



Board of Behavioral Sciences

Memo

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To: Board Members

Date: August 10, 2023

From: Steve Sodergren
Executive Officer

Subject: Examinations Report

EXAMINATION PASS RATES

Attached for your review are the examination statistics by school for the LCSW, LMFT, and LPCC clinical exams as well as the LEP written exam. Currently, the LCSW, LMFT, and LPCC law and ethics exam results are not available. Exam staff is working with the Breeze team to correct the issue.

	3 rd QTR FY 2022/2023				4 th QTR FY 2022/2023			
	Total	Pass %	TOTAL 1st Time	Pass % 1st Time	Total	Pass %	TOTAL 1st Time	Pass % 1st Time
LMFT								
Clinical	836	67%	512	83%	869	64%	539	81%
LCSW								
ASWB	918	56%	543	75%	1,058	56%	663	76%
LPCC								
NCMHCE	174	76%	117	83%	206	80%	152	87%
LEP								
LEP	49	53%	35	60%	63	65%	52	67%
TOTALS								
Total	1,977				2,196			

EXAMINATION DEVELOPMENT

Five examination development workshops were conducted from April 1, 2023, through June 30, 2023. All workshops were in-person at the Office of Professional Exam Administrators (OPES) office in Sacramento, CA.

Board staff continues to work with OPES on recruiting subject matter experts (SME) for the various Board administered exams. There has been a request to prioritize this for newly licensed (0 – 5 years) LMFT's and for all licensed ranges for LEP's and LPCC's. We will continue to work on the other license types in all ranges of licensure.

Effective 7/1/23, OPES has taken over the responsibility of processing SME invoices. Board staff will continue to process contracts.

SECTION 139 REPORT

BPC §139 requires DCA programs to submit information about their licensure examinations each fiscal year. This data is published in DCA's Annual Report to the Legislature. Exam staff completed this report and forwarded to OPES for fiscal year 2022-2023.

ASSOCIATION OF SOCIAL WORK BOARDS EXAMINATION UPDATE

The Association of Social Work Boards (ASWB) have undertaken various initiatives to enhance the social work licensing exams to ensure their continued fairness, reliability, and validity. This effort to enhancement project is a multi-year data-driven process that includes three phases: research, creation, and implementation. The goal is to implement updates to the exams in 2026. Recently, they collected data through a qualitative research initiative called "community conversations" which engaged individuals and collected feedback on their experiences with exams and the licensing process. ASWB will also be collaborating with third-party psychometric experts to identify and evaluate potential alternative assessment models. This information is included in a letter published by ASWB on July 13, 2013. (Attachment A)

STAKEHOLDER CONCERNS REGARDING PROFESSIONAL EXAMINATIONS

In November of 2022 the ASWB released exam pass rate data that showed disparities in pass rates between white people and people of color. Since then, stakeholders have raised concerns regarding the use of clinical examinations for licensure. A discussion on this topic was planned for this August Board meeting. The discussion regarding the use of clinical examinations for licensure will take place at future Licensing Committee meetings and will be included in the Board's efforts to identify and reduce any unnecessary barriers to licensure. In response to the concerns that have been raised, OPES has provided a letter to the Board regarding the purpose and validity of licensure examinations. (Attachment B) Additionally, attached are two letters that were submitted

from stakeholders in preparation for this discussion. (Attachment C - Ben Caldwell August 1st Letter; Attachment D - NASW California Chapter August 3rd Letter)

VOLUNTARY EXAMINATION DEMOGRAPHIC SURVEY

Board staff have been working with OPES to draft a voluntary demographic survey for examination candidates that are participating in the Law & Ethics Examinations, Licensed Educational Psychologist Written Examination, and the Licensed Marriage and Family Therapist Clinical Examination. Staff will determine how to implement the survey and will be report on the plan at the next Licensing Committee meeting.

