described in subdivision (b) shall contain no less than 60 semester or 90 quarter units of instruction that includes, but is not limited to, the following requirements:
  - (1) Both of the following:
    - (A) No less than 12 semester or 18 quarter units of coursework in theories, principles, and methods of a variety of psychotherapeutic orientations directly related to marriage and family therapy and marital and family systems approaches to treatment and how these theories can be applied therapeutically with individuals, couples, families, adults, including elder adults, children, adolescents, and groups to improve, restore, or maintain healthy relationships.
    - (B) Practicum that involves direct client contact, as follows:
      - (i) A minimum of six semester or nine quarter units of practicum in a supervised clinical placement that provides supervised fieldwork experience.

- (ii) A minimum of 150 hours of face-to-face experience counseling individuals, couples, families, or groups.
- (iii) A student must be enrolled in a practicum course while counseling clients, except as specified in subdivision (c) of Section 4980.42.
- (iv) The practicum shall provide training in all of the following areas:
  - (I) Applied use of theory and psychotherapeutic techniques.
  - (II) Assessment, diagnosis, prognosis, and treatment planning.
  - (III) Treatment of individuals and premarital, couple, family, and child relationships, including trauma and abuse, dysfunctions, healthy functioning, health promotion, illness prevention, and working with families.
  - (IV) Professional writing, including documentation of services, treatment plans, and progress notes.
  - (V) How to connect people with resources that deliver the quality of services and support needed in the community.
- (v) Educational institutions are encouraged to design the practicum required by this subparagraph to include marriage and family therapy experience in low income and multicultural mental health settings.
- (vi) In addition to the 150 hours required in clause (ii), 75 hours of either of the following, or a combination thereof:
  - (I) Client centered advocacy, as defined in Section 4980.03.
  - (II) Face-to-face experience counseling individuals, couples, families, or groups.
- (2) Instruction in all of the following:
  - (A) Diagnosis, assessment, <u>prognosis</u>, treatment planning, and treatment of mental disorders, including severe mental disorders, evidence-based practices, psychological testing, psychopharmacology, and promising mental health practices that are evaluated in peer-reviewed literature.
  - (B) Developmental issues from infancy to old age, including instruction in all of the following areas:

- (i) The effects of developmental issues on individuals, couples, and family relationships.
- (ii) The psychological, psychotherapeutic, and health implications of developmental issues and their effects.
- (iii) Aging and its biological, social, cognitive, and psychological aspects. This coursework shall include instruction on the assessment and reporting of, as well as treatment related to, elder and dependent adult abuse and neglect.
- (iv) A variety of cultural understandings of human development.
- (v) The understanding of human behavior within the social context of socioeconomic status and other contextual issues affecting social position.
- (vi) The understanding of human behavior within the social context of a representative variety of the cultures found within California.
- (vii) The understanding of the impact that personal and social insecurity, social stress, low educational levels, inadequate housing, and malnutrition have on human development.
- (C) The broad range of matters and life events that may arise within marriage and family relationships and within a variety of California cultures, including instruction in all of the following:
  - (i) A minimum of seven contact hours of training or coursework in child abuse assessment and reporting as specified in Section 28, and any regulations promulgated thereunder.
  - (ii) Spousal or partner abuse assessment, detection, intervention strategies, and same gender abuse dynamics.
  - (iii) Cultural factors relevant to abuse of partners and family members.
  - (iv) Childbirth, child rearing, parenting, and stepparenting.
  - (v) Marriage, divorce, and blended families.
  - (vi) Long-term care.
  - (vii) End-of-life and grief.
  - (viii) Poverty and deprivation.

