Board of Behavioral Sciences

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Gavin Newsom, Governor
State of California

Business and Consumer Services Agency
Department of Consumer Affairs

BOARD MEETING MINUTES

Archived recordings of the Board of Behavioral Sciences meetings held on August 13-14, 2026, are available for viewing at the links below:

August 13, 2026 Board Meeting
August 14, 2026 Board Meeting

DATE August 13, 2026

LOCATION Department of Consumer Affairs
1625 North Market Blvd. S-102
Sacramento CA 95834

TIME 8:30 a.m.

ATTENDEES

Members Present: Wendy Strack, Chair, Public Member
Lorez Bailey, Public Member
Susan Friedman, Public Member
Justin Huft, LMFT Member
Christopher Jones, LEP Member
John Sovec, LMFT Member
Rebecca Thiess, Public Member
Eleanor Uribe, LCSW Member
Dr. Annette Walker, Public Member

Members Absent: Dr. Nicholas Boyd, Vice Chair, LPCC Member

Staff Present: Steve Sodergren, Executive Officer
Marlon McManus, Assistant Executive Officer
Shelley Ganaway, Legal Counsel
Christina Kitamura, Administrative Analyst

Other Attendees: Marcie Larson, Administrative Law Judge
Phillip Arthur, Deputy Attorney General
Jennifer Knapp, Petitioner
Michelle DuChene, Legal Counsel to Jennifer Knapp
Keith Lyons, Petitioner

DRAFT

Giselle Laguna, Petitioner
Public participation via Webex and in-person

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1. Call to Order and Establishment of Quorum

Wendy Strack, Chair of the Board, called the meeting to order at 8:45 a.m. Roll was called, and a quorum was established.

The Chairperson announced that Item 9 will not be discussed.

2. Suggestions for Future Agenda Items

None

3. Public Comment for Items not on the Agenda

None

Administrative Law Judge Marcie Larson presided over the following petition hearing. Deputy Attorney General Phillip Arthur presented the facts of the cases below on behalf of the People of the State of California.

4. Jennifer Suzanne Knapp, LCSW 29753, Petition for Early Termination of Probation

The record was opened at 8:53 a.m., and Jennifer Knapp was represented by counsel, Michelle DuChene. Deputy Attorney General Phillip Arthur presented the background of this case. Ms. Knapp was sworn in and presented her request for early termination of probation and information to support the request. Ms. Knapp was examined by her counsel and cross-examined by the Deputy Attorney General and board members. Ms. DuChene presented closing remarks. The record was closed at 10:20 a.m.

5. Keith Eugene Lyons, LCSW 92724, Petition for Early Termination of Probation

The record was opened at 10:39 a.m., and Keith Lyons represented himself. Deputy Attorney General Phillip Arthur presented the background of this case. Mr. Lyons was sworn in and presented his request for early termination of probation and information to support the request. He was questioned by Mr. Arthur and board members. The record was closed at 11:43 a.m.

6. Giselle Isela Laguna, LCSW 105860, Petition for Early Termination of Probation

The record was opened at 12:57 p.m., and Giselle Laguna represented herself. Deputy Attorney General Phillip Arthur presented the background of this case. Ms. Laguna was sworn in and presented her request for early termination of probation and information to support the request. She was questioned by Mr. Arthur and board members. The record was closed at 1:40 p.m.

CLOSED SESSION: *The Board entered closed session at 1:41 p.m.*

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7. Pursuant to Section 11126(c)(3) of the Government Code, the Board will Meet in Closed Session for Discussion and to Take Action on Disciplinary Matters, Including the Above Petitions.

8. Pursuant to Section 11126(c)(1) of the Government Code, the Board will Meet in Closed Session for a Presentation by the Office of Professional Examination Services Regarding the Evaluation of the Association of Marital and Family Therapy Regulatory Boards' (AMFTRB) Marital and Family Therapy National Examination.

OPEN SESSION: *The Board reconvened in Open Session at 4:45 p.m. Item 10 was moved to Friday's agenda.*

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9. Consent Calendar: Discussion and Possible Action to Approve May 7-8, 2026, Board Meeting Minutes

This item was tabled.

10. Discussion and Possible Action to Approve the 2026-2030 Strategic Plan

This item was moved to Friday's agenda.

11. Recess Until 8:30 a.m., Friday, August 14, 2026

The Board recessed at 4:55 p.m.

DATE August 14, 2026

LOCATION Department of Consumer Affairs
1625 N. Market Blvd., #S-102
Sacramento, CA 95834

TIME 8:30 a.m.

ATTENDEES

Members Present at Primary Location:
Wendy Strack, Chair, Public Member
Lorez, Bailey, Public Member
Susan Friedman, Public Member
Justin Huft, LMFT Member
Christopher (Chris) Jones, LEP Member
John Sovec, LMFT Member
Rebecca Thiess, Public Member
Eleanor Uribe, LCSW Member
Annette Walker, Ed.D., Public Member

Members Absent: Nicholas (Nick) Boyd, Ph.D., Vice Chair, LPCC Member

Staff Present: Steve Sodergren, Executive Officer
Marlon McManus, Assistant Executive Officer
Christy Berger, Regulatory Manager
Ashley Castleberry, Enforcement Manager
Rosanne Helms, Legislative Manage
Christina Kitamura, Administration Analyst
Syreeta Risso, Special Project and Research Analyst
Kenneth Swenson, DCA Legal Counsel

Other Attendees: Shelley Jones, Assistant Deputy Director, Board and Bureau Relations
Public participation via WebEx and in-person

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12. Call to Order and Establishment of Quorum

Wendy Strack, Chair of the Board of Behavioral Sciences (Board), called the meeting to order at 8:36 a.m. Roll was called, and a quorum was established.

13. Introductions

Board members, staff, and attendees introduced themselves.

10. Discussion and Possible Action to Approve the 2026-2030 Strategic Plan

At its May 2026 meeting, the Board reviewed the 2026–2030 Strategic Plan draft and directed staff to add language ensuring protection of consumers and practitioners, with emphasis on marginalized communities. Guidance on electronic health records and subpoenas was prioritized. The updated draft includes new objectives focused on developing guidance materials and supporting legislation to protect marginalized communities. After adoption, staff will create tasks for each objective, with progress reviewed at future meetings.

Motion: Approve the Board Strategic Plan including any amendments identified.

M/S: Walker/Sovec

Vote: 9 Yea; 0 Nay; 1 Absent. Motion carries.

