

Oregon Mental Health Regulatory Agency

Board of Psychology | Board of Licensed Professional Counselors & Therapists

3218 Pringle Road SE, Suite 130
Salem, OR 97302



Written Report on
Demographic Study and Diversity Plan
December 28, 2022

Mental Health Regulatory Agency
Written Report on Demographic Study and Diversity Plan

Table of Contents

INTRODUCTION.....1

SUMMARY OF RECOMMENDATIONS.....2

RECOMMENDATION #1: COMMITMENT.....2

 A. Make a Visible, High-Level Commitment to Equity 4

 B. Operate Boards Inclusively 4

 C. Align Resources, Monitor, and Make Adjustments as Needed..... 4

 D. Create Systems and Opportunities to Welcome Ideas and Feedback 5

RECOMMENDATION #2: LICENSING POLICIES & PROCEDURES.....5

 A. Reconsider Requirements that may have Inequitable Impacts..... 5

 B. Consider Revised Supervised Clinical Experience Requirements 7

 C. Consider Fee Modifications to Support Socioeconomic Diversity and Encourage Service to Underserved Populations 9

 D. Facilitation Interstate Credentialing for Services and Supervision..... 10

 E. Reduce Friction Points in License Renewal 12

 F. Evaluate Possible Modifications to Continuing Education Requirements 13

RECOMMENDATION #3: COMPLIANCE SAFEGUARDS14

 A. Take Action to Mitigate Negative Perceptions of Use of Former Law Enforcement..... 14

 B. Add and/or Communicate Procedures to Safeguard Respondent Rights and Well-Being.. 15

 C. Add and/or Communicate Procedures to Safeguard Complainant Rights and Well-Being 16

 D. Revise and Potentially Expand Disciplinary Action Options 17

 E. Foster Transparency and Accountability to the Extent possible 17

RECOMMENDATION #4: COMMUNICATIONS & SERVICE18

 A. Evaluate and Update Communications and Service to Foster Inclusion and Belonging 18

 B. Use Communications to Reduce Common Misunderstandings and Friction Points..... 19

 C. Modify Communications for Complainants and Respondents..... 19

 D. Support Language Access to Information Currently Only Available in English (PDFs) ... 20

RECOMMENDATION #5: EXTERNAL FACTORS20

CONCLUSION.....21

Introduction

The Mental Health Regulatory Agency (MHRA) was created to protect the public from harm by providing administrative and regulatory oversight to two regulated boards (the Boards) that set the standards for and oversee mental 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 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. 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 Board of Psychology (BOP) regulates psychologists and psychologist associates, and the Board of Licensed Professional Counselors and Therapists (BLPCT) regulates licensed professional counselors and licensed marriage and family therapists. The Boards also register pre-licensed individuals (BOP psychologist residents and BLPCT registered associates) to complete the requisite supervised work experience for licensure. BOP issues limited permits to allow practice in Oregon by psychologists licensed in other states. BLPCT is requesting to add this option in 2023 for LPCs and LMFTs licensed in other states.¹

Section 266 of House Bill 5006 (2021), effective August 6, 2021, allocated funds to MHRA “for a demographic study of licensees and a diversity plan.”² The Bill’s Budget Note indicated that MHRA “shall engage a third party consultant to study the demographics of those individuals licensed by the boards and devise a plan to increase licensee diversity.” It required MHRA to submit a written report to a legislative committee by December 31, 2022. The purpose of this report is to satisfy the Budget Note’s directive for a written report on the demographic study and diversity plan (“Diversity Study”) that was produced by the third-party consultant, Keen Independent Research LLC (Keen).

Board members and MHRA staff welcomed the opportunity to engage a study of diversity-related practices, policies, and procedures, in order to ensure ongoing excellence and explore areas for ongoing growth. We are committed to the implementation and maintenance of systems that are fair, equitable, and responsive to the needs of diverse populations. Keen’s effective collaboration and prompt and thorough work on this sizeable project has been greatly appreciated. Since the beginning of this project, the Boards have spent considerable time during public meetings to discuss strategic planning around these matters, and look forward to further consideration of the recommendations set forth in Keen’s Diversity Study. This document outlines some of the efforts we have taken, some that we have been working on, and some potential areas we plan to invest our effort in moving forward. We acknowledge that diversity sensitivity requires ongoing commitment, attention, consideration, and reconsideration, and we are pleased to be part of this work.

¹ BLPCT’s Legislative Concept (LC) 0350 is pending approval by the Governor’s Office.

² Effective April 4, 2022, Sections 91-93 of HB 5202 (2022) removed the allocation from MHRA and reappropriated the funds separately to BLPCT and BOP.

We also appreciate the recognition by our consultants that new initiatives and efforts require resources and funding, much of which is outside of what was budgeted for years ago for the current 2021-23 biennium. The Boards' success in implementing the changes needed will hinge upon budget support as outlined below, and on the support of legislators to assist with, support, and approve needed statutory changes. We look forward to partnering in these efforts.

Summary of Recommendations

The Diversity Study was provided to MHRA and the Boards by Keen Independent Research (Keen) on December 16, 2022. Because of the tight deadlines to review the Study and provide this response report, most of the ideas outlined in this response are phrased as considerations for change which will require further consideration prior to implementation.

The Diversity Study includes 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, surveys and interviews with stakeholders, and analysis of Agency and Board laws, rules, policies, and procedures. The report explains 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 Diversity Study also recognized a significant limitation, in that it did not include input from consumers of mental health services or their families, or feedback from patient advocacy organizations. Therefore, the recommendations do not completely evaluate their potential impact on consumer protection. The Boards are very mindful of their missions, which are rooted in public protection.

Recommendation #1: Commitment

Make and sustain a viable, active commitment to DEI.