- (ix) Financial and social stress.
- (x) Effects of trauma.
- (xi) The psychological, psychotherapeutic, community, and health implications of the matters and life events described in clauses (i) to (x), inclusive.
- (D) Cultural competency and sensitivity, including a familiarity with the racial, cultural, linguistic, and ethnic backgrounds of persons living in California.
- (E) Multicultural development and cross-cultural interaction, including experiences of race, ethnicity, class, spirituality, sexual orientation, gender, and disability, and their incorporation into the psychotherapeutic process.
- (F) The effects of socioeconomic status on treatment and available resources.
- (G) Resilience, including the personal and community qualities that enable persons to cope with adversity, trauma, tragedy, threats, or other stresses.
- (H) Human sexuality, including the study of physiological, psychological, and social cultural variables associated with sexual behavior and gender identity, and the assessment and treatment of psychosexual dysfunction.
- (I) Substance use disorders, co-occurring disorders, and addiction, including, but not limited to, instruction in all of the following:
  - (i) The definition of substance use disorders, co-occurring disorders, and addiction. For purposes of this subparagraph, "co-occurring disorders" means a mental illness and substance abuse diagnosis occurring simultaneously in an individual.
  - (ii) Medical aspects of substance use disorders and co-occurring disorders.
  - (iii) The effects of psychoactive drug use.
  - (iv) Current theories of the etiology of substance abuse and addiction.
  - (v) The role of persons and systems that support or compound substance abuse and addiction.
  - (vi) Major approaches to identification, evaluation, and treatment of substance use disorders, co-occurring disorders, and addiction, including, but not limited to, best practices.
  - (vii) Legal aspects of substance abuse.

- (viii) Populations at risk with regard to substance use disorders and cooccurring disorders.
- (ix) Community resources offering screening, assessment, treatment, and follow up for the affected person and family.
- (x) Recognition of substance use disorders, co-occurring disorders, and addiction, and appropriate referral.
- (xi) The prevention of substance use disorders and addiction.
- (J) California law and professional ethics for marriage and family therapists, including instruction in all of the following areas of study:
  - (i) Contemporary professional ethics and statutory, regulatory, and decisional laws that delineate the scope of practice of marriage and family therapy.
  - (ii) The therapeutic, clinical, and practical considerations involved in the legal and ethical practice of marriage and family therapy, including, but not limited to, family law.
  - (iii) The current legal patterns and trends in the mental health professions.
  - (iv) The psychotherapist-patient privilege, confidentiality, the patient dangerous to self or others, and the treatment of minors with and without parental consent.
  - (v) A recognition and exploration of the relationship between a practitioner's sense of self and human values and the practitioner's professional behavior and ethics.
  - (vi) The application of legal and ethical standards in different types of work settings.
  - (vii) Licensing law and licensing process.
- (e) The degree described in subdivision (b) shall, in addition to meeting the requirements of subdivision (d), include instruction in case management, systems of care for the severely mentally ill, public and private services and supports available for the severely mentally ill, community resources for persons with mental illness and for victims of abuse, disaster and trauma response, advocacy for the severely mentally ill, and collaborative treatment. This instruction may be provided either in credit level coursework or through extension programs offered by the degreegranting institution.

(f) The changes made to law by this section are intended to improve the educational qualifications for licensure in order to better prepare future licentiates for practice, and are not intended to expand or restrict the scope of practice for marriage and family therapists.

# § 4980.37. QUALIFYING DEGREE PROGRAM FOR LICENSURE OR REGISTRATION; BEGAN GRADUATE STUDY BEFORE AUGUST 1, 2012 AND COMPLETED GRADUATE STUDY BEFORE DECEMBER 31, 2018

- (a) This section shall apply to applicants for licensure or registration who began graduate study before August 1, 2012, and completed that study on or before December 31, 2018. Those applicants may alternatively qualify under paragraph (2) of subdivision (a) of Section 4980.36.
- (b) To qualify for a license or registration, applicants shall possess a doctoral or master's degree in marriage, family, and child counseling, marriage and family therapy, couple and family therapy, psychology, clinical psychology, counseling psychology, or either counseling or clinical mental health counseling with an emphasis in either marriage, family, and child counseling or marriage and family therapy. The degree shall be obtained from a school, college, or university accredited by a regional or national institutional accrediting agency that is recognized by the United States Department of Education or approved by the Bureau for Private Postsecondary Education. The board has the authority to make the final determination as to whether a degree meets all requirements, including, but not limited to, course requirements, regardless of accreditation or approval. In order to qualify for licensure pursuant to this section, a doctoral or master's degree program shall be a single, integrated program primarily designed to train marriage and family therapists and shall contain no less than 48 semester units or 72 quarter units of instruction. This instruction shall include no less than 12 semester units or 18 quarter units of coursework in the areas of marriage, family, and child counseling, and marital and family systems approaches to treatment. The coursework shall include all of the following areas:
  - (1) The salient theories of a variety of psychotherapeutic orientations directly related to marriage and family therapy, and marital and family systems approaches to treatment.
  - (2) Theories of marriage and family therapy and how they can be utilized in order to intervene therapeutically with couples, families, adults, children, and groups.

