

# State of Oregon Mental Health Regulatory Agency

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## Diversity, Equity, & Inclusion Initial Plan

July 1, 2023 to – June 30, 2025

Mental Health Regulatory Agency  
DEI Initial Plan

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## **Agency Information**

The Mental Health Regulatory Agency (MHRA) was established in 2018 to protect the public from harm by providing administrative and regulatory oversight to two regulated boards that set the standards for and oversee mental and behavioral health professions in the State. MHRA provides various functions including budgeting, recordkeeping, staffing, contracting, procedure and policymaking, and performance and standard setting functions for the Boards.

MHRA is committed to the principles of affirmative action and equal opportunity, and to creating and sustaining an agency that is:

- Free from harassment and discrimination;
- Empowered by valuing employees and their talents; and
- Intentionally recruiting, developing, and retaining a diverse workforce.

The Oregon Board of Psychology regulates psychologists and psychologist associates, and the Oregon Board of Licensed Professional Counselors and Therapists regulates licensed professional counselors and licensed marriage and family therapists. The Boards maintain their own separate authority for complaint investigations, regulatory enforcement, establishment and collection of fees, licensing criteria (including education, training, and examination), and practice standards including the adoption of a code of ethics. The Boards meet regularly in alternative months, each maintaining various committees as well. Decisions are made in open public meetings where guests are encouraged to attend. The Boards are funded solely from licensing-related fees and other miscellaneous revenues such as publication sales and civil penalties.

### Oregon Board of Psychology

The mission of the Oregon Board of Psychology (OBOP) is to promote, preserve, and protect the public health and welfare by ensuring the ethical and legal practice of psychology. OBOP was created for the purpose of determining the qualifications of applicants to practice psychology in Oregon, and issuing and renewing licenses. The Board investigates complaints of professional misconduct made against licensees, and is also charged with safeguarding the people of the State of Oregon from the dangers of unqualified and improper practice of psychology. At the conclusion of 2022, OBOP had 2,587 psychologists, permitted practitioners, and residents pursuing licensure. The volume of regulated professionals has been growing at an average rate of 3.4% per year over the last decade.

OBOP consists of nine members. Six members are licensed psychologists and three members are from the general public, not associated with the profession. All members are appointed by the Governor to three-year terms and confirmed by the Senate.

### Oregon Board of Licensed Professional Counselors and Therapists

The mission of the Oregon Board of Licensed Professional Counselors and Therapists (OBLPCT) is to protect the public by identifying and regulating the practice of qualified mental health counselors and marriage and family therapists. OBLPCT was created for the purpose of licensing and regulating licensed professional counselors (LPCs) and licensed marriage and

family therapists (LMFTs). The Board is also charged with safeguarding the people of the State of Oregon from the dangers of unqualified and improper practice of professional counseling and marriage and family therapy.

The Board consists of eight members: three professional counselors, two marriage and family therapists, a member of faculty of a school that trains counselors or therapists, and two public members. All members are appointed by the Governor to three-year terms and confirmed by the Senate. At the conclusion of 2022, OBLPCT had 8,149 LPCs, LMFTs, and registered associates pursuing licensure. The volume of regulated professionals has been growing at an average rate of 9.3% per year over the last decade.

### Agency Organization

MHRA is under the supervision and control of one Executive Director who is responsible for the performance of the duties, functions and powers, and organization of the Agency. MHRA's organizational chart may be found in the [Appendix A](#). This displays the agency structure in the 2023-25 Governor's Budget, which is expected to be approved as part of the Legislatively Adopted Budget for 2023-25.

The Agency outsources human resources services to the Department of Administrative Services, Chief Human Resources Office (CHRO) via a service level agreement. The CHRO service package includes leave management, records management, recruitment, position management, HR advice and interpretation, worker compensation and safety support, employee investigations/audits, HR management and limited "soft-skills" training, consultation, affirmative action and inclusion, and Workday Oregon agency system administration.

### **DEI Introduction**

The Mental Health Regulatory Agency's (MHRA) Diversity, Equity, and Inclusion (DEI) plan serves as an overarching DEI strategy tool. It unifies MHRA's commitment to racial equity, diversity, and inclusion with the Boards' missions to protect Oregon consumers of mental and behavioral health services. By doing this work, MHRA aspires to make DEI organizational values that are reflected in all its policies, programs, services, and day-to-day-interactions.

### Statewide DEI Action Plan

In 2021, the Governor's Office of Diversity, Equity, and Inclusion (DEI) along with the Office of Cultural Change developed and released a [State of Oregon DEI Action Plan](#). This plan is designed to guide the still early efforts of the state enterprise to dismantle structural racism in state government and establish a shared understanding. It is intended to complement individual agencies' existing equity initiatives and provide guidance to agencies just embarking on the journey, threading the collective equity initiatives across the state. Over time, MHRA is committed to continually moving from unconnected programs and goals to personal commitments and formal policies and practices that dismantle racism.