Member	Present
Lorez Bailey	Y
Dr. Nicholas Boyd	Absent
Susan Friedman	Y
Justin Huft	Y
Christopher Jones	Y
John Sovec	Y
Wendy Strack	Y
Rebecca Thiess	Y
Eleanor Uribe	Y
Dr. Annette Walker	Y

14. Board Chair Report

a. Board Member Attendance

The current fiscal year attendance report was provided in the meeting materials as Attachment A.

b. Future Board Meetings

Board meeting and committee meeting dates for the remainder of 2026 and for 2027 were provided.

Public Member Kelly Ranasinghe resigned from the Board after 6 years of service. Chair Strack expressed appreciation for his service.

c. Staff Recognitions

Shari Brunner and Timothy Koop celebrated 5 years of state service. Sparkle Moss celebrated 10 years of state service.

15. Budget Report

Fund Condition Summary

- The Board's budget for fiscal year (FY) 2025-26 is $14,699,000.
- Authorized reimbursements of $50,000
- Reserve balance beginning at the beginning of fiscal year was $26.2 million
- Projected collection of revenue by fiscal year end is $24.7 million
- Fund condition reflects a reserve of 26.9 months
- Projected expenditures by fiscal year end are $15.4 million.

According to the 2026–27 State Budget enacted on June 29, 2026, the Board has an authorized budget of $14,734,000 for fiscal year 2026–27, which includes $50,000 in approved reimbursements.

Revenue Summary: As of May 31, 2026, the Board has collected approximately $23.0 million in revenue and anticipates closing the fiscal year with about $24.7 million in total revenue.

Expenditure Summary: As of May 31, 2026, the Board has spent or encumbered approximately $13.3 million, representing 91.1% of its total budget. The Board projects year-end expenditures of about $14.6 million, or 99.9% of its authorized budget.

Discussion

Mr. Sovec asked whether the recent fee reduction is expected to achieve the intended compliance objective.

Mr. Sodergren responded that it is too early to determine the impact, as the fee reduction only took effect on July 1 and there is not yet sufficient data to evaluate results. He indicated that approximately one year of data will be needed before meaningful analysis can occur. At that time, staff will begin reviewing budget information and conducting a fee study to assess the effectiveness of the current fee structure. He noted that the current fee structure will remain in place for four years, after which the Board can consider implementing an adjusted fee level based on the study's findings.

Public Comment: None

16. Administration Report

The Board's staffing activity is as follows:

- 2 promotions/new employees
- 2 departures
- 4 vacancies

Breeze System Updates: Staff continue working with the Office of Information Services (OIS) on Work Authorization 165, including recent LMFT system updates released July 1, 2026, and upcoming work on LCSW updates. Development of online registration applications (AMFT, ASW, APCC) is underway, with rollout planning focused on minimizing system errors and user issues.

Fourth quarter statistics for communication (incoming calls and wait times), administrative applications, and incoming emails were provided. Call and email volume has increased primarily due to inquiries about the recent fee decrease, but staff expect activity to return to normal by the next Board meeting.

Discussion: None
Public Comment: None

17. Licensing Report

Licensing statistics were provided. BBS continues to grow, adding more than 2,000 new registrants and 5,400 new licensees, for an overall increase of 4.89%.

Registration Unit

- Received fewer applications compared to the same period last year
- The number of applications processed this past quarter decreased
- Application processing times increased slightly compared to last fiscal year
- Handled a little more than 6.5% fewer emails compared to last fiscal year.

Licensing Unit

- Experienced a decrease in the total number of applications received
- Processed 27.13% more applications this fiscal year than last
- Processing times for complete applications increased this fiscal quarter compared to last
- Received fewer emails.

During FY 25/26, the Board received 12,608 registration applications, reflecting an average annual increase of 5.14% over the past three fiscal years. Additionally, 9,108 licensing applications were received, with incoming licensing volume increasing an average of 8.6% per year over the same period.

Discussion: None
Public Comment: None

18. Examination Report

4th Quarter Statistics

- 6,742 exams were administered (8.65% increase from previous quarter)

- 9 exam development workshops were conducted.

Exam School Report was provided in the meeting materials as Attachment A.

SME Recruitment
Recruitment efforts to increase newer LCSW, LEP, and LPCC Subject Matter Experts began in late May 2026, including an email outreach to over 9,000 prospective licensees. The Board has received responses from about 3% of eligible individuals, and 87 of the 165 approved applicants have been fully contracted.

American Association of Social Work Board (ASWB): ASWB will suspend its online proctoring pilot for Social Work Licensing Exams effective July 31, 2026, following a recent cheating attempt that raised broader security concerns. Candidates already approved for online proctoring may test before July 31, but no new approvals will be issued.

Beginning August 3, 2026, ASWB will implement changes to its exam, including reducing content areas from four to three, lowering the number of questions from 170 to 122, increasing the number of three-option multiple-choice items, and emphasizing application-based questions. The exam's time limit, fees, scoring, and registration/scheduling processes will remain unchanged.

National Board for Certified Counselors (NBCC): NBCC's 2025 Annual Performance Report shows that California candidates taking the National Clinical Mental Health Counseling Examination (NCMHCE) scored 0.3 points higher than the national average.

The NCMHCE 2025 Annual Performance Report was provided as Attachment B.

Pearson Professional Assessments (Pearson): The exam candidate handbook has been updated on the Pearson site, including clarifications and a correction to LMFT clinical exam question counts. Pearson has addressed recent accommodation delays by adding staff and launching a streamlined self-service scheduling option, which reduced scheduling time by 33% and was fully implemented on June 1, 2026.

Discussion
Mr. Sovec inquired about the recruitment outreach process and asked how the more than 9,000 prospective licensees selected for recruitment efforts were identified.

Mr. Sodergren explained that the recruitment list was developed by generating a report of licensees who had been licensed for five years or less, obtaining their email addresses, and conducting a mass email outreach campaign to those individuals.

Public Comment

Dr. Ben Caldwell referenced the closed-session agenda item concerning the national MFT examination and asked whether any information from the discussion could be shared publicly. He also requested an update on the planned transition to the national MFT examination, specifically asking whether the previously communicated implementation timeline of July 2027 remains feasible and likely.

Mr. Sodergren responded that the Board's consideration of the transition to the national MFT examination is currently on hold while discussions continue. He noted that the matter was recently discussed in closed session and is expected to be the subject of further Board discussions. As a result, the previously anticipated July 2027 implementation timeline is currently paused pending a final Board decision.