- (3) Developmental issues and life events from infancy to old age and their effect on individuals, couples, and family relationships. This may include coursework that focuses on specific family life events and the psychological, psychotherapeutic, and health implications that arise within couples and families, including, but not limited to, childbirth, child rearing, childhood, adolescence, adulthood, marriage, divorce, blended families, stepparenting, abuse and neglect of older and dependent adults, and geropsychology.
- (4) A variety of approaches to the treatment of children.

The board shall, by regulation, set forth the subjects of instruction required in this subdivision.

- (c) (1) In addition to the 12 semester or 18 quarter units of coursework specified in subdivision (b), the doctoral or master's degree program shall contain not less than six semester units or nine quarter units of supervised practicum in applied psychotherapeutic technique, assessments, diagnosis, prognosis, treatment planning, and treatment of premarital, couple, family, and child relationships, including dysfunctions, healthy functioning, health promotion, and illness prevention, in a supervised clinical placement that provides supervised fieldwork experience within the scope of practice of a marriage and family therapist.
  - (2) For applicants who enrolled in a degree program on or after January 1, 1995, the practicum shall include a minimum of 150 hours of face-to-face experience counseling individuals, couples, families, or groups.
  - (3) The practicum hours shall be considered as part of the 48 semester or 72 quarter unit requirement.
- (d) As an alternative to meeting the qualifications specified in subdivision (b), the board shall accept as equivalent degrees those master's or doctoral degrees granted by educational institutions whose degree program is approved by the Commission on Accreditation for Marriage and Family Therapy Education.
- (e) In order to provide an integrated course of study and appropriate professional training, while allowing for innovation and individuality in the education of marriage and family therapists, a degree program that meets the educational qualifications for licensure or registration under this section shall do all of the following:
  - (1) Provide an integrated course of study that trains students generally in the diagnosis, assessment, <u>prognosis</u>, treatment planning, and treatment of mental disorders.

- (2) Prepare students to be familiar with the broad range of matters that may arise within marriage and family relationships.
- (3) Train students specifically in the application of marriage and family relationship counseling principles and methods.
- (4) Encourage students to develop those personal qualities that are intimately related to the counseling situation such as integrity, sensitivity, flexibility, insight, compassion, and personal presence.
- (5) Teach students a variety of effective psychotherapeutic techniques and modalities that may be utilized to improve, restore, or maintain healthy individual, couple, and family relationships.
- (6) Permit an emphasis or specialization that may address any one or more of the unique and complex array of human problems, symptoms, and needs of Californians served by marriage and family therapists.
- (7) Prepare students to be familiar with cross-cultural mores and values, including a familiarity with the wide range of racial and ethnic backgrounds common among California's population, including, but not limited to, Blacks, Hispanics, Asians, and Native Americans.
- (f) Educational institutions are encouraged to design the practicum required by this section to include marriage and family therapy experience in low income and multicultural mental health settings.

# § 4980.81. LICENSURE BY EDUCATION AND EXPERIENCE: ADDITIONAL COURSEWORK

This section applies to persons subject to Section 4980.78 who apply for licensure or registration.

- (a) For purposes of Section 4980.78, an applicant shall meet all of the following educational requirements:
  - (1) A minimum of two semester units of instruction in the diagnosis, assessment, prognosis, treatment planning, and treatment of mental disorders, including severe mental disorders, evidence-based practices, and promising mental health practices that are evaluated in peer-reviewed literature.