### Governor's Expectations

Oregon Governor Tina Kotek released a letter of expectations to state agencies on January 11, 2023 that included a requirement that each agency have an initial DEI plan no later than June 1,

2023. Agencies were encouraged to adopt the strategies, goals, and implementation processes from the Statewide DEI Plan to fit their mission. The letter explained that agencies' Affirmative Action Plans were to serve as an element of their DEI Plans and supplement the implantation to achieve both DEI and Affirmative Action goals.

### MHRA Diversity Study

Section 266 of House Bill 5006 (2021), effective August 6, 2021, allocated \$300,000 in General Funds to MHRA “for a demographic study of licensees and a diversity plan.” To carry out this work, MHRA formed an ad-hoc HB 5006 Contract Workgroup made up of seven volunteer Board members including the Chairs of each Board. The Workgroup met 10 times between August 2021 and March 2022 and worked with Agency staff, legal counsel, and an assigned procurement analyst from the Department of Administrative Services on the procurement process for a third-party consultant. They developed the project scope of work, determined how long to accept bids, formulated the criteria for evaluating potential contractors, and determined methods of evaluating the selected contractor’s work. The Workgroup selected Keen Independent Research, LLC (Keen) as the vendor, and finalized the contract in June 2022.

Over the next several months, Agency staff provided information, compiled, and sent requested data, and worked with Keen representatives to build Keen’s study webpage and virtual workshop. Keen engaged in detailed research and data analysis and gathered stakeholder input via the study website, virtual workshops, in-depth interviews, and focus groups. In December 2022, Keen produced the [Diversity Study](#) with appendices that highlighted strengths and weaknesses within the licensing, compliance, and character and fitness review processes of the Boards, and made recommendations to consider. More information on the work involved and timeline can be found in MHRA’s [Project Chart](#).

The Diversity Study included five recommendations based on quantitative and qualitative information gleaned from the six-month long study, including comparative analysis of other jurisdictions, review of licensee and Oregon population demographic data, summaries of surveys and interviews with stakeholders, and analysis of Agency and Board laws, rules, policies, and procedures. The report explained that “key themes behind these recommendations include the need for: (a) visible, consistent efforts to avoid exacerbating inequities and challenges facing professionals, (b) support for professionals and diversity in the professions as a means of supporting and protecting mental health consumers.” Keen and the Boards were pleased to see a relatively high level of participation in the study by Oregon mental health professionals. The recommendations to the Boards are summarized as follows:

1. Make and sustain a viable, active commitment to DEI.
2. Reconsider licensing policies and procedures to support equity.
3. Add safeguards around complaints, investigations, and disciplinary actions.
4. Audit and improve communications and service.
5. Identify and to the extent possible advocate for, influence, or support changes in factors external to MHRA and the Boards to foster equity.

MHRA quickly produced a [Written Report](#) that contained a plan for the Boards to review the recommendations and consider implementing changes. On February 1, 2023, MHRA and Keen

presented the Diversity Study and Written Report to the Joint Committee on Ways and Means Subcommittee on Education at the State Capital.

## Terminology

DEI-related terms and concepts referenced in this Plan are defined in [Appendix II](#) of the State of Oregon DEI Action Plan.

## Racial Equity Vision

MHRA adopts the Racial Equity Vision as set forth in the Statewide DEI Plan, as follows.

Within the context of historical harms, changing demographics, intersectional identities, and more; our vision for the next five years and beyond is to:

- **Dismantle** institutional and structural racism in Oregon state government, and by doing so, have resounding impacts on the communities of our great state.
- **Build** a more equitable Oregon where everyone has the opportunity to thrive and everyone's voice is heard.
- **Ensure** an inclusive and welcoming Oregon for all by celebrating our collective diversity of race, ethnicity, culture, color, disability, gender, gender identity, marital status, national origin, age, religion, sex, sexual orientation, socio-economic status, veteran status, and immigration status.

## Racial Equity Values

MHRA adopts the Racial Equity Values as set forth in the Statewide DEI Plan, as follows.

- **Putting racial equity at the forefront while understanding intersectionality.** We must be bold and put racial equity at the forefront as a primary and pervasive location of oppression that connects with and worsens other identity-based inequities.
- **Prioritize equity, anti-racism, and racial justice actions.** Commitment to prioritizing equity and eliminating racial disparities involves taking action in our policies, budgets, decision-making, and daily work.
- **Foster internal and external partnerships.** Across the state enterprise and other institutions, community-based organizations are crucial to achieving racial equity. True partnership means shared power, listening, resolving tensions by creating solutions together, and scaling up what already works well.
- **Ensure collective responsibility and accountability.** As public servants, we have a collective responsibility at every level of government to proactively reduce racial disparities and barriers. We must establish measurements of success so that we can ensure improvements are real and ongoing.

## Racial Equity Goals

MHRA adopts the Racial Equity Goals as set forth in the Statewide DEI Plan, as follows.

- **Establish** strong leadership to eradicate racial and other forms of disparities in all aspects of state government.
- **Center** equity in budgeting, planning, procurement, and policymaking.
- **Strengthen** public involvement through transformational community engagement, access to information, and decision-making opportunities.
- **Improve** equitable access to services, programs, and resources including education, health, housing, human services, environmental justice, criminal justice, and economic opportunities.
- **Foster** an inclusive workplace culture and promote equitable hiring, retention, and promotion practices.