19. Enforcement Report

Ashley Castleberry, Enforcement Manager, presented the Enforcement Report.

4th Quarter Statistics: Consumer Complaints

- 738 consumer complaints received
- 242 cases closed without investigation
- 474 complaints closed after investigation
- 73 days average to close a complaint
- 6 cases referred to the Office of the Attorney General (AG)
- 1 citation issued

4th Quarter Statistics: Probation

- 4 new probationers

4th Quarter Statistics: Criminal Convictions

- 220 criminal convictions cases received
- 217 cases assigned for investigation
- 186 cases closed after investigation
  - 11 application denials due to a conviction or discipline
- 16 cases referred to the AG Office

Continuing Education (CE) Audits

- 41 audits initiated for renewal cycles ending November 30, 2025
- 37 CE audits are pending
- 25 Citations and Fines issued for failed CE audits

The most common audit failures were due to a 4–6-hour shortfall from the 36-hour requirement, followed by non-responses to audit letters and 17–21-hour deficiencies.

Supervisor Audits: The Board began audits on licensees who submitted a Supervisor Self-Assessment and have been designated as a Supervisor to ensure compliance with the continuing education requirements for supervisors set forth in regulations.

Licensees who were designated as Supervisor in April 2026:

- 24 audit letters were issued in April 2026
  - 21 supervisors passed
  - 2 failed the audit
  -
  - 1 audit remains pending

Licensees who were designated as Supervisor in May 2026:

- 24 audit letters were issued in May 2026
  - 20 supervisors passed
  - 3 failed the audit
  - 1 audit remains pending

Licensees who were designated as Supervisor in June 2026:

- 27 audit letters were issued in June 2026
  - 23 supervisors passed
  - 4 failed the audit

Discussion

Ms. Strack asked whether supervisees are affected when a supervisor does not pass a supervisor audit, specifically inquiring whether the supervisee's hours would still count.

Mr. Sodergren clarified that supervisees are not penalized for deficiencies identified in a supervisor audit and that their hours remain unaffected.

Mr. Huft asked whether only 41 continuing education (CE) audits had been conducted across all registration renewals and expressed concern that nearly two-thirds of audited individuals failed to meet requirements. The member noted that the high failure rate suggested a significant compliance issue and that too many licensees may be falling through the cracks.

Mr. Sodergren explained that CE audits currently cover approximately 1% of renewals, which is consistent with practices at many boards, and noted that expanding and strengthening the audit process is included in the Board’s strategic planning efforts. Staff indicated that resource constraints and audit methodology are factors under consideration

Mr. Huft stated that increasing access to affordable or free continuing education opportunities may be a more effective solution than substantially expanding audit activity and reiterated support for the Board offering low-cost or free CE courses.

Dr. Walker noted that the number of consumer complaints has remained relatively consistent across recent fiscal years and asked for additional information about the nature of those complaints.

Ms. Castleberry indicated that they could not speak to the specific substance of the complaints but noted that increases in complaint activity may be attributable to growth in the Board's licensee population and increased consumer awareness of the complaint process following the enactment of Senate Bill 1024. She explained that a larger licensee population and greater public awareness of consumers' rights to file complaints could help explain the increase in complaint numbers.

Public Comment: None

20. Outreach and Education Report

Staff provided updates on key communication and engagement activities, including social media performance, recent and upcoming live events, Board publications, and progress on the website redesign.

Outreach Events: Over the past four years, the Board has steadily expanded its outreach events.

Event Highlights: Staff attended NASW-CA Lobby Days in Sacramento, answering questions from participants. They also participated in the two-day CAMFT Annual Conference in Southern California, where the Executive Officer delivered a BBS status update during the annual business meeting. Additionally, BBS hosted a live webinar, “Journey to BBS Licensure: Getting Started with Associate Registration,” providing an overview of associate registration requirements. This webinar is the first in a planned series on licensure components and has been recorded and posted on the BBS YouTube channel for future viewing.

Publications: Three new publications were released: Top Tips for a Smooth Associate Application Process, The Power of Guiding Growth, and the Fee Reduction FAQ. Additionally, two continuing education FAQs—for licensees and registrants—were recently revised and expanded.

Discussion
Dr. Walker expressed enthusiasm about the work of the Outreach and Education Subcommittee, noting that the group has had productive discussions and is building a strong foundation aligned with the Board’s newly approved strategic plan. She thanked staff for their support, recognized contributions from committee members, and highlighted plans to develop real-time reporting and outreach metrics to improve transparency and track progress more effectively.

Mr. Sovec noted that the report briefly referenced the website redesign but did not include details previously presented to the committee. He requested an update on the website redesign efforts and asked staff to highlight key improvements and initiatives underway.

Mr. McManus provided an update on the Board's website redesign efforts, which are focused on improving accessibility, navigation, and user experience. Key enhancements include:

- Redesigning the homepage to make information easier for consumers to find.
- Renaming navigation tabs to provide clearer and more intuitive website navigation.
- Adding prominent "quick links" for commonly accessed resources such as license renewal and continuing education information.
- Creating dedicated navigation paths for applicants, allowing users to quickly find profession-specific licensure requirements.
- Adding application processing time information to the website to improve transparency and reduce inquiries.
- Highlighting existing and future educational videos and resources.
- Improving navigation within key sections, such as enforcement, to make information about complaints, publications, criminal convictions, and related processes easier to locate.
- Organizing frequently requested information in a more accessible format to help users find answers without navigating multiple pages.

Mr. McManus reported that the project is currently in its second phase, with work focused on homepage improvements and broader navigation enhancements.

Public Comment: None

21. Department of Consumer Affairs (DCA) Report Which May Include Updates on DCA's Administrative Services, Human Resources, Enforcement, Information Technology, Communications and Outreach, and Legislative, Regulatory, or Policy Matters

Shelley Jones, Assistant Deputy Director, Board and Bureau Relations presented the DCA Update:

- Announced that on May 12th Rohit Chopra was appointed by Governor Newsom as Secretary of the California Business and Consumer Services Agency, which officially launched July 1.
- Reported that DCA transitioned to four days per week in-office effective July 1, with department-wide guidance issued regarding telework agreements.
- Recognized boards' leadership and partnership in supporting staff through the transition.

- Reminded members that the next Board Member Orientation Training (BMOT) will be held virtually on October 21 and must be completed within one year of appointment or reappointment.
- Noted that DCA's Defensive Driver Training is available through the LMS and is mandatory for board members and employees who drive on official state business. Members with LMS questions should contact Member Relations.