- (2) At least one semester unit or 15 hours of instruction in psychological testing and at least one semester unit or 15 hours of instruction in psychopharmacology.
- (3) (A) Developmental issues from infancy to old age, including demonstration of at least one semester unit, or 15 hours, of instruction that includes all of the following subjects:
  - (i) The effects of developmental issues on individuals, couples, and family relationships.
  - (ii) The psychological, psychotherapeutic, and health implications of developmental issues and their effects.
  - (iii) The understanding of the impact that personal and social insecurity, social stress, low educational levels, inadequate housing, and malnutrition have on human development.
  - (B) An applicant who is deficient in any of these subjects may remediate the coursework by completing three hours of instruction in each deficient subject.
- (4) (A) The broad range of matters and life events that may arise within marriage and family relationships and within a variety of California cultures, including instruction in all of the following:
  - (i) A minimum of seven contact hours of training or coursework in child abuse assessment and reporting as specified in Section 28 and any regulations promulgated under that section.
  - (ii) A minimum of 10 contact hours of coursework that includes all of the following:
  - (I) The assessment and reporting of, as well as treatment related to, elder and dependent adult abuse and neglect.
  - (II) Aging and its biological, social, cognitive, and psychological aspects.
  - (III) Long-term care.
  - (IV) End-of-life and grief.
  - (iii) A minimum of 15 contact hours of coursework in spousal or partner abuse assessment, detection, intervention strategies, and same-gender abuse dynamics.

- (iv) Cultural factors relevant to abuse of partners and family members.
- (v) Childbirth, child rearing, parenting, and stepparenting.
- (vi) Marriage, divorce, and blended families.
- (vii) Poverty and deprivation.
- (viii) Financial and social stress.
- (ix) Effects of trauma.
- (x) The psychological, psychotherapeutic, community, and health implications of the matters and life events described in clauses (i) to (ix), inclusive.
- (5) At least one semester unit, or 15 hours, of instruction in multicultural development and cross-cultural interaction, including experiences of race, ethnicity, class, spirituality, sexual orientation, gender, and disability, and their incorporation into the psychotherapeutic process.
- (6) A minimum of 10 contact hours of training or coursework in human sexuality, as specified in Section 25 and any regulations promulgated under that section, including the study of physiological, psychological, and social cultural variables associated with sexual behavior and gender identity, and the assessment and treatment of psychosexual dysfunction.
- (7) A minimum of 15 contact hours of coursework in substance use disorders, and a minimum of 15 contact hours of coursework in co-occurring disorders and addiction. The following subjects shall be included in this coursework:
  - (A) The definition of substance use disorders, co-occurring disorders, and addiction. For purposes of this subparagraph, "co-occurring disorders" means a mental illness and substance abuse diagnosis occurring simultaneously in an individual.
  - (B) Medical aspects of substance use disorders and co-occurring disorders.
  - (C) The effects of psychoactive drug use.
  - (D) Current theories of the etiology of substance abuse and addiction.
  - (E) The role of persons and systems that support or compound substance abuse and addiction.

- (F) Major approaches to identification, evaluation, and treatment of substance use disorders, co-occurring disorders, and addiction, including, but not limited to, best practices.
- (G) Legal aspects of substance abuse.
- (H) Populations at risk with regard to substance use disorders and cooccurring disorders.
- (I) Community resources offering screening, assessment, treatment, and followup for the affected person and family.
- (J) Recognition of substance use disorders, co-occurring disorders, and addiction, and appropriate referral.
- (K) The prevention of substance use disorders and addiction.
- (8) A minimum of a two semester or three quarter unit course in law and professional ethics for marriage and family therapists, including instruction in all of the following subjects:
  - (A) Contemporary professional ethics and statutory, regulatory, and decisional laws that delineate the scope of practice of marriage and family therapy.
  - (B) The therapeutic, clinical, and practical considerations involved in the legal and ethical practice of marriage and family therapy, including, but not limited to, family law.
  - (C) The current legal patterns and trends in the mental health professions.
  - (D) The psychotherapist-patient privilege, confidentiality, the patient dangerous to self or others, and the treatment of minors with and without parental consent.
  - (E) A recognition and exploration of the relationship between a practitioner's sense of self and human values and their professional behavior and ethics.
  - (F) The application of legal and ethical standards in different types of work settings.
  - (G) Licensing law and licensing process.