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Exam Program

July 13, 2023

ASWB to update the social work licensing examinations, building off research and including an increasingly diverse range of voices

The Association of Social Work Boards has undertaken a series of initiatives that will inform the development of updated competence measures that are even more reflective of today's practice of social work. Our work on these new assessments builds off more than a year of ASWB's investment in qualitative and quantitative research on the social work profession and individual practitioners' experiences with licensure. This work is an ongoing and long-term commitment by ASWB to enhance the social work licensing exams to ensure their continued fairness, reliability, and validity. The multiyear data-driven development process includes three phases: research, creation, and implementation of updates in 2026.

Our goal is and always has been to provide competence measurements that are fair, valid, and reliable indicators of whether a social worker has the knowledge, skills, and abilities they need for safe and ethical practice their first day on the job. We look forward to providing updated assessments that

are uniform, objective, valid, and support public protection.

– Stacey Hardy-Chandler, Ph.D., J.D., LCSW, ASWB CEO

“Over the past year, ASWB has engaged with numerous stakeholders and social workers throughout the United States and Canada to share more about our exam development processes and to understand more about the test-taking experience,” said ASWB’s board president, Roxroy Reid, Ph.D., LSCW. “Through that engagement, and in line with our strategic framework, ASWB is evolving its practices and will release updated competence assessment measures for social workers to help regulators fulfill their public protection mandate.”

As a starting point, we are conducting multiple research projects to inform the next iteration of our competence measures, ensuring that they remain valid, reliable, and fair. Recently, we commissioned an effort to collect data through a qualitative research initiative, called [community conversations](#). This effort is aimed at gathering insights from social workers about their experiences taking the exams and getting licensed. The results gathered through this work will be published later this year and will inform exam development and administration practices.

We are also collaborating with third-party psychometric experts to identify and evaluate potential alternative assessment models, and we are funding research related to professional regulation.

Throughout our efforts, we will continue to engage a wide range of voices to inform our planning and development efforts. Specifically, we will work with social workers and our vendors to:

- Add an option for secure online administration to make the exams as accessible as possible and meet the diverse needs of test-takers in 2024.
- Invest in a large-scale workforce survey, called the Social Work Census, to understand who social workers are and what they do. The census will collect input from a wide

range of social workers, both licensed and unlicensed, and serve as the social work practice analysis that determines the knowledge, skills, and abilities that we need to measure. It will also make critical workforce data available to the social work profession to increase understanding and promote inclusion in the field.

- Build updated competence assessments and establish the passing standard – as is standard testing industry practice when an assessment is updated – using input from the largest, most diverse, and most inclusive group of social work subject matter experts ever assembled for this purpose.

This multipronged work will occur in phases, leading to the release of updated competence measures in 2026.

“We understand that the profession is just that – a profession – one that needs licensing to maintain its stature and protect those who need our services. We’re excited to begin the next chapter in our work to support social workers and ensure that each aspiring social worker can equally demonstrate their competence,” said ASWB CEO Stacey Hardy-Chandler, Ph.D., J.D., LSCW. “Our goal is and always has been to provide competence measurements that are fair, valid, and reliable indicators of whether a social worker has the knowledge, skills, and abilities they need for safe and ethical practice their first day on the job. We look forward to providing updated assessments that are uniform, objective, valid, and support public protection.”

For more information, please visit [Exams for the Future of Social Work](#).



MEMORANDUM

DATE	August 7, 2023
TO	Steve Sodergren, Executive Officer Board of Behavioral Sciences
FROM	Heidi Lincer, Ph.D., Chief Office of Professional Examination Services
SUBJECT	The Purpose and Validity of Licensure Examinations

The Office of Professional Examination Services (OPES) has prepared this memo in response to recently released data and discussion regarding disparities in licensure pass rates between different racial and ethnic groups. This memo explains the purpose and validity of licensure examinations and includes OPES' perspective and recommendations to help DCA programs navigate this issue.

Purpose of Licensure Examinations

The purpose of licensure examinations is to identify candidates who are qualified to practice safely and competently. Examinations are typically just one component of licensure requirements, in addition to education, experience, and training. Licensure examinations are designed to provide a standardized measure of minimum competence for independent practice, regardless of any variability in education, training, or experience programs.

