

# Behavioral Health Career Pathway: Licensed Professional Clinical Counselor

Presented by:

Rowena Gillo, LCSW

Pacific Clinics

Adrienne Shilton, MPPA

California Institute for Mental Health

August 20, 2013

# LICENSURE HISTORY

- State of California . . .
  - First state to license LCSWs (1945)\*
  - First state to license LMFTs (1964)+
  - 50<sup>th</sup> state to license LPCCs (2009)\*\*

Sources: \*Dyeson, T.B., *Social Work Licensure: History and Definition*, Home Health Care Management & Practice / August 2004 / Volume 16, Number 5, 408-411

+Esptein, J., *The Living History of the MFT License*, The Therapist / January-February 2013 <https://www.camft.org>

\*\*California Association for Licensed Professional Clinical Counselors [www.calpcc.org](http://www.calpcc.org)

# CURRENT STATE: 2013 Master-Level Mental Health Professional Counts

According to the American Counseling Association:

- **LPC/LPCCs:** 126,378 nationwide
  - 300 licensed in CA (as of 3/19/13)
- **LMFTs:** 58,007 nationwide
  - Over 33,000 licensed in CA
- **LCSWs:** 224,593 nationwide
  - Over 19,000 licensed in CA

Source: American Counseling Association – Office of Public Policy and Legislation - 2013

# COUNSELOR LICENSURE LAW: IMPLEMENTATION OF SB 788

- **Oct 2009:** Governor Schwarzenegger signed SB 788 into Law
  - Legislation amended the CA Business & Professions Code
  - Board of Behavioral Sciences identified as the regulatory agency responsible for the licensure of counselors\*
- **Jan 2010:** SB 788 became law
- **Jul 2011:** Applications became available from the BBS
  - **Grandparenting Path** (application deadline 12/31/2011): non-BBS-licensed counselors and currently licensed LMFTs and LCSWs in CA
  - **Traditional Path:** for LPCs from other states, PCC Intern registration
- **Feb 2012:** First LPCC licenses were issued

Sources: California Association for Licensed Professional Clinical Counselors [www.calpcc.org](http://www.calpcc.org)

\*The National Certified Counselor / Volume 25, Number 3 / Fall 2009

# LPCCs & PCCIs ARE MEDI-CAL PROVIDERS

- **Dec 18, 2012:** California LPCCs and PCC Interns were approved as providers of Medi-Cal services
  - Will provide services within their scope under state law through the county mental health systems
  - Will abide by procedures and processes parallel to those currently used for LMFTs, MFTIs, LCSWs and ASWs

Source: The California State Plan Amendment (SPA) developed by California's Department of Health Care Services (DHCS) and approved by the Centers for Medicare and Medicaid Services (CMS) of the Department of Health and Human Services

# WHO ARE LPCCs?

- Licensed Professional Clinical Counselors (CA, KY, MN, NM, ND, OH)
  - Also named LPCs (Licensed Professional Counselors)
  - LCPCs (Licensed Clinical Professional Counselors)
  - LMHCs (Licensed Mental Health Counselors)
  - LPCMHS (Licensed Professional Counselor of Mental Health)
- Master's-degreed mental health service providers, trained to work with individuals, families, and groups in treating mental, behavioral, and emotional problems and disorders

# WHAT DO LPCCs DO?

- Provide mental health and substance abuse care to millions of Americans
- Receive training and have **scope of competency** to work with individuals, families, and groups.
- Nationwide, make up a large percentage of the workforce employed in mental health centers, agencies, and organizations
- Work with veterans, active duty military personnel and their families (CACREP: Dept of Defense, Tricare, VA)
- Are covered by managed care organizations and health plans

# CACREP'S SCOPE OF ACCREDITATION

**Council for Accreditation of Counseling and Related Educational Programs (CACREP):** A specialized accrediting body recognized by the Council for Higher Education Accreditation (CHEA)

- CACREP grants accredited status to graduate-level programs in the professional counseling field.
- The CACREP scope of accreditation includes the following program areas:
  - Addiction Counseling
  - Career Counseling
  - Clinical Mental Health Counseling
  - Marriage, Couple, and Family Counseling
  - School Counseling
  - Student Affairs and College Counseling
  - Counselor Education and Supervision

**Federal Law: LPCCs must graduate from CACREP-accredited mental health counseling training programs in order to provide counseling services at the Department of Defense (DoD) and VA programs, and those services reimbursed by Tricare (Health care insurance program for military beneficiaries: active duty, retired, families)\***

Sources: Council for Accreditation of Counseling and Related Educational Programs (CACREP) <http://www.cacrep.org>