Discussion: None
Public Comment: None

22. Discussion and Possible Action to Approve the Information Bulletins on Protecting Client Confidentiality and Working with Marginalized or Vulnerable Communities

In response to concerns raised by Board members at the February 2026 meeting regarding support for licensees serving marginalized and vulnerable communities, staff developed informational bulletins on client confidentiality and best practices for working respectfully and effectively with these populations. The Outreach and Education Committee reviewed the drafts in April 2026, requested revisions, and directed staff to present the finalized materials to the Board for approval. If approved, the bulletins will be posted on the Board's website and shared through social media and the Board newsletter.

Discussion
Mr. Sovec commended staff for their work in developing the bulletins, noting that the effort transformed what initially seemed legally impossible into a well-crafted and meaningful resource. He thanked staff for their persistence and leadership, describing the materials as an important first step toward providing valuable information and support to communities and licensees serving marginalized and vulnerable populations.

Mr. Swanson, DCA legal counsel, asked for confirmation that the two draft bulletins had been reviewed, vetted, and approved by the Legal Affairs Division for legal compliance, and requested that this confirmation be placed on the record.

Mr. Sodergren confirmed that the drafts have been approved by the Legal Affairs Division.

Mr. Huft echoed Mr. Sovec's appreciation for staff's work in developing the bulletins despite initial concerns about the Board's authority to do so. While supporting the materials, he suggested adding more practical, action-oriented guidance for therapists, such as intervention planning, working with clients who are hesitant to engage with emergency services, and safety planning for at-risk

individuals. He noted that the current draft is largely values-based and recommended including concrete strategies that licensees can apply in practice.

Mr. Sodergren explained that staff is seeking approval of the current bulletins so they can be published and shared, while noting that the Board could later refer the additional topics raised by Mr. Huft to the Outreach and Education Committee for further development of more detailed and practical guidance.

Public Comment
Shanti Ezrine, California Association of Marriage and Family Therapists (CAMFT), expressed appreciation for the Board's and staff's work on the two bulletins, emphasizing the importance of the topics addressed. He thanked staff for including the CAMFT Code of Ethics as a resource, offered CAMFT's assistance in developing additional practical guidance, and stated that CAMFT would be pleased to help share the bulletins once they are published on the Board's website.

Motion: Approve the text of the draft bulletins (attachments A and B at pages 22-3 to 22-8) of the memorandum, and direct staff to finalize and publish the bulletins on the board's internet website or otherwise publish them.

M/S: Walker/Huft

Public Comment: None

Vote: 7 Yea; 0 Nay; 2 Absent, 1 Abstention. Motion carries.

Member	Present
Lorez Bailey	Y
Dr. Nicholas Boyd	Absent
Susan Friedman	Absent
Justin Huft	Y
Christopher Jones	Y
John Sovec	Y
Wendy Strack	Y
Rebecca Thiess	Y
Eleanor Uribe	Abstain
Dr. Annette Walker	Y

23. Discussion and Possible Action to Reconsider Previously Approved Language and to Consider Initiation of a Rulemaking to Amend the Board's Experience Requirements for Licensed Educational Psychologists (Title 16, California Code of Regulations Section 1856)

This item was removed from the agenda.

24. Discussion and Possible Action to Approve Legislative Amendments Related to Stipend and Loan Repayment Allowances and Submission of 1099 Tax Forms (Amend Business and Professions Code (BPC) §§4980.43.3, 4996.23.2, and 4999.46.3)

Staff provided an overview of supervision requirements, explaining that trainees, associates, and licensure applicants must obtain qualifying experience as employees or volunteers rather than independent contractors. Staff noted ongoing confusion regarding the limited statutory allowance for certain stipends or loan repayment programs, which some applicants have mistakenly interpreted as permitting 1099 compensation. Following discussion by the Policy and Advocacy Committee in April 2026, staff developed proposed amendments to clarify that qualifying stipends and loan repayments must be provided through governmental or nonprofit programs and may not constitute compensation for services. Draft amendments were presented for LMFTs and parallel amendments were prepared for LCSW and LPCC statutes for the Board's consideration as a legislative proposal.

Discussion: None

Motion: Approve the text or the draft amendments to the specified sections of the Business and Professions Code set forth in Attachments A-1 through A-3 of the memorandum for this agenda item and direct staff to make any necessary non-substantive changes and to pursue the amendments as a legislative proposal.

M/S: Sovec/Bailey

Public Comment
Mr. Ezrine, CAMFT, thanked staff, particularly Ms. Risso, for their work on the proposed amendments clarifying the stipend and loan repayment provisions. He noted that CAMFT's previous feedback had been incorporated into the amendments and stated that CAMFT had no additional concerns at this time.

Vote: 9 Yea; 0 Nay; 1 Absent. Motion carries.

Member	Present
Lorez Bailey	Y
Dr. Nicholas Boyd	Absent
Susan Friedman	Y
Justin Huft	Y
Christopher Jones	Y
John Sovec	Y
Wendy Strack	Y
Rebecca Thiess	Y
Eleanor Uribe	Y
Dr. Annette Walker	Y

25. Discussion and Possible Action to Approve Legislative Amendments to Address Applicants Whose Schools are in Accreditation Candidacy, and to Make Legislative Amendments to Remove Statutory References to Schools Approved by the Bureau for Private Postsecondary Education (Amend Business and Professions Code (BPC) §§4980.03, 4980.36, 4980.37, 4980.38, 4980.41, 4980.54, 4980.72, 4980.78, 4990.26.2, 4996.17.1, 4996.17.2, 4996.18, 4996.22, 4999.12, 4999.27, 4999.32, 4999.33, 4999.40, 4999.60, 4999.62, 4999.76, and Health and Safety Code (HSC) §124260; Add BPC §§ 4980.36.5, 4999.33.5)

Staff reviewed statutory requirements for LMFT, LPCC, and LCSW degree programs, noting differences in how accreditation candidacy is handled. LCSW law already allows graduates from schools still in accreditation candidacy to register as associates but prohibits taking the clinical exam until full accreditation is achieved. Staff proposed adding similar provisions to LMFT and LPCC law, along with clarifying what constitutes failure to obtain accreditation, limiting associate registration renewals when accreditation is not achieved, and requiring schools to notify prospective students of these impacts.