Valid licensure examinations are currently the best method to prevent unqualified individuals from obtaining professional licenses and potentially causing public harm.

Content Validity vs. Predictive Validity

Licensure examinations must meet legal guidelines and technical standards. *The Standards for Educational and Psychological Testing (2014, Standards)* are universally accepted by experts who develop licensure and educational examinations (psychometricians) and by courts.

The *Standards* requires that licensure examinations demonstrate content validity. Content validity is established by ensuring the examination content is current and job-related based on the input of a diverse group of practicing licensees serving as subject matter experts (SMEs). SMEs must participate in all aspects of

licensure examination development, including occupational analysis (defining the examination content) and standard setting (determining the passing score). The diversity of the SMEs should match the diversity of the profession in terms of gender, race, ethnicity, specialty area, and geographic region of practice. The input of SMEs licensed 5 years or less is essential to ensure the examination content reflects an entry level perspective.

Predictive validity refers to an examination's ability to predict outcomes on a criterion measure, such as practitioner effectiveness. Licensure examinations are not designed to make such predictions. They are designed to identify which candidates have the minimum knowledge to practice safely and competently. Therefore, content validity, and not predictive validity, is the standard for licensure examinations.

Fairness, Equality, and Equity

A valid licensure examination provides fairness to candidates by testing in a standardized environment and by ensuring that all candidates are held to the same competency standard. Fairness also involves consideration of cultural and linguistic factors that may affect a candidate's interpretation of examination items. Equality means that all candidates are given the same opportunity to demonstrate their knowledge. Equity means that candidates may need individual accommodations or modifications to make the examination accessible and thereby have the same opportunity to demonstrate their knowledge.

From a measurement perspective, a valid examination provides accurate licensure decisions. Candidates who possess the minimum knowledge assessed by the examination should pass; candidates who do not possess the minimum knowledge should not pass. However, examinations are not perfect. There are always extraneous factors that can reduce the accuracy of licensure decisions. Psychometricians are responsible for identifying and trying to mitigate extraneous factors that are under their control.

To claim that examinations are racially biased is concerning and misleading. Psychometricians are actively engaged in processes to increase the fairness of examinations. There may be cultural and linguistic factors that affect a candidate's ability to understand an examination item. The *Standards* requires licensure examinations to undergo multiple review processes to identify these factors. Test development specialists, diverse SMEs, statisticians, and editors trained in writing plain and culturally sensitive language all contribute to the review process. Statisticians conduct statistical reviews of examination performance regularly to identify examination items that are not performing

well. These examination items are reviewed by SMEs and then revised or deleted.

Candidates whose first language is not English may be offered additional time, translated examinations, the use of an interpreter, or special dictionaries. The decision to provide these modifications must be carefully weighed against the need to understand English as an essential requirement for practice.

A licensure examination is developed within the context of the licensure community. Conducting linguistic and cultural reviews; statistical analysis of examination item performance; and providing accommodations and modifications for candidates are all designed to reduce extraneous factors that may affect a candidate's ability to demonstrate minimum competence.

Understanding Factors Affecting Examination Passing Rates

It is well documented that standardized examinations in education frequently show differences in pass rates between racial, ethnic, and socioeconomic groups. Psychometricians are always concerned about the influence of factors other than the actual knowledge and ability the examination is designed to measure. Understanding these factors is key to potentially providing solutions for mitigating them.

Recently, the Association of Social Work Boards (ASWB) shared first-time passing rates by race and ethnicity for the national Licensed Clinical Social Work (LCSW) examination. The ASWB should be commended for sharing this data publicly. The ASWB found minimal, but not statistically significant, evidence of differential item functioning (DIF) among similarly qualified groups at the examination item level. However, they did find significant differential pass rates by race for the overall examination. These findings suggest that there may be factors unrelated to understanding the actual examination items that are affecting candidate scores.

To further evaluate differential pass rates, we must first have accurate data. Data provided by verified sources, such as licensing entities, is more accurate than data collected by external third parties, because third-party data may be incomplete or affected by selection bias. Second, we must evaluate other candidate variables that may affect passing rates, such as type of educational institution, degree type, and training experience setting.