The first recommendation of the Diversity Study is for the Boards to foster accountability by making public long-term commitments to steady progress in fostering diversity, equity, and inclusion. The Study noted that perceptions by professionals that MHRA and the Boards do not promote these efforts are counterproductive to progress towards these goals. One of the key findings of the Study was a high level of confusion for Oregon licensees about the role and scope of the Boards, and perhaps more notably there is a high level of mistrust regarding Board practices. This is likely the confluence of several factors, a few of which are outlined here, followed by ideas for improvement and growth. Regardless of reasons why, the Boards are interested and committed to improvement and change, particularly in communications and interactions with stakeholders. The following are not intended to deflect from the work that needs to be done, or the commitment the Boards have toward continuous improvement, particularly in DEI work. They are simply a few of the contextual factors that have made this work difficult.

Over the last five years, particularly during the COVID crisis, staffing shortages have influenced MHRA's ability to work and respond as quickly as preferred in investigations. In addition, with entry-level positions for most of the staff that interface with the public, there has been a higher than usual amount of turnover in staff positions along with delayed hiring processes through the State Chief Human Resources Office (DAS CHRO). Staffing limitations have resulted in the need to develop streamlined response templates to common questions and concerns raised by applicant and licensee inquiries. Given the stressful nature of their inquiries, template responses may be perceived to be cold or stale, though the hope in using them is to be providing consistent and accurate information.

Disruptions resulting from the COVID pandemic had major impact on MHRA's ability to provide responsive customer service. Staff and board members had to quickly adjust to remote work and conducting and participating in video conference meetings. In support of the Governor's Executive Orders, the Boards held multiple special meetings, and filed and implemented various temporary and permanent administrative rules to facilitate public safety and to ensure the sustained delivery of mental health care services for Oregonians. The Boards quickly established a process and issued 304 no-cost temporary emergency visitor's permits (BOP) and 614 no-cost temporary reciprocal licenses (BLPCT) to allow out-of-state practitioners to provide continuity of care through confidential electronic communications to clients in Oregon who had been displaced due to the coronavirus emergency. Licensees and applicants were provided concessions in the areas of document submission, continuing education, and in-person supervision requirements. Carrying out all of these changes created a significant additional workload for staff who were already facing illnesses and the natural disasters that occurred during this time.

Additionally, over the past five years, as board positions have opened, board member recruitment has been difficult, with few individuals responding to public notifications in newsletters and listserv emails. Volunteerism has declined across industries over the COVID crisis, and regulation is no exception.³ In combination with staffing shortages, the work of the Boards has focused on sustainment of basic operations. Communication initiatives to consider new and creative ways to report out to the public have been prioritized less, and management of public perception of the work being done by the Boards has been limited at best. Because of this, board communications, while attempting to be forthright and accurate, can be experienced as formal, rigid, and cold/unfeeling. Without full staffing and increased volunteerism efforts for board member positions, the Boards' bandwidth is limited in what can be accomplished, and their success will be predicated on whether licensee stakeholders will be willing to contribute their own volunteerism to the efforts ahead.

The Boards desire to engage honest reflection and thoughtful consideration of ways to build trust with stakeholders given the limitations of the contextual factors outlined above. As with all regulatory boards, particularly in the current sociopolitical climate of large-scale mistrust of governing bodies, the individuals subject to regulation are highly (and understandably) interested in their own protection. In addition, requirements around confidentiality create a context in which individual complaint respondents can make complaints about board practices public, and

³ The term volunteerism is used here, though board members are technically compensated a per diem on days when meetings occur, not including individual preparation and work outside of meetings.

the Boards are unable to respond due to the requirements that their individual case information be kept confidential. Often, this results in one side of the story being represented publicly, with the Boards having minimal ability to provide more context to the public around individual cases in response. The Boards are interested in building trust and communications as much as possible with licensees in Oregon. Despite these limitations, the Boards must continue to prioritize the protection of the public, which necessarily includes systems that make entry into the discipline as straightforward as possible, and which includes mindful awareness of fair and equitable treatment of licensees and applicants.

A. Make a Visible, High-Level Commitment to Equity

- MHRA proposes to engage an implementation consultant who can 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. This consultant will serve to help MHRA address general stakeholder confusion about agency and board roles and scope, as outlined in the Diversity Study.

Budget Note- Utilization of an implementation consultant will require additional budgetary resources. This may stand in conflict with the current proposal to reduce licensing fees for 2023-25 (discussed later in this report).

- The Boards are interested in creating a DEI committee to assist the consultant with the efforts outlined in this report, including goal setting, tracking progress, and sharing regular progress updates during public meetings with the opportunity for public comment. The Boards plan to begin this discussion during their early 2023 board meetings.

B. Operate Boards Inclusively

- The Boards use Robert's Rules of Order for meeting facilitation, but will explore options toward inclusive meeting facilitation as part of efforts guided by a DEI/communications/PR consultant and a developing DEI committee.
- MHRA currently offers 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.

C. Align Resources, Monitor, and Make Adjustments as Needed

- As stated above and further throughout this report, the Boards will look forward to working 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 upcoming legislative session.
- Any goals, objectives, and plans will aim for strategic implementation in order to prevent negative unintended consequences to the extent possible. The Boards will take a thoughtful approach to any potential impact on consumer protection.

D. Create Systems and Opportunities to Welcome Ideas and Feedback

- During their early 2023 meetings, the Boards will discuss and outline short- and long-term DEI goals, including the following major short-term goals as a suggested starting point for the discussion:
 - Formation of a DEI committee, and discussion of membership composition and scope of work;
 - Presentation to legislative committee(s) regarding budgetary needs during 2023 Legislative Session; and
 - Discussion of position duties and recruitment strategy for the previously described DEI consultant.

More minor short-term tasks and goals are outlined throughout this report.

- The Boards will engage in a communications improvement project to explore new and creative ways to hear from stakeholders and to respond to feedback. Currently, the Boards utilize an annual customer satisfaction survey as one of their key performance measures. Each regular board meeting includes a “public forum” agenda item dedicated to providing an opportunity to allow stakeholders to directly address the Board. In addition, public comment is sought regularly as is customary in the administrative rulemaking process. The Boards are interested in brainstorming new methods of obtaining feedback, as guided by the proposed DEI consultant and committee. Ideas might include adding DEI-specific survey question items or exploring more frequent or simpler feedback options. One limitation to gathering licensee or consumer satisfaction immediately following a decision is the common likelihood that one of the parties is disappointed about a contested matter, and uses an immediate feedback channel as a modality to air frustration instead of giving thoughtful, well-balanced feedback. These issues will require more exploration and consideration, which we plan to engage.