## DEI Action Plan

While the timelines are important, MHRA’s DEI Plan is a living plan with the goal of successfully carrying out various described actions while remaining adaptable and responsive to Board and stakeholder needs.

### DEI Team & Partners

The DEI planning team is responsible for developing and managing the agency’s DEI action plan for implementation, ensuring the plan supports MHRA’s mission, vision, laws, rules, policies, and financial structure. DEI champions exist at both the enterprise and agency level. It is important for everyone to work collaboratively toward operationalizing and advancing the strategies outlined in this Plan.

The MHRA Executive Director serves as the Agency Champion who is designated to lead MHRA’s DEI efforts. The Director establishes agency racial equity plans, set goals and timelines, appoints necessary staff, and is accountable to the enterprise level. The Executive Director also serves as the agency Affirmative Action Representative, providing pertinent information from the agency Affirmative Action Plan and other relevant agency policies and procedures, collaborating with DAS CHRO as needed regarding workforce success efforts, and engaging other staff members as needed to ensure project success. The MHRA Policy Advisor assists the Executive Director in project management including plan development, and serves as the Agency Champion in the Executive Director’s absence.

Enterprise Champions provide the framework, context, environment, and help to centralize the collective effort while holding agencies and agency champions accountable. The following key partners are involved in the development of MHRA’s DEI Plan:

- Strategic Initiatives and Enterprise Accountability Division  
Department of Administrative Services
- Equity and Racial Justice Office  
Office of Governor Kotek
- Office of Cultural Change  
Department of Administrative Services

## Plan Development

MHRA is committed to racial equity, diversity, equity, and inclusion. As described in the MHRA Affirmative Action Plan, equity is at the forefront of the Agency's employee hiring and Board member recruitment efforts, promotion considerations, and succession planning. The AA Plan should be referenced in consideration of MHRA's workforce planning efforts. This initial agency-specific DEI Plan is created to review the positive work MHRA and the Boards have recently completed and to form a basis for future DEI planning efforts over the next biennium.

## Agency Progress, 2021-23

The Mental Health Regulatory Agency (MHRA) has achieved many DEI accomplishments during the 2021-23 biennium, as listed below.

- The Boards affirmed their intent to continue to offer meeting access via videoconferencing, with no plans to change those arrangements. While team relationships, collegiality, and goodwill have been better fostered by the Boards in-person, maintaining a remote meeting participation option will continue to promote accessibility for both board members and members of the public.
- In 2021, the Oregon Board of Psychology (OBOP) moved from an in-person to an online-based Oregon Jurisprudence Examination, a well-received change that allowed psychologists to become licensed expediently and with greater accessibility. This change has allowed practitioners to get working more quickly in Oregon rather than facing the time and cost to travel from out of state for an in-person exam.
- In preparation for the 2022 Special Session and 2023 Regular Legislative Session, the MHRA Executive Director and board leadership have worked closely with the Governor's Appointments Office to recruit a sizable and diverse pool of applicants for Board membership. The success of these efforts is demonstrated under [Appendix B: Board Diversity Data](#). In July of 2021, the Executive Director established a Recruitment and Selection Committee for each board to facilitate this process.
- In November of 2021, the Boards formed a joint committee of members of both boards, in consultation with the Agency's Assistant Attorney General and MHRA Policy Advisor, to explore possible revisions to the MHRA Character and Fitness Policy, with particular consideration of whether any potential barriers to licensure could be eliminated while maintaining strong standards for consumer protection. The committee proposed draft recommendations that were approved by both boards during public meetings on February 4, 2022 (OBLPCT) and March 11, 2022 (OBOP). The new process removed some procedural hurdles in the application processing. It delegated more authority to the Executive Director to review misdemeanor arrests, allowing applications to move forward quickly when there is no nexus to the practice of the profession rather than delay of approval for further review. It includes explicit direction for consideration of whether a nexus exists, limiting actionable criminal information to what is relevant to the practice of the profession.

The revised application questions no longer ask about misdemeanor arrests or charges that are older than 6 months, and invite preemptive disclosure and explanation of information regarding the person's background. This provides an opportunity for



applicants to explain things like a history of substance abuse, which is specifically identified as part of the Boards' consideration, particularly when there is a history of multiple arrests related to past substance abuse. These revisions help mitigate the need for additional follow-up questions after disclosure.