Finally, it is possible that systemic societal factors, such as longstanding educational inequities, could result in test anxiety or insufficient test-taking preparedness. Psychometricians are just starting to investigate the possible impact of these factors on differential pass rates in licensure examinations.

Practical Recommendations

OPES is committed to assisting DCA programs to navigate concerns about differential pass rates. OPES has the following recommendations:

- Listen to stakeholder concerns about extraneous factors that could affect pass rates.
- Ensure that a diverse group of SMEs is involved in all aspects of examination development.
- Ask for differential item functioning (DIF) analysis, if possible.
- Consider offering additional time or other options for candidates whose first language is not English.
- Evaluate examination retest policies to ensure candidates have multiple opportunities to pass the examination.

Summary and Conclusions

OPES supports the use of licensure examinations as a standardized measure to assess whether a candidate has achieved the minimum level of competence to practice safely and effectively. Although licensure examinations are not perfect, they are currently the most valid and legally defensible method to assess competency and protect the public.

Differential pass rates may be caused by a variety of factors. The licensure examination industry is only beginning to investigate possible factors. OPES will be following this discussion closely. The licensure examination industry must work toward developing examinations that provide candidates the opportunity to demonstrate their competence. OPES will continue to support DCA programs in reducing unnecessary barriers to licensure and in making decisions related to licensure examinations.

Benjamin E. Caldwell, PsyD

Board of Behavioral Sciences

Via e-mail

Re: Clinical exams for BBS licensure
(topic to be discussed at August 18 meeting in open session)

August 1, 2023

Dear Board Members,

Whether an examinee is Black is a stronger predictor of performance on the California MFT Clinical Exam than how much they prepare, perceived struggles with the material, how they manage anxiety, their stress level, coping strategies, or many other factors.

This recent finding (Lyness & Gehart, in draft) is consistent with existing research on the ASWB Clinical Exam (ASWB, 2022) and the EPPP in psychology (Sharpless, 2019; Sharpless, 2021). These exams, like the AMFTRB National MFT Exam and the NCMHCE used in counseling, all use similar structures and development processes. It is little surprise that they all show similar racial disparities. White examinees' pass rates are consistently in the 80% range or above, while Black examinees' rates are 50% or lower, with other racial and ethnic groups in between.

Meanwhile, exam developers steadfastly resist calls to produce some evidence – *any* evidence – that their exams assess a meaningful construct, and do so with meaningful validity.

NASW (2023) recently joined a growing list of scholars in calling for a pause to the ASWB Clinical Exam in light of the clear evidence of racial disparity in ASWB's 2022 report.

Considering the similar exam structures and development processes shared by all clinical exams in BBS use, such a pause should be considered for all clinical exams.

I greatly appreciate your willingness to further investigate the concerns around clinical exams in mental health care. Here are three resources that may be especially useful to the discussion:

- Victor et al. (2023) showed that an artificial intelligence engine could pass the ASWB Clinical Exam on two out of three attempts *without even seeing the exam questions*. The AI engine was simply responding to cues and patterns in the response options. This is clear evidence of what measurement researchers call *construct-irrelevant variance*, raising significant concerns with exam validity.
<https://journals.sagepub.com/doi/10.1177/10497315231188305>
(A full-text version of the authors' original submission can be found at https://www.researchgate.net/publication/371958957_Construct-Irrelevant_Variance_on_the_ASWB_Clinical_Social_Work_Licensing_Exam_A_Replication_of_Prior_Validity_Concerns)

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Benjamin E. Caldwell, PsyD

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- My manuscript “Mental health clinical exams’ evident adherence to industry standards for testing” outlines foundational concerns with whether clinical exams used by the BBS actually adhere to minimum standards used across the testing industry. The manuscript is currently undergoing peer review for journal publication. A full-text version of the author’s original submission can be found at https://www.researchgate.net/publication/372855363_Mental_health_clinical_exams'_evident_adherence_to_industry_standards_for_testing
- Psychologist Dr. Tony Rousmaniere and I co-authored a white paper last year outlining additional substantive concerns with clinical exams in mental health care. This paper also outlines possible alternative credentialing measures. It can be reviewed in full at <https://www.psychotherapy.com/wp-content/uploads/2022/10/Clinical-Licensing-Exams-in-Mental-Health-Care-October-2022.pdf>