Recommendation #2: Licensing Policies & Procedures

Reconsider licensing policies and procedures to support equity.

A. Reconsider Requirements that may have Inequitable Impacts

- Prior to completion of the Diversity Study, the Boards have accomplished the following regarding the character and fitness review process:
 - The Boards formed a joint committee of members of both boards, in consultation with the Agency’s Assistant Attorney General, 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. The new process removed some procedural hurdles in the application process. 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.
- The Boards would now like to further explore the following related to character and fitness reviews:
 - Review 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. This will facilitate improvement in communication to stakeholders.
 - Given the very rare circumstance that someone is denied licensure based on criminal history, the Boards will consider publishing the frequency with which that has occurred. This will help to dispel stakeholder misperceptions about board process.
 - Consider making explicit exclusionary criteria for review of criminal history, such as arrests without convictions, set asides, expunged records, or convictions older than a designated time period.
 - Consider formalizing the process of considering rehabilitation or mitigating circumstances when reviewing character and fitness related information.
- 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. Although the state jurisprudence examinations are open book, completed by applicants remotely, and have very high passage rates, both Boards will also consider methods to review these state exams for potential bias and for their value in predicting success in the professions.⁴
- The Board of Psychology (BOP) specifically is considering the following regarding the national examination required for psychologist licensure:

The Association of State and Provincial Psychology Boards (ASPPB) is the developer and owner of the Examination for Professional Practice in Psychology (EPPP), the multiple-choice exam used nationally to demonstrate attainment of the foundational knowledge needed for the practice of psychology. Over the last decade, ASPPB has

⁴ It is noted that BOP recently moved from an in-person to an online based Jurisprudence Examination, a well-received change that allowed psychologists to become licensed expediently and safely during the pandemic. This 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.

invested in developing an additional exam (EPPP-2) to measure applicant skill attainment (more applied skills as opposed to academic knowledge). Due to issues related to alleged bias in the EPPP and other national exams, there has been significant effort by psychologists and psychology training programs to advocate against the adoption of this addition to the EPPP. However, in October 2022, ASPPB's seven-member board of directors voted to merge the EPPP with the EPPP-2, effective January 2026, at which time they plan to stop offering the EPPP unless a state also uses the EPPP-2. Because this increases the cost of the exam process to recent graduates (who are already facing financial barriers), and because of the potential disproportionate impacts on license applicants from diverse backgrounds, BOP is reconsidering use of the EPPP.

BOP must consider the national examination's potential impact on competency screening, and how decisions may impact consumer protection. BOP has written into rule educational criteria that requires psychology graduates to demonstrate foundational knowledge attainment and a clinical skill-based competency portfolio in each of the competency areas that the EPPP and EPPP-2 measure. In particular, programs accredited by the American Psychological Association (APA) and the Canadian Psychological Association (CPA) go through thorough vetting, annual reporting, and regular site visits to ensure ongoing quality. It is possible that the EPPP and EPPP-2 are less naturalistic ways to measure readiness to enter the discipline than the exercises implemented in accredited training programs, by faculty who have closely tracked their student development over 4-5 years of training. On the other hand, a national examination is required by Oregon law for licensure applicants not meeting specified experiential criteria. The EPPP is required in some form by all U.S. States. A decision to remove Oregon's EPPP requirement may compromise Oregon licensees' ability to become licensed in other states, causing a negative impact on interjurisdictional mobility for psychologists initially licensed in Oregon, and would preclude Oregon's ability to participate in the Psychology Interjurisdictional Compact (further discussed later in Section D). These and other important factors will require further consideration, which BOP is actively exploring.

B. Consider Revised Supervised Clinical Experience Requirements

- The Board of Licensed Professional Counselors and Therapists specifically is considering the following regarding direct clinical hours for LPCs and LMFTs and family/couple hours for LMFTs:

In 2022, BLPCT has discussed the supervised clinical experience requirements which are established in Oregon Administrative Rule (OAR) during eight public meetings, all of which allowed for comment from members of the public. The October 7, 2022 meeting included a presentation from Keen of their topical analysis of BLPCT's supervised clinical experience requirements.⁵ 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. Currently for LPC post-degree direct client contact hours, only Alabama (2,250)

⁵ This report was provided to BLPCT in October 2022 prior to the full Diversity Study, and is included in that report as Attachment 1.

requires more than Oregon (2,000),⁶ and only Idaho and Vermont require the same as Oregon. Currently for LMFT post-degree direct client contact hours, only Arkansas (2,200) requires more than Oregon (2,000),⁷ and only Idaho and Vermont require 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. This includes 1,500 post-degree direct client contact hours (reduce by 500 hours), 500 of which for LMFT candidates would be direct couple, family or group hours (reduce by 500). Keen 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.

BLPCT thoughtfully considered the information gathered to date and the recommendation from Keen, and during the December 2, 2022 board meeting, voted to file a notice of proposed rulemaking that would reduce the direct client contact hours requirement by 500, and reduce the LMFT direct couple, family or group hours by 250. The proposed rule amendment also 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. It also proposes to remove 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.

Going forward, the Board plans to review public comments received and consider whether to file the permanent administrative order to implement these proposals during the February 3, 2023 board meeting. Also as recommended by Keen, BLPCT plans to monitor for and respond to any unintended consequences, for example tracking the rate of complaints against early career professionals before and after a change in requirements which reduces competency standards for counselors and therapists practicing in Oregon.

- The Diversity Study recommended that the Boards consider seeking to clarify Oregon's new requirement for employers to pay for supervision. It was noted that House Bill 2949 (2021) does not specify who selects the supervisor, or whether supervision options apart from the supervisee's employer must be permitted and paid for by the employer. The Bill is also silent as to which state entity is charged with enforcement this provision. Shortly after passage of this legislation, MHRA staff sought clarification on these issues from the Office of Legislative Counsel, the drafters of HB 2949. Unfortunately, however, the Boards did not receive any insight about the interpretation or intent. The Boards may

⁶ Per rule, 400 of the total required 2,400 direct client contact hours for both LPC and LMFT licensure may be completed prior to completion of the degree (pre-degree). Nearly all master's level counseling and therapy programs include at least 400 pre-degree direct client contact hours as a requisite for degree completion.