Staff also discussed outdated statutory references to the Bureau for Private Postsecondary Education (BPPE) school approval. Since 2015, BPPE approval for degree-granting institutions now requires accreditation or provisional approval leading to accreditation. To avoid confusion — particularly for schools that fail accreditation — staff proposed removing BPPE approval as a qualifying option in statute and adding a grandfather clause to allow acceptance of degrees awarded on or before January 1, 2015, when unconditional BPPE approval still applied.

At its June 16, 2026 meeting, the Policy and Advocacy Committee reviewed the proposed amendments and requested strengthening the required student notification for schools in accreditation candidacy. The Committee directed staff to revise the language so that the notice is provided as a separate document in at least 12-point font.

Discussion: None

Motion: Approve the text of the draft amendments to Business and Professions Code sections 4980.03, 4980.36, 4980.37, 4980.38, 4980.41, 4980.54, 4980.72, 4980.78, 4990.26.2, 4996.17.1, 4996.17.2, 4996.18, 4996.22, 4999.12, 4999.27, 4999.32, 4999.33, 4999.40, 4999.60, 4999.62, 4999.76, and Health and Safety Code section 124260, and add Business and Professions Code sections 4980.36.5, 4999.33.5 as reflected in the attachments to the memorandum for this agenda item, to direct staff to make any non-substantive changes to those draft amendments and to pursue the amendments as a legislative proposal.

M/S: Walker/Uribe

Public Comments
Mr. Ezrine, CAMFT, expressed support for the proposed amendments, noting that they appropriately align the LMFT Practice Act with current law under SB 1247. He commended staff for ensuring the amendments provide necessary clarifications without adversely affecting past or current applicants and appreciated the inclusion of proper public notice. CAMFT stated it has no concerns with the proposed amendments at this time.

Dr. Caldwell expressed general support for the proposed amendments, stating that the changes are largely positive and appropriate and appreciating the Board's efforts to ensure that no applicants are adversely affected. He raised a concern regarding the provision linking clinical examination eligibility to a university's full accreditation status, noting that it may conflict with the Board's planned changes allowing associates to sit for the clinical examination earlier beginning in 2028. He suggested revising the proposal to allow otherwise qualified associates to take the clinical examination upon completing the required clinical hours, while withholding licensure until the university has achieved full accreditation.

Helms acknowledged the concern regarding examination eligibility and accreditation requirements but noted that the Board has not yet developed the language for its proposed early examination eligibility changes. She stated that the current proposal should move forward as drafted because similar accreditation language already exists in law for LCSW applicants. She suggested that any necessary revisions related to early examination eligibility could be addressed as part of the future proposal if it moves forward for approval.

Vote: 9 Yea; 0 Nay; 1 Absent. Motion carries.

Member	Present
Lorez Bailey	Y
Dr. Nicholas Boyd	Absent
Susan Friedman	Y
Justin Huft	Y
Christopher Jones	Y
John Sovec	Y
Wendy Strack	Y
Rebecca Thiess	Y
Eleanor Uribe	Y
Dr. Annette Walker	Y

26. Discussion and Possible Action to Take a Position AB 1540 (Gonzalez) 988 Suicide & Crisis Lifeline: LGBTQ+ Youth

AB 1540, which seeks to reinstate LGBTQ+ youth crisis support option formerly available through the 988 Suicide & Crisis Lifeline. The bill requires the California

Health and Human Services Agency to annually determine whether an adequate federal LGBTQ+ crisis hotline exists. If not, the Office of Emergency Services must request federal approval for a “press 3” routing option and a “PRIDE” text/chat feature, and ensure these technologies are implemented within required timelines. The Health and Human Services Agency must then contract with qualified LGBTQ+-focused crisis service providers meeting specified standards, including confidentiality compliance and demonstrated expertise serving LGBTQ+ communities. The bill is an urgency measure and becomes effective upon the Governor’s signature.

The bill’s intent language explains that since 2022, the national 988 hotline partnered with nonprofit organizations to provide specialized suicide-prevention services for LGBTQ+ youth, allowing callers to press “3” to reach these providers. About 1.5 million contacts were routed through this subnetwork. Funding for the “press 3” option was ended in July 2025 by the Trump administration, discontinuing the service. The author seeks to reinstate this program in California.

Discussion

Mr. Jones stated that the proposal is very important for re-establishing support for the LGBTQ community and expressed full support for the bill.

Ms. Thiess asked whether other states are taking similar actions and inquired about efforts underway in other jurisdictions.

Ms. Helms responded that she was not aware of any similar legislation or actions being pursued by other states. She noted that the issue has appropriately drawn the attention of the California Legislature and expressed hope that other states may follow California's lead if the bill is enacted.

Ms. Uribe asked whether referrals could be made to an existing national hotline rather than establishing or utilizing a separate resource.

In response, Ms. Helms explained that eligibility would depend on whether the hotline met the specific requirements established in the bill. She noted that qualifying centers must meet designated criteria, including specialized mission requirements, trained staff, qualification as a 988 center, and compliance with the Confidentiality of Medical Information Act. She added that centers meeting those requirements could be considered, but the determination would ultimately be made by the state agencies identified in the bill.

Motion: Support AB 1540.

M/S: Huft/Sovec

Public Comment
Shanti Ezrine (CAMFT): CAMFT supports AB 1540.

Vote: 8 Yea; 0 Nay; 1 Absent, 1 Abstention. Motion carries.

Member	Present
Lorez Bailey	Y
Dr. Nicholas Boyd	Absent
Susan Friedman	Y
Justin Huft	Y
Christopher Jones	Y
John Sovec	Y
Wendy Strack	Y
Rebecca Thiess	Y
Eleanor Uribe	Abstain
Dr. Annette Walker	Y

27. Discussion and Possible Action to Take a Position on AB 1979 (Bonta) Health Care Services: Artificial Intelligence

AB 1979 establishes rules for health care chatbots and the use of AI in clinical settings. The bill defines “health care chatbots” and “health care chatbot information,” and specifies that businesses offering chatbots to manage health information or support diagnosis or treatment are considered health care providers under the Confidentiality of Medical Information Act. The bill requires health facilities to ensure licensed professionals retain independent clinical judgment when using clinical decision support systems. It prohibits AI tools from directing unlicensed individuals to perform tasks requiring a license or from independently performing licensed clinical functions, except for supervised trainees. The bill clarifies that automated systems used for non-clinical communication or documentation are permitted. Penalties are outlined for violations, and licensing boards may pursue injunctions for unlicensed practice.