Ideally, I urge you to work with the Governor’s office to declare a state of emergency for mental health in California (an unfortunately easy case to make, given existing data on suicide and unmet mental health needs). This would allow the Governor’s office, through DCA, to issue a **temporary waiver of clinical exams for those who have completed all other licensure requirements**, bringing more than 4,000 individuals – disproportionately clinicians of color – into the licensed mental health workforce.

Regardless of whether you choose to pursue emergency measures, I hope you will pursue legislation allowing you greater autonomy in determining the most appropriate means of assessment of candidates for licensure, rather than specifically requiring a clinical exam. This will extricate you from the difficult position of being required by law to provide a clinical exam, when no existing exam appears to meet minimum standards for validity and equity.

Finally, the most immediately actionable concern is that the California MFT Clinical Exam has never been statistically assessed by OPES for bias on the basis of race or other demographic factors. This is a critical and fundamental issue of equity in the licensing process. While OPES has noted that state law precludes them from engaging in the *mandatory* collection of demographic data in the exam process (California Government Code, section 8310), this is no excuse for their longstanding failure to gather such data on a *voluntary* basis. Gathering this data allows for exams to be evaluated for differential item functioning (DIF) and differential test functioning (DTF) — different but related forms of test bias. OPES’ failure to take the necessary steps to assess their own exams for bias represents a serious departure from common standards and practices for fairness in testing, particularly in the presence of credible evidence suggesting bias is common in clinical exams.

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Benjamin E. Caldwell, PsyD

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I appreciate that the Board has, in past meetings, defined its public protection mandate as one of ensuring both a safe *and adequate* mental health workforce to meet California's needs. **Clinical exams in mental health care have produced no evidence to date that they actually result in a safer or more effective workforce. However, the evidence is clear and abundant that clinical exams, as they are presently used, create a whiter workforce,** making it harder for individuals of color or those who do not speak English as a native language to find adequate mental health care when they are in dire need. Based on the existing evidence, pursuing an immediate pause in clinical exams for licensure would be wholly consistent with the Board's public protection mission.

Stakeholders may reasonably raise concerns about license portability and job eligibility for licensees should the board move forward with a pause (temporary or permanent) on clinical exams. While these concerns are reasonable, federal job classifications for mental health professionals typically rely on graduate program accreditation and state licensure, *not* examination. Where portability is concerned, states that choose to enforce an examination standard would remain free to enforce that requirement at the time someone from California applies for licensure in the other state. This is similar to the current process in states that require the National MFT Exam for MFTs, but do not offer a process of licensure by endorsement. **In any event, these concerns do not outweigh the serious and continued harm being done to individual examinees and to the public by clinical exams that have shown no evidence of benefit, and ample evidence of bias.**

I hope the linked resources will be useful to the Board's discussion. I am eager to work with the BBS and other stakeholders to ensure that Californians can enjoy an adequate, equitable, and accessible supply of licensed mental health providers.

Warm regards,

Benjamin E. Caldwell, PsyD
Licensed Marriage and Family Therapist

(References on next page)

Benjamin E. Caldwell, PsyD

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Board of Behavioral Sciences
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August 3, 2023

Dear Board Members and Staff,

This letter is in reference to the planned discussion at the August 2023 BBS Board Meeting regarding the use of clinical exams for licensure. As stated in a previous letter and correspondence from our organization, we remain deeply concerned about the ASWB data on pass rates related to social work exams, including the ASWB Clinical Exam. The data represents glaring disparities in pass rates between white people and people of color – particularly Black test-takers in addition to gender, age, and language disparities. The harm to marginalized communities which has been reported for years is now demonstrated by data, and it is time to re-evaluate the efficacy of this exam.