## **LPCC**

# § 4999.32. QUALIFICATIONS FOR LICENSURE OR REGISTRATION; GRADUATE COURSEWORK BEGUN BEFORE AUGUST 1, 2012 AND COMPLETED BEFORE DECEMBER 31, 2018

- (a) This section shall apply to applicants for licensure or registration who began graduate study before August 1, 2012, and completed that study on or before December 31, 2018. Those applicants may alternatively qualify under paragraph (2) of subdivision (a) of Section 4999.33.
- (b) To qualify for licensure or registration, applicants shall possess a master's or doctoral degree that is counseling or psychotherapy in content and that meets the requirements of this section, obtained from an accredited or approved institution, as defined in Section 4999.12. For purposes of this subdivision, a degree is "counseling or psychotherapy in content" if it contains the supervised practicum or field study experience described in paragraph (3) of subdivision (c) and, except as provided in subdivision (d), the coursework in the core content areas listed in subparagraphs (A) to (I), inclusive, of paragraph (1) of subdivision (c).
- (c) The degree described in subdivision (b) shall be a single, integrated program that contains not less than 48 graduate semester units or 72 graduate quarter units of instruction, which shall, except as provided in subdivision (d), include all of the following:
  - (1) The equivalent of at least three semester units or four quarter units of graduate study in each of the following core content areas:
    - (A) Counseling and psychotherapeutic theories and techniques, including the counseling process in a multicultural society, an orientation to wellness and prevention, counseling theories to assist in selection of appropriate counseling interventions, models of counseling consistent with current professional research and practice, development of a personal model of counseling, and multidisciplinary responses to crises, emergencies, and disasters.
    - (B) Human growth and development across the lifespan, including normal and abnormal behavior and an understanding of developmental crises, disability, psychopathology, and situational and environmental factors that affect both normal and abnormal behavior.
    - (C) Career development theories and techniques, including career development decisionmaking models and interrelationships among and

- between work, family, and other life roles and factors, including the role of multicultural issues in career development.
- (D) Group counseling theories and techniques, including principles of group dynamics, group process components, developmental stage theories, therapeutic factors of group work, group leadership styles and approaches, pertinent research and literature, group counseling methods, and evaluation of effectiveness.
- (E) Assessment, appraisal, and testing of individuals, including basic concepts of standardized and nonstandardized testing and other assessment techniques, norm-referenced and criterion-referenced assessment, statistical concepts, social and cultural factors related to assessment and evaluation of individuals and groups, and ethical strategies for selecting, administering, and interpreting assessment instruments and techniques in counseling.
- (F) Multicultural counseling theories and techniques, including counselors' roles in developing cultural self-awareness, identity development, promoting cultural social justice, individual and community strategies for working with and advocating for diverse populations, and counselors' roles in eliminating biases and prejudices, and processes of intentional and unintentional oppression and discrimination.
- (G) Principles of the diagnostic process, including differential diagnosis, and the use of current diagnostic tools, such as the current edition of the Diagnostic and Statistical Manual of Mental Disorders, the impact of co-occurring substance use disorders or medical psychological disorders, established diagnostic criteria for mental or emotional disorders, and the treatment modalities and placement criteria within the continuum of care.
- (H) Research and evaluation, including studies that provide an understanding of research methods, statistical analysis, the use of research to inform evidence-based practice, the importance of research in advancing the profession of counseling, and statistical methods used in conducting research, needs assessment, and program evaluation.
- (I) Professional orientation, ethics, and law in counseling, including professional ethical standards and legal considerations, licensing law and process, regulatory laws that delineate the profession's scope of practice, counselor-client privilege, confidentiality, the client dangerous

to self or others, treatment of minors with or without parental consent, relationship between practitioner's sense of self and human values, functions and relationships with other human service providers, strategies for collaboration, and advocacy processes needed to address institutional and social barriers that impede access, equity, and success for clients.