- MHRA leadership engaged with the Boards and a third-party consultant to conduct a Diversity Study which was published in December 2022 (see above, [MHRA Diversity Study](#)). MHRA produced a written report and presented the information to the Joint Committee on Ways and Means Subcommittee on Education in February 2023. The following recommendations have been implemented by MHRA:
  - The Diversity Study recommended a reduction in the frequency of professional counselor and marriage and family therapist license renewal, which required legislative change. The Board of Licensed Professional Counselors and Therapists requested a legislative concept for introduction in the 2023 Legislative Session that will remove the word “annual” from the statute, ORS 675.725, allowing it to implement a biennial renewal schedule in alignment with the Board of Psychology. This concept was not pre-session filed by the Governor’s Office as the Board requested. However, following the Agency’s budget presentation to the Joint Ways and Means Education Subcommittee, Representatives Susan McLain and Ricki Ruiz graciously offered to help with introducing the concept. And so it became House Bill 3300. MHRA has provided testimony and answered legislator questions, and expects the bill to be successful.
  - The Board of Licensed Professional Counselors and Therapists’ House Bill 3300 will also add a limited practice option outside of regular full licensure for individuals who are licensed as a professional counselor or marriage and family therapist outside of Oregon, allowing them to provide services to a client who relocates to the State, or to an Oregonian who has a particular need. The regular licensure process takes time to ensure qualifications are met, requires a larger application fee in proportion to the limited services that are being sought, and comes with added requirements like a continuing education. The new limited permit option will reduce service gaps and possible discontinuity of care for clients who rely on behavioral health services in Oregon.
  - The Board of Licensed Professional Counselors and Therapists made changes to the clinical supervised work experience requirements for LPC and LMFT licensure in Oregon that become effective July 1, 2023. The Board heard a presentation with recommendations from Keen Independent Research during the October 7, 2022 public meeting. Keen’s comparative analysis found that similar to Oregon, most states specify hours that must be direct client contact. The average range of between 1,500 to 1,999 hours of direct client contact was the most common among states. For LPC post-degree direct client contact hours, only Alabama (2,250) required more than Oregon (2,000), and only Idaho and Vermont required the same as Oregon. For LMFT post-degree direct client contact hours, only Arkansas (2,200) required more than Oregon (2,000), and only Idaho and Vermont required the same as Oregon. Keen recommended that BLPCT consider revising supervised clinical experience requirements to be comparable to other states that also have rigorous standards. It also recommended

these requirements continue to be set forth in administrative rule rather than statute to allow flexibility as information about optimal requirements become forthcoming in the future. During the December 2, 2022 public session meeting, the Board voted to file a notice of proposed rulemaking to implement recommended changes. During the February 3, 2023 meeting, the Board reviewed public comments received on the proposal and voted to file a permanent administrative rule. The changes will be as follows:

The direct client contact hours requirement is reduced by 500, and the LMFT direct couple, family or group specific hours are reduced by 250. The rule amendment changes the requirements for reciprocity applicants coming from other states, allowing more flexibility in the allowable substitution of post-licensure clinical experience to would help facilitate interjurisdictional mobility for early career professionals. The Board hopes to bolster the volume of counselors and therapists who consider relocating to Oregon to provide crucial mental health services to Oregonians. The rule change also removes the requirement that registered associates must complete at least 1,000 of the required hours of direct client contact while in a Board-approved associate registration plan. The Board found this to be an unnecessary barrier to licensure for individuals coming to Oregon from out of state that have substantially completed the clinical experience requirements.

- Although the Diversity Study found licensing fees to be modest expenses when compared to the costs of education (student loans), low or unpaid internship and post-degree experiences, and supervision costs that are outside of the Boards' span of control, it did note these fees as a potential hardship. Some study participants opined that licensing fees may be a hinderance to diversity in the mental health professions. Accordingly, the Boards proposed significant reductions to licensing fees in the 2023-25 Governor's Budget, and these are recommended for approval in the Legislatively Approved Budget. These reductions were made possible through the continued efforts of MHRA leadership to streamline operations and maximize efficiencies since the new agency structure was formed in 2018.
- The Diversity Study recommended that the Boards review the possibility of joining interstate compacts that would allow an expedited approach to the practice of the professions across state lines. Each Board has received legal advice and discussed their respective professional compacts during meetings in 2022 and the first half of 2023. In April 2023, the Board of Psychology gathered stakeholder feedback by surveying all licensees and licensure applicants regarding their opinion on the best direction for Oregon. The Board had learned in October 2022 that the Association of State and Provincial Psychology Boards (ASPPB) which creates and owns the national psychology examination, the Examination for Professional Practice in Psychology (EPPP), announced it would require a second "Part 2" of the exam to be integrated with the original EPPP. The Board discussed that psychologists in Oregon had mixed opinions about the added step to licensure. Some shared concern over the additional expense and equity issues with the EPPP and/or standardized testing generally.

- Oregon psychologists also expressed interest in Oregon becoming a Psychology Interjurisdictional Compact (PSYPACT) state. PSYPACT is a national organization that facilitates agreements between states such that individual PSYPACT providers can practice telepsychology in other PSYPACT states. However, in order for an individual to become part of PSYPACT, the state must be designated as a PSYPACT state (which would require legislation in Oregon), and the individual must apply through PSYPACT, whose requirements include passing the EPPP (which will include both parts in January 2026). In order to authorize individuals to take the EPPP, a state must have a requirement for passage of the EPPP in the state's licensure process (non-EPPP states are not allowed to authorize individuals to take the EPPP). Because of the logistics outlined above, the EPPP and PSYPACT are essentially mutually exclusive options. Survey results showed that 84% of respondents favored legislation to join PSYPACT, even though it means retaining the EPPP requirement, including EPPP Part 2 starting January 2026.
- To address limitations in language translations in Board website PDF documents, MHRA staff has begun to integrate information contained in PDF format into the body of Board websites which have integrated language translation (Google Translate). This gradual approach to change respects inclusive processes to remove language barriers while reducing resource allocation pressure on the Boards.
- In late 2022, all MHRA investigators completed training on trauma-informed investigation procedures.
- The MHRA 2023-25 Agency Request Budget proposes to add two new permanent positions to help alleviate the workload and allow leadership to have a greater focus on DEI efforts and other board mission-oriented tasks and improvements going forward.
- MHRA's [2023-25 Affirmative Action Plan](#) was approved by the Statewide Affirmative Action Manager on February 27, 2023. This Plan includes MHRA's Affirmative Action Policy Statement and Diversity & Inclusion Statement. It contains strategies and goals to continue MHRA's work to create a diverse and respectful agency in the 2023-25 biennium.
- MHRA developed and adopted a Succession Plan in May 2023 that includes DEI efforts as they relate to succession planning, including a commitment to intentionally recruiting, developing, and retaining a diverse workforce.
- MHRA developed and adopted this initial agency-specific DEI Plan in May 2023.