Staff presented the Senate Health Committee’s analysis of the bill’s support and opposition. Supporters emphasize that AI is increasingly embedded in health care and, without safeguards, may introduce bias, jeopardize patient safety, and create challenges for clinicians in determining when to rely on AI tools. They cite research showing that biased AI models can significantly reduce diagnostic accuracy and stress that technology should assist—but not replace—human clinical judgment. Supporters also raise concerns about consumer-facing AI tools accessing medical records without sufficient legal protections.

Opponents argue the bill is overly rigid and may restrict the use of established, evolving AI tools already integrated into clinical operations. They also contend the bill does not adequately differentiate between AI systems that merely inform clinical decisions and those that replace clinical judgment.

Staff compared the bill with SB 903, noting that while this bill regulates the use of AI across all health care professions, SB 903 focuses specifically on psychotherapy. Earlier versions of the bill raised concerns about overlap and incompatibility with SB 903, especially regarding limits on AI use and undefined references to “professional judgment.” Recent amendments address these issues by allowing AI use while requiring employers to ensure licensees maintain independent professional judgment when relying on AI outputs. Staff advised the Board to discuss whether any remaining compatibility concerns with SB 903 persist.

The Board previously took a support position on the bill at its May 2026 meeting. Since then, several notable amendments have been made, including removal of language prohibiting clinical decisions from being based solely on AI outputs, revising requirements so employers must ensure licensees retain independent professional judgment when using AI-informed care, clarifying that trainees may use AI tools as part of supervised training, and making minor technical updates to definitions related to health care chatbots.

Discussion

Ms. Friedman questioned how artificial intelligence can be effectively regulated, expressing concern that many individuals already use AI as a substitute for therapy without professional oversight. She stated that she did not understand how the proposed legislation would meaningfully regulate AI use and suggested that compliance appeared largely dependent on individuals choosing to act responsibly and professionally.

Ms. Helms acknowledged that AI regulation is a complex and evolving issue that policymakers and regulators are actively addressing. She explained that legislative efforts are being pursued through multiple approaches, including regulating licensees' use of AI, establishing employer requirements, and directly regulating AI companies and platforms. She noted that similar efforts extend beyond healthcare and cited examples involving AI technologies in other contexts. Helms stated that regulatory approaches will likely continue to evolve as AI technology develops.

Ms. Thiess asked whether staff could provide insight into why various chambers of commerce and business associations were opposing the bill.

Ms. Helms responded that she was not familiar with the specific reasons cited by those organizations. She noted that opposition discussed during the legislative process, particularly from some healthcare groups, has generally focused on concerns that the bill may be overly broad and could limit the use of AI technologies that are already being utilized in healthcare settings for functions such as planning, recordkeeping, and other operational tasks. She explained that opponents have expressed concern that the bill could reduce opportunities to realize the benefits of the technology, and she characterized the issue as a

balancing of regulatory concerns and technological advantages. She added that she could not specifically speak to the positions of the business organizations mentioned.

Ms. Bailey asked whether the opposition positions identified as "unless amended" reflected concerns with earlier versions of the bill and whether those organizations' positions may have changed in response to subsequent amendments.

Helms explained that organizations are expected to update their position letters as legislation is amended, although those letters are not typically available to staff because the Legislature is not required to post them publicly. She noted that bill analyses may occasionally reference opposition arguments, which have generally focused on concerns raised by healthcare entities. She added that, absent updated positions, several large healthcare providers would remain listed as opposed to the bill.

Mr. Huft commented on the opposition to the bill, stating that concerns about AI use have been raised in labor disputes involving healthcare providers, including the Kaiser Permanente strike. He asserted that therapists, nurses, social workers, and labor organizations have expressed concerns that AI is being used to replace healthcare professionals.

Mr. Sovec asked whether staff had any information regarding the removal of language that would have prohibited health facilities and offices from basing clinical decisions solely on output from a clinical decision support system. He expressed concern that the deletion of this provision weakened what he viewed as a key component of the bill. He indicated that, as a result, he might be inclined to support the bill only if amended.

Ms. Helms believed the change was likely the result of discussions with businesses and other stakeholders aimed at addressing concerns and reaching compromise. She noted that the bill still requires professional judgment and discretion, although the language is less restrictive than earlier versions. She further explained that the legislative process was nearing completion and that opportunities for substantive amendments were limited. She added that AI-related legislation is likely to continue evolving in future years and characterized the current bill as an initial step in establishing a regulatory framework, with additional refinement likely to occur through future legislative efforts.

Motion: Continue to support AB 1979 as amended most recently by the amendment in the Senate on July 2, 2026.

M/S: Strack/Walker

Additional Board Member Comment/Discussion: None

Public Comment: None

Vote: 8 Yea; 1 Nay; 1 Absent. Motion carries.

Member	Present
Lorez Bailey	Y
Dr. Nicholas Boyd	Absent
Susan Friedman	Y
Justin Huft	Y
Christopher Jones	Y
John Sovec	N
Wendy Strack	Y
Rebecca Thiess	Y
Eleanor Uribe	Y
Dr. Annette Walker	Y

28. Discussion and Possible Action to Take a Position on SB 903 (Padilla) Mental Health Professionals: Artificial Intelligence

Staff summarized SB 903, which establishes the Wellness and Oversight for Psychological Resources Act to ensure psychotherapy is provided only by licensed professionals, not AI systems. The bill allows AI only for administrative or supplementary support and requires client consent for any AI recording or transcription of psychotherapeutic communications. It prohibits AI from making therapeutic decisions, interacting with clients clinically, generating diagnoses or treatment plans, detecting emotions, or performing triage without licensed professional review. Licensees and employers are responsible for ensuring compliant AI use. The bill includes confidentiality requirements, enforcement provisions, and exemptions for religious counseling, peer support, training simulations, and non-clinical self-help resources. Definitions for key terms, including administrative support, supplementary support, psychotherapeutic communication, psychotherapy services, and AI, are provided.

Staff reviewed the author's intent behind SB 903, which aims to protect consumers from unregulated AI systems used in therapy. The author states that while AI can assist with administrative or supplementary tasks, it cannot replace the clinical judgment, ethical responsibilities, or human connection provided by licensed therapists. Given the risks of misuse in high-risk mental health settings, the bill seeks to ensure AI is not deployed in ways that could harm patients or prioritize commercial interests over consumer wellbeing.

Staff reported recent complaints involving AI use in therapy, including cases where therapists used AI to draft notes without client consent, accidentally entered client identifying information into AI systems, or relied on AI to guide interactions during sessions.