- (2) In addition to the course requirements described in paragraph (1), a minimum of 12 semester units or 18 quarter units of advanced coursework to develop knowledge of specific treatment issues, special populations, application of counseling constructs, assessment and treatment planning, clinical interventions, therapeutic relationships, psychopathology, or other clinical topics.
- (3) Not less than six semester units or nine quarter units of supervised practicum or field study experience that involves direct client contact in a clinical setting that provides a range of professional clinical counseling experience, including the following:
  - (A) Applied psychotherapeutic techniques.
  - (B) Assessment.
  - (C) Diagnosis.
  - (D) Prognosis.
  - (DE) Treatment planning.
  - (EF) Treatment.
  - (<u>FG</u>) Issues of development, adjustment, and maladjustment.
  - (GH) Health and wellness promotion.
  - (HI) Other recognized counseling interventions.
  - (1) A minimum of 150 hours of face-to-face supervised clinical experience counseling individuals, families, or groups.
- (d) (1) (A) An applicant whose degree is deficient in no more than two of the required areas of study listed in subparagraphs (A) to (I), inclusive, of paragraph (1) of subdivision (c) may satisfy those deficiencies by successfully completing postmaster's or postdoctoral degree coursework at an accredited or approved institution, as defined in Section 4999.12.

- (B) Notwithstanding subparagraph (A), an applicant shall not be deficient in the required areas of study specified in subparagraph (E) or (G) of paragraph (1) of subdivision (c) unless the applicant meets one of the following criteria and remediates the deficiency:
  - (i) The application for licensure was received by the board on or before August 31, 2020.
  - (ii) The application for registration was received by the board on or before August 31, 2020, and the registration was subsequently issued by the board.
- (2) Coursework taken to meet deficiencies in the required areas of study listed in subparagraphs (A) to (I), inclusive, of paragraph (1) of subdivision (c) shall be the equivalent of three semester units or four quarter units of study.
- (3) The board shall make the final determination as to whether a degree meets all requirements, including, but not limited to, course requirements, regardless of accreditation.
- (e) In addition to the degree described in this section, or as part of that degree, an applicant shall complete the following coursework or training prior to registration as an associate:
  - (1) A minimum of 15 contact hours of instruction in alcoholism and other chemical substance abuse dependency, as specified by regulation.
  - (2) A minimum of 10 contact hours of training or coursework in human sexuality as specified in Section 25, and any regulations promulgated thereunder.
  - (3) A two semester unit or three quarter unit survey course in psychopharmacology.
  - (4) A minimum of 15 contact hours of instruction in spousal or partner abuse assessment, detection, and intervention strategies, including knowledge of community resources, cultural factors, and same gender abuse dynamics.
  - (5) A minimum of seven contact hours of training or coursework in child abuse assessment and reporting as specified in Section 28 and any regulations adopted thereunder.
  - (6) A minimum of 18 contact hours of instruction in California law and professional ethics for professional clinical counselors that includes,

but is not limited to, instruction in advertising, scope of practice, scope of competence, treatment of minors, confidentiality, dangerous clients, psychotherapist-client privilege, recordkeeping, client access to records, dual relationships, child abuse, elder and dependent adult abuse, online therapy, insurance reimbursement, civil liability, disciplinary actions and unprofessional conduct, ethics complaints and ethical standards, termination of therapy, standards of care, relevant family law, therapist disclosures to clients, and state and federal laws related to confidentiality of patient health information. When coursework in a master's or doctoral degree program is acquired to satisfy this requirement, it shall be considered as part of the 48 semester unit or 72 quarter unit requirement in subdivision (c).

- (7) A minimum of 10 contact hours of instruction in aging and long-term care, which may include, but is not limited to, the biological, social, and psychological aspects of aging. On and after January 1, 2012, this coursework shall include instruction on the assessment and reporting of, as well as treatment related to, elder and dependent adult abuse and neglect.
- (8) A minimum of 15 contact hours of instruction in crisis or trauma counseling, including multidisciplinary responses to crises, emergencies, or disasters, and brief, intermediate, and long-term approaches.

# § 4999.33. QUALIFICATIONS FOR LICENSURE OR REGISTRATION; GRADUATE COURSEWORK BEGINNING AFTER AUGUST 1, 2012 OR COMPLETED AFTER DECEMBER 31, 2018

- (a) This section shall apply to the following:
  - (1) Applicants for licensure or registration who begin graduate study before August 1, 2012, and do not complete that study on or before December 31, 2018.
  - (2) Applicants for licensure or registration who begin graduate study before August 1, 2012, and who graduate from a degree program that meets the requirements of this section.
  - (3) Applicants for licensure or registration who begin graduate study on or after August 1, 2012.