### Agency Strategy & Goals, 2023-25

Ongoing actions highlight the work that has begun and will be continually built upon and put into practice. The goals set by the Mental Health Regulatory Agency are as follows:

- Agency and Board leadership will continue to review the recommendations contained within Keen Independent Research's Diversity Study to determine strategies for improving organization transparency and accountability within the Agency, including ways Agency policies and procedures may impact affirmative action initiatives and

results. Identified strategies will assist in the review and development of next MHRA Affirmative Action and DEI plans.

- Beginning in 2023, the Boards will include Diversity, Equity, and Inclusion as a standing agenda item for discussion during each annual strategic planning meeting. Each year the Boards will review accomplishments and discuss short- and long-term DEI goals.
- During the next strategic planning meeting, each Board will:
  - Begin the development of a Public Commitment to Racial Equity statement for placement on their websites.
  - Consider forming a DEI Committee and developing its scope of work and composition. This committee may explore the need to enlist a DEI implementation consultant to advise the agency and boards on diversity-related improvements, assist with development of creative and more effective communications with stakeholders, and who can assist, guide, and develop public education and public relations efforts.
  - Explore methods for more inclusive meeting facilitation. Discuss strategies to conduct meetings in a manner that supports racial equity and inclusion, and values diverse ways of speaking, thinking, debating, reflecting and making decisions.
  - Begin a discussion of communications improvement to explore new and creative ways to hear from stakeholders and to respond to feedback.
- MHRA management will engage the Boards in rulemaking and incorporate changes made during the 2023 Legislative Session into agency systems and web materials, including:
  - Licensing fee reductions effective January 1, 2024.
  - New limited permit rule and application process for counselors and therapists.
  - Change from annual to biennial renewal cycle for counselors and therapists, effective January 1, 2024.
- In the 2025-27 Agency Request Budget:
  - Per House Bill 2167 (2021), MHRA will begin creating a racial impact statement. When the next budget development cycle begins in March 2024, Agency leadership will utilize the Racial Equity Toolkit developed by the Chief Financial Office and work with the Racial Justice Council to develop this supplemental information. MHRA will apply a racial equity lens to the budget development process and assess how its programs benefit and/or burden Tribal/Native American, Black/African American, Latino/a/x, Asian, Pacific Islander, Arab/Middle Eastern/North African, Immigrant, and Refugee communities.
  - The Boards will work with budgetary and legislative partners to allocate the resources needed and pass the legislation required to implement effective change. MHRA will identify related system and resource needs to achieve stated goals, in preparation to present to legislative committees in the next legislative session.

- MHRA will closely monitor the impact of licensing fee reductions and ensure a healthy biennium ending balance for continuity of operations.
- The Boards will continue to review the possibility of joining interstate compacts that would allow an expedited approach to the practice of the professions across state lines. If such legislation is proposed, MHRA will provide information to legislators and other stakeholders as needed. If legislation is passed, MHRA and the Boards will work collaboratively with stakeholders to ensure successful implementation that includes culturally respectful and inclusive community engagement.
- The Boards will continue to explore options for smoother, faster and more flexible acceptance. This includes methods to expedite the licensing process for those currently licensed in other jurisdictions (reciprocity applicants for BLPCT, and licensure by endorsement applicants for BOP).
- MHRA leadership will continue to prioritize multiple aspects of diversity in its recruitment efforts for staff and board member positions.
- The MHRA Executive Director will continue to participate in the bimonthly Affirmative Action Representatives meeting to share ideas and strategy with other state partners in diversity.
- Following the July 1, 2023 effective date of the Board of Licensed Professional Counselors and Therapists' amendments to the clinical supervised work experience requirements for LPC and LMFT licensure, the Board will monitor for and respond to any unintended consequences, for example tracking the rate of complaints against early career professionals before and after the reduction in competency standards for counselors and therapists practicing in Oregon.
- The Boards will further explore methods to improve communications related to character and fitness reviews. This includes reviewing application instructions and wording of web materials to consider expanding descriptions about what is being asked, how it is viewed, and how it is protected.
- To promote language accessibility, MHRA staff will continue to integrate information contained in PDF format into the body of Board websites which have integrated language translation (Google Translate), with the goal of 100% completion by the end of 2023-25.
- The Boards will continue to monitor for assessment and/or evidence that may suggest cause for caution about validity and bias in national examinations required for licensure.