Regarding fiscal impact, staff estimated that increased reliance on AI could raise licensee-related complaints by about 5% (approximately 150 additional cases per year). To manage this workload, the Board anticipates needing one permanent half-time Analyst II. Staff also noted uncertainty about enforcement jurisdiction when employers misuse AI or when AI tools provide psychotherapy without clearly falling under a specific licensing board. Because of these jurisdictional ambiguities, the Board expects additional workload but cannot reliably estimate the full enforcement impact.

The Board reviewed its prior “support if amended” position from May 8, 2026. Several requested amendments have since been addressed, including adding missing license types, clarifying data-analysis review requirements, and improving clarity around permitted versus prohibited AI use and consent requirements. However, concerns remain regarding jurisdiction ambiguity, the allowance of verbal (rather than written) consent, the definition of religious counseling, and whether skill-building applications should be explicitly permitted.

Discussion

Ms. Friedman asked whether the Governor's Office had indicated its position on the various AI-related bills under consideration, noting the Board's potentially limited influence on the legislative outcome.

Ms. Helms responded that the Governor's Office generally does not comment on legislation before it reaches the Governor's desk. She noted that the bill author's office has been receptive to Board feedback and has addressed some of the Board's concerns, although not all recommendations were adopted. She explained that many stakeholders are involved in the discussion and emphasized that the Board's input carries weight in the legislative process. She further stated that, because the bill had nearly completed the legislative process, any additional Board communication would primarily be directed to the Governor to inform his decision on whether to sign or veto the measure.

Sovec expressed continued concern regarding the bill's consent provisions, particularly the allowance of verbal consent. He noted that individuals may engage with AI tools during moments of crisis or distress and suggested that requiring a formal acknowledgment or signed consent could create a meaningful pause and promote a more deliberate consent process. He stated that he remains concerned that verbal consent alone may not provide sufficient safeguards for consumers.

Mr. Huft raised concerns about the bill's consent provisions, noting that it does not appear to require practitioners to continue providing services without AI tools if a client declines consent. He questioned how therapists would respond if a client refused the use of AI and whether referral to another provider would be appropriate. He stated that he could not imagine it would be ethical to refer a

client elsewhere solely because the client declined the use of AI and suggested that this may be an oversight in the bill.

Ms. Helms responded that such situations would likely be governed by applicable professional and ethical standards. She noted that the bill's consent requirements are limited to the recording or transcription of client information. She further observed that the impact on a provider's ability to continue treatment could depend on how integrated AI tools are within that provider's practice, including administrative functions such as scheduling.

Public Comment

Mr. Ezrine stated that CAMFT had received staff's questions and had followed up with the bill author's office regarding several outstanding concerns, including jurisdictional ambiguity, verbal versus written consent, the definition of religious counseling, and skill-building provisions. He added that he would also raise the concern regarding how the bill addresses situations in which clients do not want their therapist to use AI. He confirmed that these questions have been shared with the other sponsors and the author's office and that responses will be provided to staff when available.

Cathy Atkins, CAMFT, noted that the bills that came off of suspense the previous evening and CAMFT had not yet had an opportunity to review those amendments. As a result, she stated that the specific changes to many of the bills were not yet known.

Ms. Helms summarized the discussed deletions and additions to the letter.

Deletions:

a) Use of Evidence Code §1010 to Define “Licensed Professional.”
c) Definition of “Use of Artificial Intelligence”

Addition:

d) Consent Only Required for Recording or Transcribing: Add Member Huft’s comment in place of the removal, stating that the bill is not clear about how mental health providers are supposed to respond to non-consent, and that the Board’s support position is contingent on Member Huft’s concern.

All other points listed in the board meeting materials on page 28-8 of the meeting materials packet will remain.

Motion: Support if amended on SB 903 to keep items b, e, f listed in the materials of the packet will remain in the letter, the 2 non-essential amendments regarding religious and skill building will remain in the letter, and request amendments to address how mental health providers are expected to respond to non-consent to AI.

M/S: Thiess/Huft

Public Comment: None

Vote: 8 Yea; 1 Nay; 1 Absent. Motion carries.

Member	Present
Lorez Bailey	Y
Dr. Nicholas Boyd	Absent
Susan Friedman	Y
Justin Huft	Y
Christopher Jones	Y
John Sovec	Y
Wendy Strack	Y
Rebecca Thiess	Y
Eleanor Uribe	Y
Dr. Annette Walker	N

29. Discussion and Possible Action to Take a Position on SB 934 (Wiener) Sexual Orientation or Gender Identity Change Efforts

Ms. Helms reported that SB 934 was significantly amended overnight, and the version included in the meeting packet is not the amended version. SB 934 is substantially different from the version previously considered by the Board.

The Board had previously supported the bill when it included provisions establishing civil remedies for individuals harmed by sexual orientation or gender identity change efforts. Those civil remedy provisions have since been removed, and staff had not yet received an explanation for that change.

The bill now focuses on updating the definition of sexual orientation and gender identity change efforts as they relate to the prohibition on mental health providers engaging in such practices with minors. The amendments expand the definition to expressly include gender identity change efforts and clarify that prohibited practices are those that seek to direct a patient toward a predetermined sexual orientation or gender identity outcome.

The bill provides additional examples of practices that constitute change efforts and clarifies activities that are excluded from the definition, including nondirective psychotherapy, age-appropriate interventions addressing unlawful or unsafe conduct, and counseling or support services consistent with standards of care that respect a patient's self-identified gender identity. Ms. Helms noted that these changes are intended to provide greater clarity and specificity than existing law.

Finally, Ms. Helms reported that the bill was amended to add clinical social work interns to the definition of mental health provider, a change previously requested by Board staff.

Discussion

Huft asked whether staff had any sense of how the bill's provisions might withstand legal challenges in light of the Supreme Court's decision in *Chiles v. Salazar*, particularly regarding issues related to therapist speech and free speech protections.

Ms. Helms responded that it is difficult to predict how the bill would fare under future legal scrutiny. She noted that the bill author's office has been working with legal counsel to strengthen the measure but stated that there is currently no clear answer regarding how courts may ultimately view the issue.

Motion: Support SB 934 as recently amended in assembly on August 13, 2026.

M/S: Sovec/Huft

Board Comment

Uribe stated that she was not comfortable making a motion on the proposal given that the amendments had only recently been received and had not yet been fully reviewed.