- (b) To qualify for licensure or registration, applicants shall possess a master's or doctoral degree that is counseling or psychotherapy in content and that meets the requirements of this section, obtained from an accredited or approved institution, as defined in Section 4999.12. For purposes of this subdivision, a degree is "counseling or psychotherapy in content" if it contains the supervised practicum or field study experience described in paragraph (3) of subdivision (c) and, except as provided in subdivision (f), the coursework in the core content areas listed in subparagraphs (A) to (M), inclusive, of paragraph (1) of subdivision (c).
- (c) The degree described in subdivision (b) shall be a single, integrated program that contains not less than 60 graduate semester units or 90 graduate quarter units of instruction, which shall, except as provided in subdivision (f), include all of the following:
  - (1) The equivalent of at least three semester units or four quarter units of graduate study in all of the following core content areas:
    - (A) Counseling and psychotherapeutic theories and techniques, including the counseling process in a multicultural society, an orientation to wellness and prevention, counseling theories to assist in selection of appropriate counseling interventions, models of counseling consistent with current professional research and practice, development of a personal model of counseling, and multidisciplinary responses to crises, emergencies, and disasters.
    - (B) Human growth and development across the lifespan, including normal and abnormal behavior and an understanding of developmental crises, disability, psychopathology, and situational and environmental factors that affect both normal and abnormal behavior.
    - (C) Career development theories and techniques, including career development decisionmaking models and interrelationships among and between work, family, and other life roles and factors, including the role of multicultural issues in career development.
    - (D) Group counseling theories and techniques, including principles of group dynamics, group process components, group developmental stage theories, therapeutic factors of group work, group leadership styles and approaches, pertinent research and literature, group counseling methods, and evaluation of effectiveness.
    - (E) Assessment, appraisal, and testing of individuals, including basic concepts of standardized and nonstandardized testing and other

- assessment techniques, norm-referenced and criterion-referenced assessment, statistical concepts, social and cultural factors related to assessment and evaluation of individuals and groups, and ethical strategies for selecting, administering, and interpreting assessment instruments and techniques in counseling.
- (F) Multicultural counseling theories and techniques, including counselors' roles in developing cultural self-awareness, identity development, promoting cultural social justice, individual and community strategies for working with and advocating for diverse populations, and counselors' roles in eliminating biases and prejudices, and processes of intentional and unintentional oppression and discrimination.
- (G) Principles of the diagnostic process, including differential diagnosis, and the use of current diagnostic tools, such as the current edition of the Diagnostic and Statistical Manual of Mental Disorders, the impact of co-occurring substance use disorders or medical psychological disorders, established diagnostic criteria for mental or emotional disorders, and the treatment modalities and placement criteria within the continuum of care.
- (H) Research and evaluation, including studies that provide an understanding of research methods, statistical analysis, the use of research to inform evidence-based practice, the importance of research in advancing the profession of counseling, and statistical methods used in conducting research, needs assessment, and program evaluation.
- (I) Professional orientation, ethics, and law in counseling, including California law and professional ethics for professional clinical counselors, professional ethical standards and legal considerations, licensing law and process, regulatory laws that delineate the profession's scope of practice, counselor-client privilege, confidentiality, the client dangerous to self or others, treatment of minors with or without parental consent, relationship between practitioner's sense of self and human values, functions and relationships with other human service providers, strategies for collaboration, and advocacy processes needed to address institutional and social barriers that impede access, equity, and success for clients.
- (J) Psychopharmacology, including the biological bases of behavior, basic classifications, indications, and contraindications of commonly

- prescribed psychopharmacological medications so that appropriate referrals can be made for medication evaluations and so that the side effects of those medications can be identified.
- (K) Addictions counseling, including substance abuse, co-occurring disorders, and addiction, major approaches to identification, evaluation, treatment, and prevention of substance abuse and addiction, legal and medical aspects of substance abuse, populations at risk, the role of support persons, support systems, and community resources.
- (L) Crisis or trauma counseling, including crisis theory; multidisciplinary responses to crises, emergencies, or disasters; cognitive, affective, behavioral, and neurological effects associated with trauma; brief, intermediate, and long-term approaches; and assessment strategies for clients in crisis and principles of intervention for individuals with mental or emotional disorders during times of crisis, emergency, or disaster.
- (M) Advanced counseling and psychotherapeutic theories and techniques, including the application of counseling constructs, assessment and treatment planning, clinical interventions, therapeutic relationships, psychopathology, or other clinical topics.
- (2) In addition to the course requirements described in paragraph (1), 15 semester units or 22.5 quarter units of advanced coursework to develop knowledge of specific treatment issues or special populations.
- (3) Not less than six semester units or nine quarter units of supervised practicum or field study experience that involves direct client contact in a clinical setting that provides a range of professional clinical counseling experience, including the following:
  - (A) Applied psychotherapeutic techniques.
  - (B) Assessment.
  - (C) Diagnosis.
  - (D) Prognosis.
  - (DE) Treatment planning.
  - (EF) Treatment.