⁷ Per rule, 400 of the total required 2,400 direct client contact hours for both LPC and LMFT licensure may be completed prior to completion of the degree (pre-degree). Nearly all master's level counseling and therapy programs include at least 400 pre-degree direct client contact hours as a requisite for degree completion.

consider further review, including seeking legal advice from the Department of Justice on these matters.

Budget Note- Requesting written legal advice from the Department of Justice may require additional budgetary resources. This may stand in conflict with the current proposal to reduce licensing fees for 2023-25 (discussed later in this report).

- The Boards will explore creative solutions to support access to qualified and appropriate supervisors, within the parameters of Oregon requirements for lawful practice of the professions within the state. Ideas may include expansion of the information included and/or the searchability of the Boards' supervisor registries to help identify supervisor suitability, or options related to the issuance of limited permits⁸ for out-of-state licensee supervisors.
- The Boards encourage ongoing support for professionals, including post-licensure supervision, consultation, and continued training. The Boards will explore options to message this encouragement to stakeholders, which may include collaboration with the related professional associations to foster support for licensees. Also as recommended, the Boards will consider the prudence of incorporating additional requirements necessary to maintain Oregon licensure for psychologists, LPCs, and LMFTs (e.g., required post-licensure supervision).
- The Boards are interested in exploring ways to help prevent the loss of qualifying supervised clinical experience hours for registered associates and residents resulting from violations that are attributable to their supervisor. For example, the supervisor allowing their license to lapse but continuing to practice the profession (and provide clinical supervision) in violation of the law. This might include a review of the licensing system mechanics to determine whether it is capable of flagging violations for quicker identification and resolution.

Budget Note- Modifications to the licensing system by the Boards' database contractor may require additional budgetary resources.

C. Consider Fee Modifications to Support Socioeconomic Diversity and Encourage Service to Underserved Populations

- 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, 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. The Boards are currently proposing significant reductions to licensing fees in the 2023-25 biennial budget.⁹ The Boards will also consider exploring the possibility of sliding scale or reduced fee modifications in the future.

Budget Note- With the exclusive exception of the FY 2021-23 General Fund allocation to conduct the Diversity Study per House Bill 5006 (2021), the Boards are completely

⁸ As noted previously, BLPCT is requesting a legislative concept (LC) in 2023 to add a limited permit option for LPCs and LMFTs licensed in other states. LC 0350 is currently pending approval by the Governor's Office.

⁹ The Boards' proposal to reduce fees is pending approval with the Governor's Office, and if approved, would become a part of the Governor's Budget, which is expected to be released in January 2023.

funded by licensing-related fees (Other Funds), receiving no programmatic support from taxpayer, lottery or grant funds. There are currently no General Funds allocated to implementing any recommendation within the Diversity Study, so without further funding, this responsibility will fall on the Boards. Reducing licensing fees depletes available MHRA budgetary resources and limits the Boards' ability to implement recommendations set forth in the Diversity Study.

- The Boards have in the past offered payment plans for civil penalties and disciplinary cost assessment (BLPCT), but these efforts at debt collection were often extravagant and generally unsuccessful due to limited staffing and available system accounting capabilities. The Boards currently offer limited payment plans (typically extended time on due dates and two-part payments) as part of settlement agreements that involve more significant sanctions, but may explore further more flexible options in the future. In the meantime, the Boards will explore a communication strategy to promote understanding of the current resource and structural limitations and current limited options for payment plans to licensees and the general public.

Budget Note- Implementing a payment plan program within MHRA, including necessary staffing resources and modifications to the licensing system by the database system contractor, will require additional budgetary resources. MHRA's 2023-25 Agency Request Budget does include a policy option package (POP 100) request for an additional Administrative Specialist 1 (1.0 FTE) position. The Boards currently lack a stand-alone administrative position to carry out accounting and certain other program support functions including accounts receivable. If approved,¹⁰ this position could support consideration of this recommendation. However, the data system limitations would also need to be addressed, which will require additional budgetary resources.

D. Facilitation Interstate Credentialing for Services and Supervision

- The Boards have each reviewed the possibility of joining interstate compacts that would allow an expedited approach to the practice of the professions across state lines. Whether to join interstate compacts is a policy decision for the Oregon Legislature and Governor, with comment from the Boards. The Boards will provide information as needed to facilitate and support such efforts if pursued, which require various statutory changes. The bullets below describe the actions taken to date by the Boards to facilitate this recommendation. Further, and as previously discussed in this report, the Boards will consider communication strategies to promote understanding of their role in statewide policy and legislative initiatives.¹¹

¹⁰ To be successful, MHRA's POP 100 must be approved by the Governor in the Governor's Budget, and then by the State Legislature in the Legislatively Adopted Budget. MHRA must receive budgetary approval in order to establish and allocate funding towards this proposed staff position.

¹¹ The Diversity Study revealed persistent stakeholder misconceptions of the Boards' role, responsibility, and scope of authority as reflected by comments received from study participants. It noted that professionals are sharing information with each other, whether accurate or not, that contributes to negative perceptions and an inaccurate narrative about the purview of MHRA and the Boards. For example, some stakeholders believe that the Boards should initiate legislation to promote the profession (e.g. legislation related to provider insurance coverage requirements) or take a position on legislation other than concepts which are introduced by the Boards themselves (which is not permitted by the Governor's Office).

- The Board of Psychology (BOP) specifically is considering the following regarding facilitation of interstate credentialing for services and supervision:

As mentioned above under Section A, the Psychology Interjurisdictional Compact (PSYPACT) is developed and administered by the Association of State and Provincial Psychology Boards (ASPPB). It is overseen by the PSYPACT Commission, which includes representatives from compact member jurisdictions. PSYPACT permits licensees in participating states to practice telepsychology in other participating states, and also makes licensees in participating states eligible for short-term in-person practice in other participating states.