\*Federal Register / Vol. 76, No. 248 / Tuesday, December 27, 2011 / Rules and Regulations

# HOW ARE LPCCs QUALIFIED?

- According to the American Counseling Association (2011):  
*“LPCC education and training standards for licensure are **on par with** those of the other two master’s level mental health providers (**clinical social workers and marriage and family therapists**)”*
- **California requirements for LPCCs:**
  - Possession of a **60-unit master’s or doctoral degree in counseling**, or a closely related degree, from a regionally accredited or “approved” institution of higher education that includes certain core content areas
  - Completion of a **minimum of 3,000 hours of post-master’s supervised clinical experience**, performed over two years, and continuing education hours for renewal
  - Passage of a California Law & Ethics Exam (taken during first year of internship)
  - Passage of the National Clinical Mental Health Counselor Examination (NCMHCE) (taken after supervision requirements have been met)
  - Adherence to a strict **Code of Ethics** and recognized standards of practice, **as regulated by California’s Board of Behavioral Sciences**

Sources: Business and Professions Code, Chapter 16, Licensed Professional Clinical <http://www.leginfo.ca.gov>  
Board of Behavioral Sciences <http://www.bbs.ca.gov>  
American Counseling Association <http://www.counseling.org/PublicPolicy/WhoAreLPCs.pdf>  
California Association for Licensed Professional Clinical Counselors [www.calpcc.org](http://www.calpcc.org)

# LPCC EDUCATION REQUIREMENTS

**For individuals beginning graduate study ON or AFTER August 1, 2012:**

**A qualifying master's or doctoral degree that includes:**

- 60 semester-units (or 90 quarter-units) in **counseling or psychotherapy** from an accredited or approved university with:
  - **13 core content areas:** At least 3 semester-units (or 4 ½ quarter-units)
    - 3 of 13 areas may be completed post-degree, but all must be completed before intern registration
  - **Supervised practicum/fieldwork:** 6 semester-units (or 9 quarter-units) with 280 hours supervised face-to-face clinical experience

Sources: Business & Profession Code 4999.33

Board of Behavioral Sciences <http://www.bbs.ca.gov>

California Association for Licensed Professional Clinical Counselors [www.calpcc.org](http://www.calpcc.org)

# 2012 LPCC CORE CONTENT AREAS

**10 of the 13 Core Content areas must be included in the degree and all must be completed before education can be approved:**

1. Counseling and psychotherapeutic theories and techniques
2. Human growth and development across the lifespan
3. Career development theories and techniques
4. Group counseling theories and techniques
5. Assessment, appraisal, and testing of individuals
6. Multicultural counseling theories and techniques
7. Principles of the diagnostic process
8. Research and evaluation
9. Professional orientation, ethics, and laws in counseling
10. Psychopharmacology
11. Addictions counseling
12. Crisis or trauma counseling
13. Advanced counseling and psychotherapeutic theories and techniques

# LPCC EDUCATION REQUIREMENTS (CONT'D)

**For individuals beginning graduate study ON or AFTER August 1, 2012**

## **The LPCC licensure Law requires:**

An applicant shall complete the following coursework or training **before education can be approved:**

- (1) A minimum of **15 contact hours of instruction** in alcoholism and other chemical substance abuse dependency
- (2) A minimum of **10 contact hours of training or coursework** in human sexuality
- (3) A two semester unit or three quarter unit survey course in psychopharmacology.
- (4) A minimum of **15 contact hours of instruction** in spousal or partner abuse assessment, detection, and intervention strategies, including knowledge of community resources, cultural factors, and same gender abuse dynamics.
- (5) A minimum of **7 contact hours of training or coursework** in child abuse assessment and reporting
- (6) A minimum of **18 contact hours of instruction** in California law and professional ethics for professional clinical counselors
- (7) A minimum of **10 contact hours of instruction** in aging and long-term care
- (8) A minimum of **15 contact hours of instruction** in crisis or trauma counseling

# LPCCs SUPERVISION REQUIREMENTS

- Supervised experience requires:
  - Completion of education requirements
  - Registration with the BBS
  - 3,000 **post-degree** hours of supervised clinical mental health experience, with an approved supervisor, over a period of not less than two years (104 weeks) and no more than six years to include:
    - Not less than 1,750 hours of direct counseling
    - At least one hour of individual or two hours of group supervision each week that counseling takes place
    - Not less than 150 hours of **clinical experience in a hospital or community health setting**
    - Not more than 1,250 hours of supervisor contact, test administration, writing progress notes, attending training sessions, client centered advocacy, etc.