- (<u>FG</u>) Issues of development, adjustment, and maladjustment.
- (GH) Health and wellness promotion.
- (HI) Professional writing including documentation of services, treatment plans, and progress notes.
- (IJ) How to find and use resources.
- (JK) Other recognized counseling interventions.
- (KL) A minimum of 280 hours of face-to-face supervised clinical experience counseling individuals, families, or groups.
- (d) The 60 graduate semester units or 90 graduate quarter units of instruction required pursuant to subdivision (c) shall, in addition to meeting the requirements of subdivision (c), include instruction in all of the following:
  - (1) The understanding of human behavior within the social context of socioeconomic status and other contextual issues affecting social position.
  - (2) The understanding of human behavior within the social context of a representative variety of the cultures found within California.
  - (3) Cultural competency and sensitivity, including a familiarity with the racial, cultural, linguistic, and ethnic backgrounds of persons living in California.
  - (4) An understanding of the effects of socioeconomic status on treatment and available resources.
  - (5) Multicultural development and cross-cultural interaction, including experiences of race, ethnicity, class, spirituality, sexual orientation, gender, and disability and their incorporation into the psychotherapeutic process.
  - (6) Case management, systems of care for the severely mentally ill, public and private services for the severely mentally ill, community resources for victims of abuse, disaster and trauma response, advocacy for the severely mentally ill, and collaborative treatment. The instruction required in this paragraph may be provided either in credit level coursework or through extension programs offered by the degree-granting institution.
  - (7) Human sexuality, including the study of the physiological, psychological, and social cultural variables associated with sexual behavior, gender identity, and the assessment and treatment of psychosexual dysfunction.

- (8) Spousal or partner abuse assessment, detection, intervention strategies, and same gender abuse dynamics.
- (9) A minimum of seven contact hours of training or coursework in child abuse assessment and reporting, as specified in Section 28, and any regulations promulgated thereunder.
- (10) Aging and long-term care, including biological, social, cognitive, 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.
- (e) A degree program that qualifies for licensure under this section shall do all of the following:
  - (1) Integrate the principles of mental health recovery-oriented care and methods of service delivery in recovery-oriented practice environments.
  - (2) Integrate an understanding of various cultures and the social and psychological implications of socioeconomic position.
  - (3) Provide the opportunity for students to meet with various consumers and family members of consumers of mental health services to enhance understanding of their experience of mental illness, treatment, and recovery.
- (f) (1) (A) An applicant whose degree is deficient in no more than three of the required areas of study listed in subparagraphs (A) to (M), inclusive, of paragraph (1) of subdivision (c) may satisfy those deficiencies by successfully completing postmaster's or postdoctoral degree coursework at an accredited or approved institution, as defined in Section 4999.12.
  - (B) Notwithstanding subparagraph (A), an applicant shall not be deficient in the required areas of study specified in subparagraphs (E) or (G) of paragraph (1) of subdivision (c) unless the applicant meets one of the following criteria and remediates the deficiency:
    - (i) The application for licensure was received by the board on or before August 31, 2020.
    - (ii) The application for registration was received by the board on or before August 31, 2020, and the registration was subsequently issued by the board.

- (2) Coursework taken to meet deficiencies in the required areas of study listed in subparagraphs (A) to (M), inclusive, of paragraph (1) of subdivision (c) shall be the equivalent of three semester units or four quarter units of study.
- (3) The board shall make the final determination as to whether a degree meets all requirements, including, but not limited to, course requirements, regardless of accreditation.

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