When BOP originally explored the possibility of joining PSYPACT in 2016-17, it received DOJ advice that Oregon could not participate under the PSYPACT structure at that time because it would violate various provisions of the Oregon Constitution. There were many other board concerns related to competency and character and fitness standards. Subsequently in 2022, BOP determined to again explore PSYPACT as a possibility in Oregon, and has discussed this as an agenda item during several public meetings which allowed for comment from members of the public. Legal advice received from DOJ in November 2022 indicated that it may be possible to overcome the previously identified constitutional barriers as result of recent changes to PSYPACT Commission adopted rules. Currently, BOP is actively engaging with ASPPB representatives and other jurisdictions to determine the possibility of Oregon's participation, and to identify possible barriers and consequences to joining. For example, Oregon would not be allowed to participate in PSYPACT if it amended certain licensing requirements, including removing requirement of the EPPP as the national exam required for psychologist licensure. It is unlikely that BOP could add requirements for other state participants like graduation from an accredited program in psychology or completion of a residency (post-doctoral supervised work) experience. These consequences implicate consumer protection standards in Oregon, and will require close scrutiny. BOP will further discuss review of PSYPACT during the January 13, 2023 board meeting.

- The Board of Licensed Professional Counselors and Therapists specifically is considering the following regarding facilitation of interstate credentialing for services and supervision:

The Interstate Counseling Compact (Compact) was developed by the American Counseling Association and the National Center for Interstate Compacts and is administered by the Compact Commission. The Compact permits licensees in participating states to apply for the privilege to practice telehealth in other participating states, but does not permit in-person practice in other states. It applies to licensed professional counselors only and not to licensed marriage and family therapists. The Compact is not yet effective, but will become so once ten states adopt the Model Legislation (forthcoming).

This Compact is in a much earlier stage of development as compared to PSYPACT, so BLPCT has only recently begun exploring the possibility of

joining. Legal advice received from DOJ in December 2022 identified the same constitutional barriers as found for PSYPACT, but determined that these may also be possible to overcome. BLPCT will further discuss review of PSYPACT during the February 3, 2023 board meeting.

- The Boards are also interesting in exploring options for smoother, faster and more flexible acceptance. This includes ways to expedite the licensing process for those currently licensed in other jurisdictions (reciprocity applicants for BLPCT, and licensure by endorsement applicants for BOP). The bullets below describe the actions taken to date by the Boards to facilitate this recommendation.
 - As noted above under Section B, during the December 2, 2022 board meeting, BLPCT voted to file a notice of proposed rulemaking that included two changes that are proposed to facilitate interjurisdictional mobility. This includes: 1) changing the requirements for reciprocity applicants to allow more flexibility in the substitution of post-licensure clinical experience for required direct client contact hours; and 2) removing 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, which the Board found to be an unnecessary barrier to licensure for individuals coming to Oregon from out of state that have substantially completed the clinical experience requirements.
 - During its recent Strategic Planning Meeting on November 5, 2022, BOP discussed its licensure by endorsement application method and possible ways to expedite this process. Oregon Senate Bill 154 (2003) allowed BOP to waive the national exam (EPPP) after 15 years of licensure in another state. Accordingly, the Board enacted a rule that was effective August 20, 2004. In contrast, Oregon Medical Board (OMB) statute (ORS 677.133) sets forth an expedited process for a physician who has been licensed for at least one year in good standing. This allows OMB to implement a more abbreviated application process than what is possible for BOP. Nonetheless, BOP is actively exploring options that are possible to remove barriers within statutory limitations without unnecessarily compromising consumer protection standards. The BOP Education Committee (composed of three board members) was tasked with research and review of available data and development of a recommendation to the full Board.

E. Reduce Friction Points in License Renewal

- The Diversity Study’s recommendation to reduce the frequency of LPC and LMFT license renewal requires legislative change. BLPCT has requested a legislative concept in 2023 that will remove the word “annual” from the statute, ORS 675.725, allowing it to implement a biennial renewal schedule in alignment with BOP.¹²
- The Diversity Study found that compared to other states, BOP renewal fees were higher than average. As described above in Section C, BOP is proposing to reduce licensing fees, including the fees required for license renewal. The Study also recognized that BOP’s fees are higher because unlike other boards, BOP cannot assess disciplinary costs

¹² BLPCT’s LC 0350 is pending approval by the Governor’s Office.

to respondents, and therefore these costs must be funded through fees collected primarily by licensees.¹³ Additionally, because of BLPCT’s education exemption “loophole,” BLPCT refers to BOP cases involving unlicensed practice by individuals who do not meet the education requirements to be counselors or therapists in Oregon.¹⁴ This results in additional resource needs for BOP to effectively protect Oregon consumers from the dangers of unlicensed practice. The Boards have previously pursued legislation to remedy these issues, but these efforts were unsuccessful.¹⁵ The Boards may consider reinitiating legislation, or at least supporting any outside legislative efforts in these areas. However, the Boards’ success in implementing needed legislative changes will hinge upon the support and partnership of stakeholders including legislators, professional associations, and other state partners.

- The Boards are interested in exploring the recommendation to add a new semi-active licensure status for family/medical circumstance. They will need to explore the expected demand for this option, including anticipated frequency of change requests by licensees to and from this status (as family and medical situations evolve), the parameters for qualifications, methods for ensuring qualifications are met, and the administrative process for instituting this change. This would require staffing resources for administrative rulemaking and implementation, as well as ongoing maintenance to support licensee requests. Although it is not explicitly stated, presumably the expectation is that the semi-active licensure status would offer renewal at a reduced rate, which may impact the MHRA budget depending on the established fee amount and volume.

Budget Note- Implementing and maintaining new licensure statuses for the Boards—including necessary staffing resources, modifications to the licensing system by the database system contractor, and reduction in revenues resulting from reduced renewal fees—will require additional budgetary resources. This may stand in conflict with the Boards’ current proposal to reduce licensing fees for 2023-25.