## Plan Approval

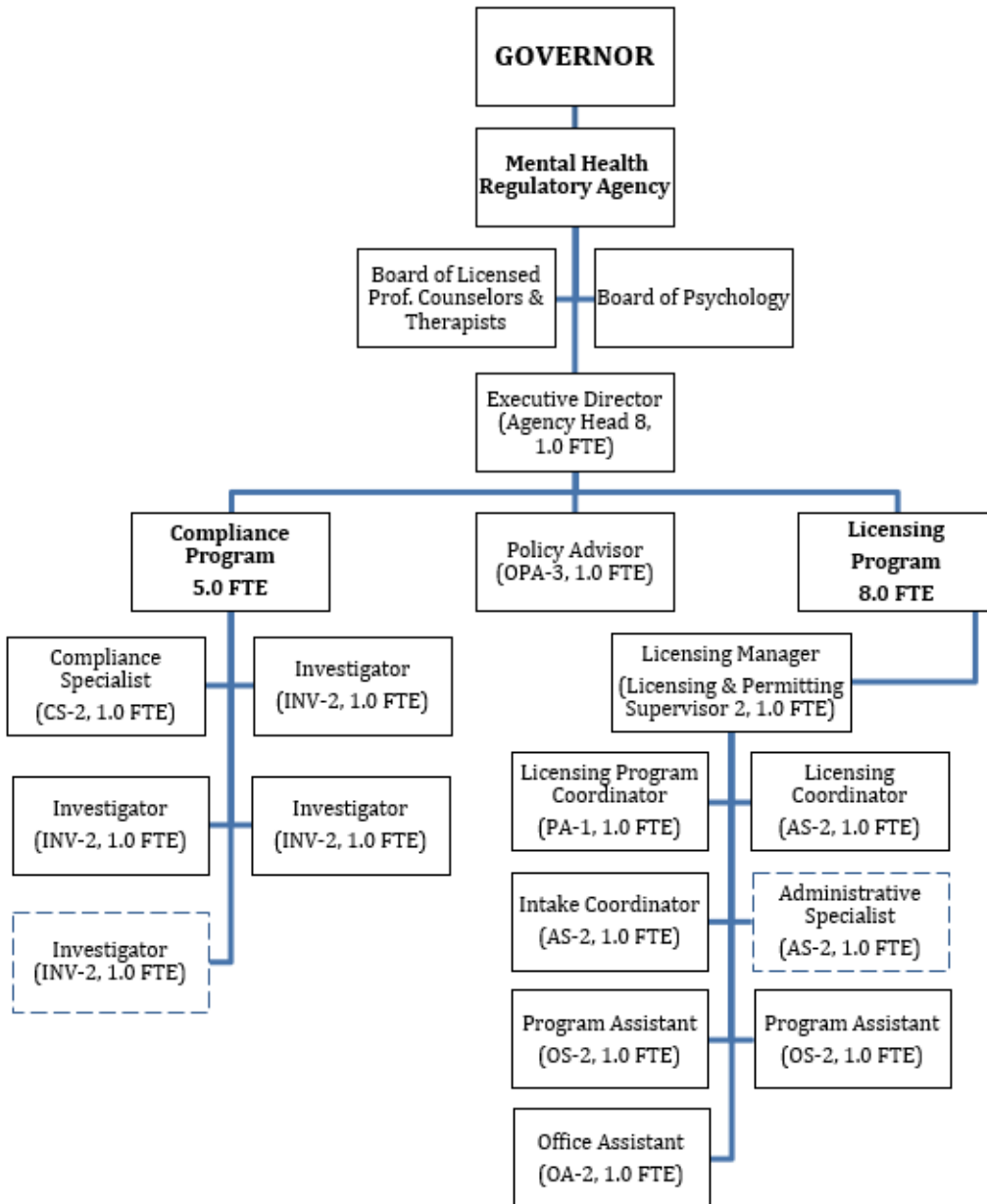
APPROVED by the Executive Director:

  
 \_\_\_\_\_  
 Charles Hill

\_\_\_\_\_  
 May 17, 2023  
 Date

# APPENDIX: MHRA Organizational Chart

2023-25 (Expected)