Since the Board’s November 2022 meeting, more research has been done on this issue. A recent study <https://journals.sagepub.com/doi/10.1177/10497315231188305> highlighted the “need for reassessment of its (ASWB exam) structure and content to ensure fairness and accuracy. Based on the findings, state legislators and regulators are encouraged to temporarily discontinue the use of the ASWB exam in the clinical licensure process until its validity flaws are resolved.”

Additionally, a paper titled “Mental health clinical exams’ evident adherence to industry standards for testing” by Ben Caldwell, PsyD, concludes that “clinical exams for US mental health care licensure appear to deviate in important ways from both the letter and the spirit of the Standards for Educational and Psychological Testing (American Educational Research Association, American Psychological Association, & National Council on Measurement in Education, 2014). Clinical exams should be paused unless and until they are shown to be fair, equitable, valid, and more fully consistent with industry norms.”

NASW-CA is committed to supporting a diverse multilingual social work field, including Licensed Social Workers (LCSWs), that reflect the communities we serve, and we will continue to advocate for the removal of the historical barriers communities of color continue to face when choosing the social work profession and clinical licensure. Barriers to obtaining an LCSW based on race, age, language, and gender present a disservice to the public and the profession as a whole. These disparities are counterproductive to the needs of communities during a time of dire workforce shortages and scarcity of resources to address the behavioral health and social needs of marginalized communities across the state.

We understand the need for the state to regulate ethics and practices involving independent clinical licensure yet believe that the current ASWB test reinforces disparities that are not congruent with social work values. We strongly urge the BBS to consider increasing evidence concerning the [inefficacy of standardized testing in clinical exams](#) and to begin important conversations about equitable pathways toward clinical licensure that account for the mountains of research available on the discriminatory nature of standardized testing.

In October 2022, NASW-CA sent a letter to the BBS with a list of possible actions by the board to address this issue. Since then, several states have proposed ways to alter their licensure process based on data on the inadequacy of the exams. Notably, Illinois passed legislation with an alternate path to licensure that will require a person who has attempted to pass the exam at least once to complete additional supervised hours in lieu of eventually passing the exam.

<https://www.ilga.gov/legislation/BillStatus.asp?DocNum=2365&GAID=17&DocTypeID=HB&LegId=147441&SessionID=112&GA=103>.

We believe it would be appropriate for the BBS to consider additional hours that can be completed in lieu of passing the ASWB exam as an alternate path to licensure. In addition, we also support the suggestion by Dr. Caldwell, PsyD, in his letter to the Board on August 1, 2023, which called on the Board to urge the Governor to declare a mental health state of emergency which would allow the Board to temporarily discontinue the use of clinical exams, across the board for all professions. We also support Dr. Caldwell's suggestion to pursue legislation which will enable the BBS to determine the best path for assessing candidates for licensure.

Lastly, we continue to call on the BBS to collaborate with state-level experts, such as the California Association of Deans and Directors of Social Work (CAAD) and NASW-CA, to evaluate data and embrace lessons learned from other states and allied professions that have worked to create a more equitable licensure process. In doing so, we wish to boldly address the documented inequities of standardized testing by collaboratively innovating the ways our state can address the shortages in our workforce. With all the information available, we believe that the BBS, NASW-CA, nor any other stakeholder in the clinical licensure process can continue to ignore the need to diversify the provider community to reflect those we serve, and we feel confident that our state can serve as a model for developing equitable pathways for clinical advancement in social work.

In California, we are fortunate to live and work in richly diverse communities where communities of color are the majority. It is distressing that the composition of service providers and those in public and private leadership do not more accurately or effectively mirror our state's demographics. We must stop being complicit in perpetuating harmful systems that further compound the complexities and inequities of behavioral healthcare.

We look forward to working in partnership with you to examine the overall equity, fairness, and effectiveness of clinical exams in mental health care and with the goal of collaboratively determining alternate pathways to licensure. We appreciate the Board's ongoing intentions and efforts to protect the public through licensure processes that are both equitable and effective, and we call on our colleagues to weigh the impact on the workforce in our state.

Sincerely,



Rebecca Gonzales
Director of Government Relations and Political Affairs