F. Evaluate Possible Modifications to Continuing Education Requirements

- The Boards are interested in reviewing the continuing education (CE requirements) for possibly increasing flexibility in consideration of qualifying activities. The Boards’ CE rules were designed to promote flexibility by not requiring any program approval process—by an outside credentialing entity or by the Boards themselves. Instead, the CE rules set forth specific criteria under which activities will qualify. This allows a wide array of learning opportunities to meet the CE requirements, including home study reading, lecturing on or publishing practice-related topics, and participating in ethics committee meetings. It also saves significant staffing resources that would be necessary

¹³ The Diversity Study found that similar Oregon Boards, including the Medical Board and the Board of Licensed Social Workers, may assess disciplinary costs. It also noted that California and Minnesota boards responsible for counselor, therapist, and psychologist regulation are permitted to assess costs.

¹⁴ See ORS 675.825(4), which removes BLPCT’s jurisdiction to enforce violations of unlicensed practice for individuals who do not meet the educational requirements for licensure as a LPC or LMFT.

¹⁵ Regarding BLPCT’s education exemption loophole, the Boards’ HB 2361 (2017) and Representative Salinas’s HB 4031 (2020) were both unsuccessful. Regarding disciplinary cost assessment, BOP’s HB 2329 (2017) and HB 2114 (2021) were both unsuccessful. HB 2114 was a cross-collaborative effort with Oregon Psychological Association, involving two years of collaborative preparation. Unfortunately, the bill died in the third reading in the House, after Representative Stark reported that he hadn’t reviewed it and moved to refer the bill back to committee.

if the Boards were to pre-approve programs. Unfortunately, a consequence to this approach is that licensees may prefer the dependability of a pre-approved program to ensure it will “count.” The Boards will need to consider how to balance issues of flexibility, reliability, and availability of resources (including, as previously discussed, board member volunteerism limitations) for an in-house CE approval program.

Budget Note- Implementing new CE approval programs for the Boards, including necessary staffing resources and modifications to the licensing system by the database system contractor, will require additional budgetary resources. This may stand in conflict with the Boards’ current proposal to reduce licensing fees for 2023-25.

- The Boards may consider options to facilitate licensee sharing of free CE opportunities, which will likely involve collaboration with the professional associations.
- The Boards are interested in improving communication efforts to alleviate licensee confusion and anxiety related to CE compliance, while continuing to support the broadest array of CE opportunities possible (by not limiting qualifying programs to those that have been pre-approved). Efforts to date have included website resources (FAQs) and newsletter article publications. The Boards will continue to explore ways to communicate rationale¹⁶ and standards to licensees, as well as disseminate resources through which questions can be answered. Ideally, this initiative will be guided by the DEI consultant and committee as proposed under Recommendation #1.

Recommendation #3: Compliance Safeguards

Add safeguards around complaints, investigations, and disciplinary actions.

A. Take Action to Mitigate Negative Perceptions of Use of Former Law Enforcement

- Prior to completion of the Diversity Study, the Boards have accomplished the following regarding mitigation of negative perceptions:
 - The Boards understand that having prior law enforcement in investigative roles can result in the perception of investigative procedures as cold, unfeeling, and lacking responsiveness. While Agency and Board leadership have great trust in the quality of the current investigative staff members, we also understand the importance of practices and procedures that are responsive to clinical nuances and individual trauma history in many cases, and have taken measures to begin improvements in this regard. For instance, MHRA investigators were recently tasked with completion of trainings on trauma-informed investigation procedures, and all of them have completed such training.

¹⁶ BOP has determined that the point of CE is to stay up to date and current with the discipline; therefore peer consultation in which neither of the peers is engaging new ideas presented in workshops and other trainings is unlikely to meet those aims. As such, peer consultation, while deemed appropriate and responsible in the life of a psychologist, does not count as new education and learning as is necessary in attaining CE units. BOP will consider how best to communicate this rationale to psychologist stakeholders in the interest of transparency.

- The Boards would now like to further explore the following related to mitigation of negative perceptions:
 - Efforts such as the investigator training described above have not been publicized or externally communicated, but the Boards could consider publicizing efforts like these.
 - The Boards will consider how best to ensure investigator competency in clinical nuance and trauma-informed investigation procedures. At the current time, the positions do not require a post-graduate degree or clinical training, keeping investigator costs manageable within agency funding resources. The Boards will consider developing a plan for regular investigator training and development toward trauma-informed investigation procedures as well as clinical competency. This should include research into how other health-related licensing boards train their investigative staff and the qualifications they establish for their investigative positions. This is likely possible to implement within current agency funding resources.
 - MHRA investigative positions have historically focused on investigative skills required to successfully carry out the requisite investigative job duties, including interviewing witnesses, gathering relevant facts, writing clear investigative reports, and presenting cases to the Board.¹⁷ The Boards may also consider working with the state’s contracted HR partner, DAS CHRO, to review investigative job descriptions further. This includes the possibility of re-classifying current positions or establishing new positions and exploring related salary range increases as needed. The Boards must carefully consider that re-classifying the positions and relatedly increasing the starting salary for investigator positions is necessary to draw differently-experienced qualified candidates with clinical backgrounds. To be successful in this option, MHRA will rely on collaboration with DAS CHRO.

Budget Note- Increasing investigative FTE or reclassifying investigative positions will require additional budgetary resources. This may stand in conflict with the Boards’ current proposal to reduce licensing fees for 2023-25.

B. Add and/or Communicate Procedures to Safeguard Respondent Rights and Well-Being

- The Boards will review complaint respondent notifications and orientation information, including standard form letters, with intention to improve communications. Information that may be helpful to include would be general information about how the process works, what to expect, and what to consider in developing one’s response. Communications will also be reviewed to explore legal formality and related reading comprehension levels required to understand the communication. The Boards will also consider adding sections to the website for

¹⁷ As a contextual factor to note, in accordance with state law and hiring policies applicable to all state agencies, MHRA must award preference points to military veterans in the application scoring process. Applications for investigative positions within MHRA have historically included a proportionately higher number of military veterans due to their related military experience.

more easy access to information targeted at orienting those involved in board investigations as to the process ahead and what to expect.