Sources: Business & Profession Code 4999.42, 45, 46, 47, 48

Board of Behavioral Sciences <http://www.bbs.ca.gov>

California Association for Licensed Professional Clinical Counselors [www.calpcc.org](http://www.calpcc.org)

# WHO CAN SUPERVISE PCC INTERNS?

## An approved supervisor must have:

- 2 years of clinical experience in CA as a LPCC, LMFT, LCSW, licensed clinical psychologist or licensed physician certified in psychiatry
- Received professional training in supervision
- Not provided therapeutic services to the trainee or intern
- A current and valid license that is not under suspension or probation

Source: California Association for Licensed Professional Clinical Counselors [www.calpcc.org](http://www.calpcc.org)

# LPCCs SCOPE OF PRACTICE IN CALIFORNIA

## **California Business & Professions Code 4999.20. (a) (1):**

"Professional clinical counseling" means the application of counseling interventions and psychotherapeutic techniques to identify and remediate cognitive, mental, and emotional issues, including personal growth, adjustment to disability, crisis intervention, and psychosocial and environmental problems.

Professional clinical counseling includes conducting assessments for the purpose of establishing counseling goals and objectives to empower individuals to deal adequately with life situations, reduce stress, experience growth, change behavior, and make well-informed, rational decisions.

# LPCCs SCOPE OF PRACTICE IN CALIFORNIA

## **California Business & Professions Code 4999.20. (a) (2):**

"Professional clinical counseling" is focused exclusively on the application of counseling interventions and psychotherapeutic techniques for the purposes of improving mental health, and is not intended to capture other, nonclinical forms of counseling for the purposes of licensure. For purposes of this paragraph, "nonclinical" means nonmental health.

# LPCCs SCOPE TRANSLATED:

**California Business & Professions Code 4999.20. (a) (1):**

- Application of counseling interventions and psychotherapeutic techniques to improve mental health

**California Business & Professions Code 4999.20. (a) (2):**

- The license is not intended to capture other, non-clinical, non-mental health forms of counseling

Source: California Association for Licensed Professional Clinical Counselors [www.calpcc.org](http://www.calpcc.org)

# WHAT DOES THE SCOPE NOT INCLUDE? FOR CA LPCCs

California Business & Professions Code 4999.20. (a) (3):

- The assessment or treatment of couples or families, or the supervision of MFT interns, unless the LPCC has:
  - 6 semester-units (or 9 quarter-units) focused on MFT  
OR
  - A named specialization in MFT  
AND
  - 500 hours supervised experience working with couples, families or children  
AND
  - 6 hours of CEUs in MFT in each renewal cycle

# WHAT ELSE DOES THE SCOPE NOT INCLUDE? FOR CA LPCCs

California Business & Professions Code 4999.20. (a) (3):

- Projective techniques in the assessment of personality
- Individually administered IQ tests
- Neuropsychological testing
- Utilization of a battery of **3 or more tests** to determine presence of psychosis, dementia, amnesia, cognitive impairment or criminal behavior

**COURTESY OF A CALIFORNIA UNIVERSITY (ANNONYMITY PREFERRED): Recruitment and Retention of Diverse Students**

The Counseling Program and the Clinical Mental Health specialization have made specific efforts to attract, enroll, and retain a diverse student population. In the 2012-2013 academic year, 43% of the students enrolled in the CMHC program were classified by the Registrar's office as minority representatives. The gender and race/ethnic distribution of students and graduates across the 2010-2012 cohorts is presented in the table below:

**Table : Gender and Race/Ethnic Distribution of 2010-2012 CMHC Cohort**

Counseling M.A.	CMHC		Total
	Male	Female	
Hispanic/Latino	1	8	9
Black/African- American		1	1
Asian	2	5	7
Hawaiian/ Pacific Islander			
White	6	17	23
Multiracial (two or more races)		4	4
Unknown		5	5
American Indian or AK Native			0
Nonresident Alien			1
<b>Total Students</b>	<b>9</b>	<b>40</b>	<b>49</b>

# FUTURE NEED

- According to a 2012 Health Benefits Exchange Briefing by Dale Jarvis, it is not unreasonable to assume that an additional 200,000 to 300,000 uninsured individuals in the safety net needing behavioral health services will obtain coverage beginning in 2014 and present for care.
- Although progress has been made with the support of MHSA funding to support workforce development, many challenges remain.
- Our **behavioral health system is not ready to meet the needs of an additional 200,000 behavioral health consumers** in a culturally/linguistically competent and recovery-oriented manner.
- Additional efforts are needed to ensure that behavioral health providers reflect the cultural and linguistic profiles of the communities they serve, the entire workforce is trained in the provision of recovery-oriented care.