Public Comment

Dr. Caldwell stated that he was among those involved in drafting the definitions contained in SB 1172 in 2012. He noted that the drafters anticipated legal challenges and worked to ensure the language was as clear and precise as possible. He explained that, after more than a decade of litigation and varying court rulings, there is now a better understanding of how the language can be structured to achieve its intended regulatory purpose while improving its ability to withstand legal challenges. Although he could not comment on the recent removal of the civil remedies provisions, he stated that the bill reflects lessons learned from those legal developments. He expressed continued support for the bill and its efforts to address the harms associated with conversion and reparative therapy and encouraged the Board to maintain its support position.

Ms. Atkins stated that, due to the significant amendments recently made to the bill, CAMFT had not yet had an opportunity to fully review the new version or determine its position. She noted that mental health organizations are actively monitoring and evaluating both legislative developments and relevant court decisions that may affect future implementation and policy considerations.

Dr. Leah Brew questioned the impact of removing the bill's civil remedies provisions, stating her understanding that their removal would eliminate the ability for individuals to seek financial damages, restitution, or other legal remedies. She expressed concern that, without civil remedies, the bill may lack meaningful enforcement mechanisms.

Ms. Helms explained that the bill's civil remedies provisions were originally added in response to the Supreme Court ruling. and were intended to strengthen legal protections by extending the statute of limitations to take civil action. She clarified that the recent amendments do not remove any existing legal rights or protections. She further explained that the remaining amendments to Business and Professions Code Section 865 are primarily intended to modernize and update the statutory definition of sexual orientation change efforts, including incorporating references to gender identity change efforts. While she did not know why the civil remedies provisions were removed, she emphasized that the amendments do not eliminate any protections currently contained in law but instead leave in place the updated definitional changes.

Vote: 5 Yea; 0 Nay; 1 Absent. 3 Abstentions. Motion carries.

Member	Present
Lorez Bailey	Y
Dr. Nicholas Boyd	Absent
Susan Friedman	Y
Justin Huft	Y
Christopher Jones	Y
John Sovec	Y
Wendy Strack	Y
Rebecca Thiess	Abstain
Eleanor Uribe	Abstain
Dr. Annette Walker	Abstain

30. Update on Status of Board-Sponsored and Board-Monitored Legislation

Ms. Helms presented a brief overview of bills with recent legislative status updates:

- AB 1558 (Arambula) Uniform Emergency Volunteer Health Practitioners Act (Dead) passed the Senate Appropriations Committee and will move on to the Senate floor.

- AB 1979 (Bonta) Health Care Services: Artificial Intelligence passed the Senate Appropriations Committee.

- AB 2352 (Valencia) Medi-Cal Providers: Nonprofit Public Benefit Corporations passed the Senate Appropriations Committee.

- SB 903 (Padilla) Mental Health Professionals: Artificial Intelligence passed the Senate Appropriations Committee.

- SB 934 (Wiener) Sexual Orientation or Gender Identity Change Efforts passed the Senate Appropriations Committee.

- SB1445 (Senate Committee on Business, Professions, and Economic Development) Healing Arts is on its third reading in the Assembly.

Discussion: None
Public Comment: None

31. Update on Status of Board Rulemaking Proposals

Christy Berger gave a brief update on rulemaking proposals:

- Continuing Education: Submitted for DCA Final Review Process *(Pending Acting DCA Director Signature Since June 29, 2026)*

- English as a Second Language: Additional Examination Time: Submitted for DCA Production Phase Review August 14, 2025 *(Pending Acting DCA Director Signature Since April 29, 2026)*

- AMFTRB National LMFT Examination: On hold until the Board reviews additional information

- Licensed Educational Psychologist (LEP) Experience: Following consultation with legal counsel, additional revisions to the proposed language have been identified and will be presented to the Board for consideration at its November meeting.

Discussion: None
Public Comment: None

32. Suggestions for Future Agenda Items

Mr. Sodergren acknowledged a written submission received by email for future agenda items. The written submission was included in the Board meeting materials.

33. Public Comment for Items not on the Agenda

Mr. Ezrine, CAMFT, requested that discussion of the AMFTRB national examination be placed on the Board's November open session agenda. He noted that, while no licensing examination is perfect, the exam is widely used by other states licensing MFTs and serves as an established measure of competency. He emphasized CAMFT's commitment to consumer protection and collaboration with the Board, encouraged greater public discussion of any concerns contributing to implementation delays, and stated that CAMFT is actively working with AMFTRB to improve transparency and accessibility. He urged the Board to continue moving the process forward while pursuing ongoing improvements to the examination.

Elyse Springer, California Chapter of Postpartum Support International, thanked the Board for developing and publishing its informational bulletin on perinatal mental health, describing it as an important acknowledgement of the prevalence and significance of these conditions. She stated, however, that the bulletin alone is insufficient to ensure licensee competency in addressing perinatal mental health disorders. She urged the Board to continue prioritizing perinatal mental health in workforce discussions and to consider incorporating meaningful pre-licensure and continuing education requirements, emphasizing that perinatal mental health should be recognized as a foundational competency rather than an optional specialty area.

Robin Andersen stated that, based on her experience serving as a subject matter expert for both the California MFT examination and the AMFTRB national examination, she has strong confidence in the quality, rigor, and integrity of the national exam. She noted that the exam effectively assesses clinical reasoning and decision-making skills necessary for competent practice and expressed support for California's adoption of the national examination, citing benefits such as maintaining consumer protection, improving licensure portability, and aligning California with other jurisdictions that already use the exam.

Vic Campbell, President of CAMFT and LMFT supervisor, expressed support for adoption of the AMFTRB national examination. Campbell stated that California's continued use of a state-specific licensing examination creates unnecessary barriers to licensure portability and professional mobility and urged the Board to place the national examination on a future agenda and move forward with implementation efforts.

Roger Smith, American Association of Marriage and Family Therapy (AAMFT), expressed AAMFT's support for California's adoption of the AMFTRB national examination, noting that its use by most states supports licensure portability. Smith stated that the absence of the national examination creates barriers for California licensees seeking licensure in other states and encouraged continued Board discussion and consideration of regulations to implement the exam.

Cathy Atkins, CAMFT, expressed support for California's adoption of the AMFTRB national examination, stating that delays in implementation may hinder licensure portability and workforce recruitment. Atkins encouraged the Board to share any outstanding concerns with stakeholders and affirmed CAMFT's commitment to collaborating with the Board to support consumer protection and a strong behavioral health workforce.

34. Adjournment

The Board adjourned at 12:12 p.m.