- The Boards will brainstorm ways to verbalize their practice to only render decisions on complete investigations, including a description of methods by which the Boards initiate collection of further information for review prior to decision on a case. The Boards will also need to consider methods to communicate this formalized procedure to help dispel misconceptions that decisions are being made based on incomplete investigations. Ideally, this and other initiatives set forth in this recommendation will be guided by the DEI consultant and committee as proposed under Recommendation #1.
- The Boards will consider outlining the standards by which respondents are treated, including the rights of respondents, in more accessible language. A current method includes MHRA's policy requiring the tape recording of every investigative interview for quality assurance purposes. In addition, the Boards can explore how to better communicate the respondent's due process rights.
- The Boards will consider how to better communicate procedures in place for when complainants or respondents are concerned about investigation processes or techniques. Currently, MHRA contracts with the state HR business partner, DAS CHRO, who is responsible for performing this HR-related investigatory work.
- The Boards will consider methods to communicate to licensees and the public their well-developed recusal procedures to prevent conflicts of interest for board members in case deliberation. Board members who have financial or other conflicts of interest that limit their ability to be fair and unbiased (or those which could give the appearance of bias) are asked to recuse from deliberation, removing themselves from the room and abstaining from the vote. The Boards may also explore how best to communicate these procedures in accessible ways.
- The Boards will reconsider the level of detail included in publications that include disciplinary action information. The Boards will also consider communicating with stakeholder the Boards' rationale in public notification of Board enforcement actions and explaining the policies that guide these practices.

C. Add and/or Communicate Procedures to Safeguard Complainant Rights and Well-Being

- The Boards are very interested in pursuing opportunities that will promote the integrity of the investigative process, including options for increasing whistleblower protection (especially of registered associates and psychologist residents), witness interview strategies, and stakeholder communications. As recognized in the report, the Boards are bound to the limits of confidentiality requirements set forth in statute. The Boards honor and prioritize complainant and complaint respondents' rights to confidentiality, and will consider how to best communicate specifically how complainants are protected in the process.
- In some cases, complainants do not respond to investigator follow-up after submitting the original written complaint. Complainants are always given the opportunity to

engage in the process. When a complainant declines to participate beyond the original written complaint, an investigation is significantly limited and difficult to engage at the same depth. The Boards will explore how best to communicate the current process used when this occurs, including outlining the decision tree used in determination of how best to move forward in those cases. It is noted that given resource limitations and the limited scope of investigations when complainants are not engaged, the Boards often reject anonymous complaints.

- The Boards will explore possible revisions of the form letters used with complainants, including examination of the explanations used regarding the purpose of confidentiality in board investigations, particularly when there is not enough evidence to substantiate a complaint. The Boards remain committed to diligent and thorough investigation, and are interested options that balance disclosure of information with protection of confidentiality.

D. Revise and Potentially Expand Disciplinary Action Options

- BOP currently utilizes a Disciplinary Guidelines document that includes a sanction matrix and provides some high-level guidance in disciplinary sanction decision-making. BLPCT will consider developing similar guidelines. However, because of the many case-specific variables that need to be taken into account in determination of a fair outcome, developing more detailed guidelines and adopting them into administrative rule would require a complex disciplinary sanction matrix that is impractical. The Boards have discussed this option and the ramifications, but will continue to explore options for an approach that balances consistency, transparency, practicality, and legal sufficiency. This includes seeking DOJ guidance as necessary regarding the legal ramifications involved in expanding and formalizing disciplinary sanction guideline matrices. The Boards will consider options for outlining how matrices are used as a reference point, and will consider outlining other variables that influence sanction consideration (e.g., repeat offender, history of past violations, severity of risk, severity of patient harm).
- The Boards have had multiple discussions in recent years and will continue exploring potential options for restorative justice. They may also consider mediation or other techniques to expand their approach to disciplinary enforcement. Currently, the Boards regularly utilize mandated disciplinary supervision, trainings, and exercises such as self-reflective essays as sanctions options that are rehabilitative in nature. The Boards will explore other options that are within their statutory authority to impose sanction. The Boards will also reflect on whether the intention of these types of sanctions are being communicated effectively, and possible develop strategy to better message this important aspect of the Boards' work.

E. Foster Transparency and Accountability to the Extent possible

- The Boards will explore publishing statistics on complaints and disciplinary actions that include a greater level of detail than the information currently published, and will review the effectiveness and frequency of current communications. As noted in the Diversity Study, the Boards currently do not collect demographic information from complainants or

non-licensee respondents. The Boards will reflect on this practice and determine whether it should be modified.

- The Boards will also explore how best to communicate statistical data findings to the public, including accessible explanation of the data and Oregon-specific contextual factors that influence complaint and action rates. Increased transparency regarding investigative statistics, including information on the volume of cases that result in board dismissal, may help put licensees at ease and quell misconceptions about the disciplinary process.
- In rare circumstances, a board may reject proposed orders by Administrative Law Judges. While this is unlikely to occur (and when it does occur is accompanied by detailed explanation as to the rationale), the Boards recognize that this is an area prone to misperception by stakeholders and will explore how best to communicate the frequency and legal requirements with the public. This should include information regarding the limitations and risks around providing explanations of reasoning in general.
- The Diversity Study revealed that some licensees have unfortunate misconceptions that there is a lack of diversity among Board members. Currently, the Boards publish some information about members, including their photographs and short biographies, which are contained on the website and in newsletters. The Boards will consider the recommendation to regularly review and publish member diversity statistics, keeping in mind the privacy interests of these volunteer members.

Recommendation #4: Communications & Service

Audit and improve communications and service.

As noted throughout this report, the Boards are committed to exploring more effective ways to communicate with the stakeholders. This section is primarily dedicated to licensee and application communications, as the Diversity Study collected feedback primarily from these groups via survey and interviews.

A. Evaluate and Update Communications and Service to Foster Inclusion and Belonging

- As noted in previously discussed recommendations, the Boards will consider review of established scripts/procedures for use by MHRA staff and explore possible options for customer service training, ensuring friendliness, warmth, and responsiveness, in addition to the accuracy of information provided. Staff may also benefit from training on handling irate or unstable individuals in a manner that respectfully sets boundaries and reflects best trauma-informed practices.¹⁸ Consumer frustration over the lack of flexibility and responsiveness in form responses needs to be balanced with the need for entry-level staff to provide consistent and accurate information.