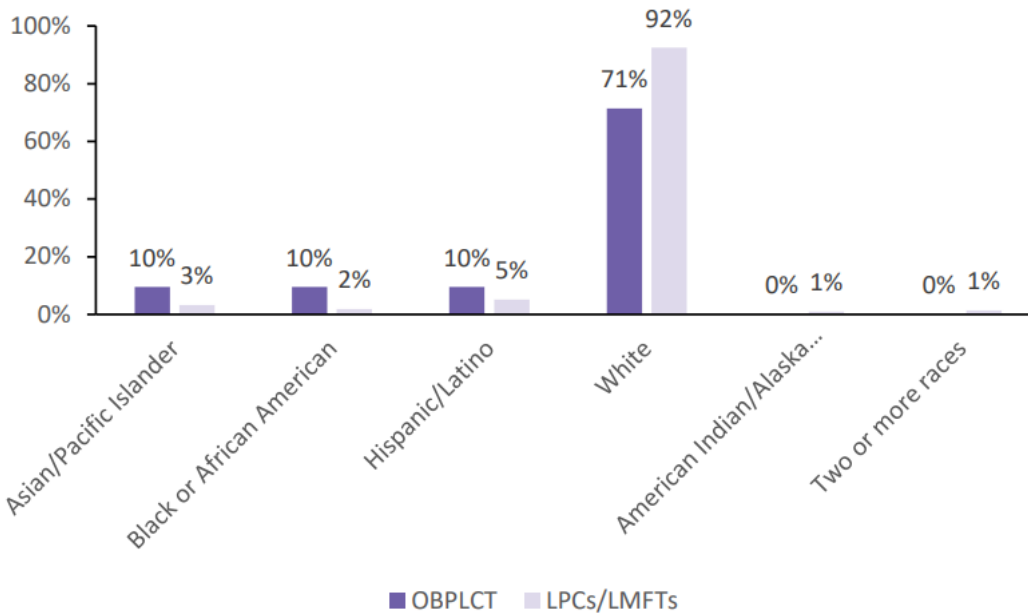
\* Positions shown with dashed lines indicate new permanent FTE authorized for 2023-25.

## APPENDIX B: BOARD DIVERSITY DATA

The role of data is to help identify the populations the Boards are working with, optimal conditions for access to services, and opportunities for service delivery improvement. The 2022 Diversity Study conducted by Keen Independent Research examined the license affiliation, gender, race/ethnicity and sexual orientation of members of the Board of Licensed Professional Counselors and Therapists (BLPCT), the Board of Psychology (BOP), and staff of the Mental Health Regulatory Agency (MHRA). Select summary graphs are provided below.

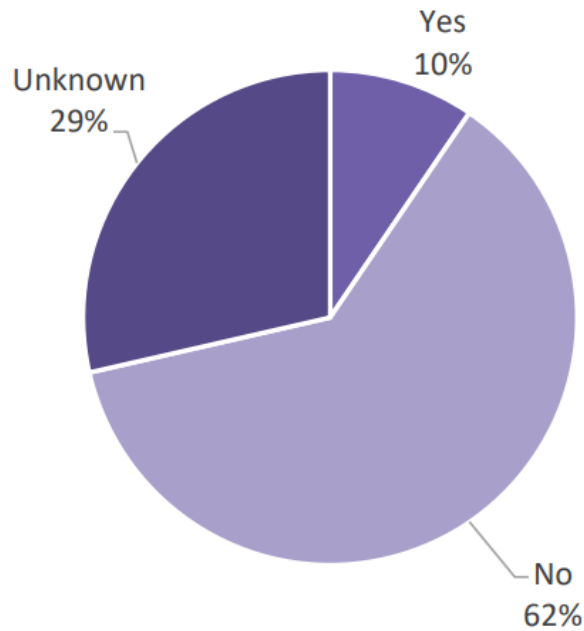
### *Race/Ethnicity of BLPCT Members Compared to all Oregon Licensees, 2015-2022*

Keen found that BLPCT members were less white and more racially diverse than the Oregon population of Licensed Professional Counselors (LPCs) and Licensed Marriage and Family Therapists (LMFTs).



**Note:** Asian and Native Hawaiian/Pacific Islander were combined categories in the board data but separate categories in the practitioner data. We combined the categories into Asian/Pacific Islander here for ease of comparison.

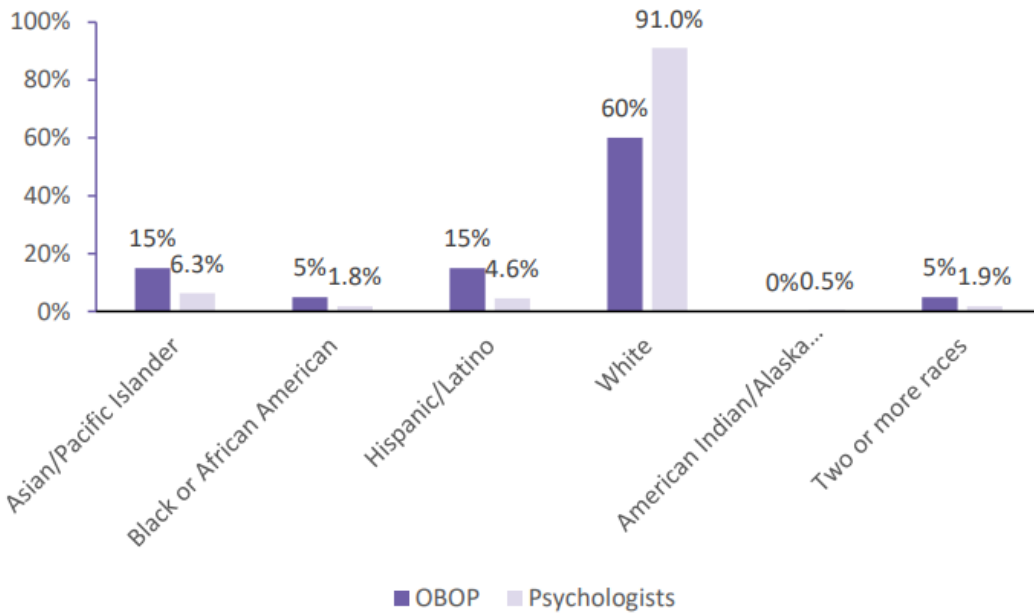
*LGBTQ+ Status of BLPCT Members, 2015-2022*



Note: Numbers add to more than 100 percent due to rounding.