¹⁸ MHRA staff have been the subject of verbal abuse (e.g., name-calling, foul language, demeaning or insulting comments) by both licensees and patients who receive mental health services from licensees. This can be demoralizing to staff and could result in added harm to both parties if not handled appropriately.

- MHRA staff have taken intentional efforts to respond to applicant, licensee, and other inquiries in a timely fashion. The Boards will continue to explore resources required to examine inquiry response latency on a regular basis, and the feasibility of publishing response latency for improved transparency and accountability. One option is to explore use of a quality assurance system for phone calls, recording all phone calls as a safeguard and method to review phone communications. This method could be helpful, particularly with staffing shortages and turnover, ensuring that staff are trained adequately and providing the ability to observe their work with consumers.

Budget Note- The implementation of a quality assurance program will require additional budgetary resources. This may stand in conflict with the Boards' current proposal to reduce licensing fees for 2023-25.

- The Boards use their Consumer Protection Committees to review complaints and triage them based on potential risk to the public, providing the ability to respond more quickly to complaints as they come in. This concept could be reviewed for potential application to other areas of operation. MHRA staff provide live support during business hours, and in recent years have worked to identify common reasons people call for live support, providing staff some basic guidelines for how to respond to the most commonly occurring questions. As noted above, ongoing exploration is needed to ensure a balance of responsive warmth with consistent accuracy.

B. Use Communications to Reduce Common Misunderstandings and Friction Points

- As outlined in Recommendation #1, Section A., perhaps one of the most important Board limitations highlighted in the Diversity Study (and as noted throughout this report) is the need for improved communications by the Boards to constituents about the work they are doing, including the scope of their role. The Study highlighted that MHRA constituents appear to be under the impression that the Boards have more wide-ranging jurisdiction than reality dictates (e.g., educational regulation, overseeing high school, undergraduate, and graduate training processes that create the licensee applicant pipeline). In addition, given the reported high level of distrust between licensees and the Boards, there is a fair amount of work to be done improving public perception of the work the Boards are currently engaged in.
- The Boards will explore the frequency and methods of communication for renewal information, and communicate those practices publicly, including the rationale behind the methods and areas for ongoing improvement.

C. Modify Communications for Complainants and Respondents

The Boards strategies for reviewing recommendations related to communications with complainants and respondents is set forth under Recommendation #2, Sections B. and C. As part of those efforts, the Boards will consider including information in the form response and on the website about other options complainants have for seeking resolution to complaints when the concern is not actionable by the board.

D. Support Language Access to Information Currently Only Available in English (PDFs)

- The Diversity study recommended that the Boards consider language translations for the website PDF documents. On first glance, and given the high stakes, accuracy of communications is essential, making this a substantial administrative ask that would require substantial budget and staffing resources. However, it is noted that this recommendation is limited to PDF documents, and a more cost-effective strategy may be for MHRA staff to gradually integrate information contained in PDF format into the body of Board websites which have integrated language translation (Google Translate). This will respect inclusive processes to remove language barriers while reducing resource allocation pressure on the Boards.
- The Boards are in current compliance with state accessibility requirements applicable to all state agencies, and will consider how best to communicate with constituents what those requirements are, how compliance is met, and where advocacy efforts towards recommended changes are best directed.

Recommendation #5: External Factors

Identify and to the extent possible advocate for, influence, or support changes in factors external to MHRA and the Boards to foster equity.

The Boards recognize the call embedded in the recommendation to support external factors in support of equity. Some general limitations in agencies' ability to provide advocacy have been discussed previously in this report, for example, the requirement to not take any position and only provide information on outside legislation. However, within the Boards' authorized purview, ongoing collaboration with external stakeholders, including legislators, educational programs, researchers, and professional organizations in support of changes that promote diversity within the regulated professions is an important aspect to support the Boards' public protection mandates (in addition to internal systems improvements). Efforts to consider are outlined here:

- More active engagement in keeping licensees and the general public informed about mental health advocacy news in the state.
- Explore options for research given limitations on what information is public and what is confidential. Consider publishing the kinds of datapoints available by public records request, procedures on how to access those data, and terms of use for research publication.
- BOP currently hosts a liaison from the Oregon Psychological Association (OPA), and has enjoyed collaborative relationships with OPA representatives in recent years. Similarly, BLPCT maintains a standing public session board meeting agenda item for discussion with representatives from the Oregon Counseling Association (ORCA) and the Coalition of Oregon Professional Associations for Counseling and Therapy (COPACT). Ongoing collaborative efforts may be considered to clarify the roles of the Boards and their respective professional associations in the professional practice ecosystem. For instance, clarifying which organization has which responsibilities may be helpful, in addition to

providing constituents information about where to go and who to talk to for specific types of questions.

- The Boards are interested in maintaining and exploring methods to expand communications and foster relationships with Oregon educational training programs. BOP has historically sent a board member to give a guest lecture annually at the two largest psychologist training programs in the state. Currently, the training directors of each of those two training programs are board members, fostering ease of educational outreach to psychology graduates. Similarly, BLPCT licensing staff make regular presentations to Oregon counseling and therapy degree programs to educate students about licensing requirements and processes.
- Broader systemic educational outreach to undergraduate programs and even high schools, is likely beyond the scope of what a volunteer board is able to implement and oversee in addition to the routine regulatory duties, but the Boards will consider potential for collaboration with professional associations and others in order to explore potential ideas.
- The Boards will consider and explore whether increased communication with legislators would be a helpful way to improve and advocate for legislative needs outlined in this report.

Conclusion

Oregon Mental Health Regulatory Agency, the Oregon Board of Psychology, and the Oregon Board of Licensed Professional Counselors and Therapists look forward to exploring and implementing recommendations provided in the Diversity Study, diligently exploring the options available to move meaningful change and ongoing improvement forward. Being committed to the implementation and maintenance of systems that are fair, equitable, and responsive to the needs of diverse populations, we look forward to partnering with legislators and stakeholders to advance these aims.