*Race/Ethnicity of BOP Members Compared to all Oregon Licensees, 2015-2022*

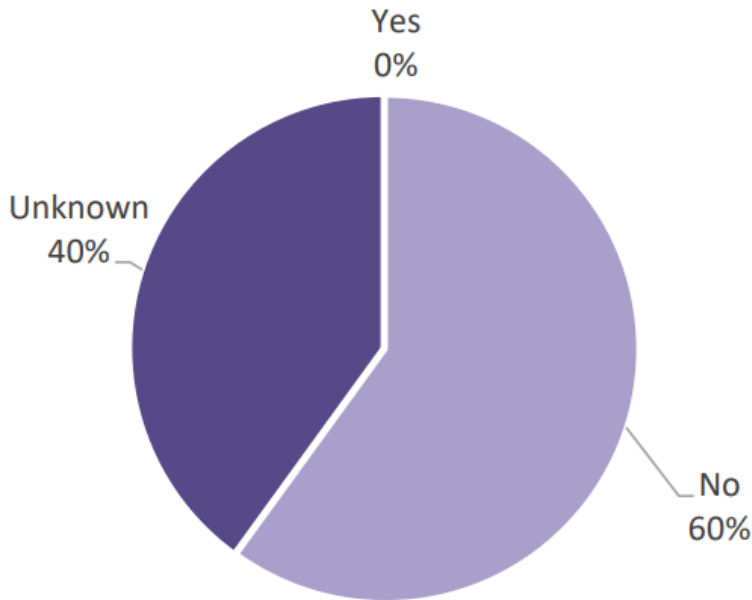
Keen found that BOP members were substantially less white and more racially diverse than the Oregon population of psychologists.



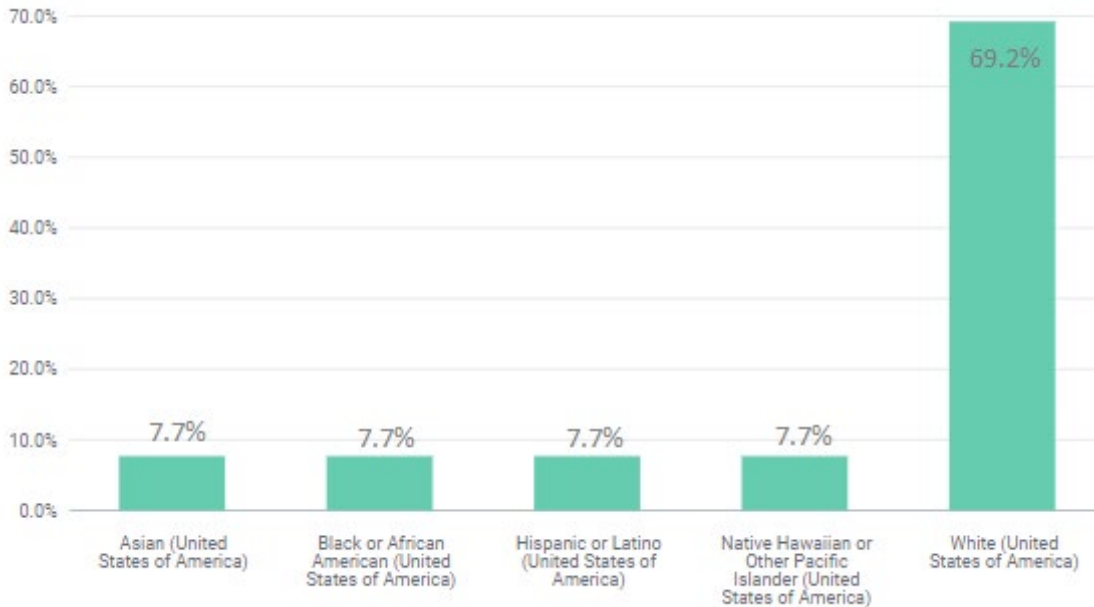
Note: Asian and Native Hawaiian/Pacific Islander were combined categories in the board data but separate categories in the practitioner data. We combined the categories into Asian/Pacific Islander here for ease of comparison.



*LGBTQ+ Status of BOP Members, 2015-2022*



*Race and Ethnicity of MHRA Staff*



Source: Workday Oregon, MHRA DEI Dashboard, data accessed April 28, 2023. Note: Workday Oregon does not collect LGBTQ+ data.

The most recent data on Oregon’s health care workforce race and ethnicity, including those specific to psychology and counselors/therapists as compared to the Oregon population, please see the Oregon Health Authority’s 2022 Edition of [The Diversity of Oregon’s Licensed Health Care Workforce](#), published by the Office of Health Analytics in March 2023.