# FUTURE NEED (CONT'D)

- Dale Jarvis also predicts a **need for 3,866 to 5,205 additional behavioral health clinicians by 2019.**
- Employers are not necessarily looking for a specific occupation; but rather seeking specific functions in their workforce; e.g., those individuals who can truly understand the mission and values of the public mental health system.
- **LPCCs bring essential functions to the public mental health workforce that will be needed to address the mental health demands of the newly insured.**

# TARGET GROUPS

- Career hotline workers
- Case managers/MH workers/Individuals with lived experiences
- Career Counselors at High Schools and Colleges
- Deaf and Hard of Hearing community
- Jr. High/High Schools & Community College Students
- LPCCs from other states
- Undergraduates: Social work, Sociology, Psychology, Human Services, Education
- Psychology clubs @ college campuses
- Substance abuse counselors
- Those working within inpatient systems
- Underserved ethnic groups
- Under-represented groups
- Veterans
- Older students
- Online Universities

# HEARTFUL THANKS TO ALL OUR SOURCES CONSULTED: Subject Matter Experts

**Dean Porter, Executive Director**

California Association for LPCC

**Leah Brew, Ph.D., LPCC**

California State University, Fullerton

**Janee Booth-Gragg, Ph.D., LMFT**

University of Redlands

**Rhonda Chabran, LCSW**

Pacific Clinics

**Carla Cross, LMFT**

Ventura County Behavioral Health

**Rita Downs, M.Ed., MPA**

CalMHSA Regional Contract Specialist

**Beth Jenks, Ph.D.**

Pacific Clinics

**Karen Lee, LMFT**

Pacific Clinics

**Kim Madsen, Executive Officer**

Board of Behavioral Sciences

**Susan Mandel, Ph.D., President/CEO**

Pacific Clinics

**David Miller, LMFT, LPCC**

Fresno County Behavioral Health

**Marianne Ruffolo, MBA**

San Bernardino County Behavioral Health

**David Schoelen, LCSW**

Riverside County Behavioral Health

**Roman Shain, Ph.D., LMFT, LPCC**

San Fernando Valley Community MH Center

**Sheree Summers, LMFT**

Riverside County Behavioral Health

**Laura Williams, M.S., MBA, SSGB, CHC**

Butte County Behavioral Health

**Susan Zgliczynski, Ph.D., LPCC**

University of San Diego

# SOURCES CONSULTED: Literature Review

- American Counseling Association <http://www.counseling.org/PublicPolicy/WhoAreLPCs.pdf>
- Board of Behavioral Sciences [http://www.bbs.ca.gov/pdf/publications/pcci\\_faq.pdf](http://www.bbs.ca.gov/pdf/publications/pcci_faq.pdf)
- Business and Professions Code, Chapter 16, Licensed Professional Clinical Counselors <http://www.leginfo.ca.gov>
- California Association for Licensed Professional Clinical Counselors (CALPCC) [www.calpcc.org](http://www.calpcc.org)
- California State University of Fullerton / College of Health & Human Development <http://hhd.fullerton.edu/counsel/degree.htm#MFT%20Licensure%20Preparation>
- Council for Accreditation of Counseling and Related Educational Programs (CACREP) <http://www.cacrep.org>
- Counselor License Resources <http://www.counselor-license.com/states/california-counselor-license.html>
- Dyeson, T.B., *Social Work Licensure: History and Definition*, Home Health Care Management & Practice / August 2004 / Volume 16, Number 5, 408-411  
<http://www.sagepub.com/jimenezstudy/articles/Dyeson.pdf>
- Epstein, J., *The Living History of the MFT License*, The Therapist / January-February 2013 <https://www.camft.org>
- Federal Register / Vol. 76, No. 248 / Tuesday, December 27, 2011 / Rules and Regulations <http://www.gpo.gov/fdsys/pkg/FR-2011-12-27/pdf/2011-33109.pdf>
- The National Certified Counselor / Volume 25, Number 3 / Fall 2009 <http://www.nbcc.org/Assets/Newsletter/Issues/fall09.pdf>
- University of Redlands / Masters of Arts in Clinical Mental Health Counseling <http://www.redlands.edu/academics/school-of-education/11789.aspx>
- University of San Diego / Masters of Arts in Counseling <http://www.sandiego.edu/soles/academics/ma-counseling-clinical-mental-health/>

# LACK OF CLARITY AND DELINEATION: LPCC ROLE AND SCOPE

Barrier	Recommendation
<p>LPCC is a new state license, therefore unknown and not familiar to CA's public health care system and diverse community-based MH/BH providers. <b>Lack of clarity and understanding</b> in LPCCs professional role, scope of practice, and scope of competency. <b>Lack of clarity and delineation</b> of LPCCs role, scope, and supervisory capacity in relation to LCSWs and LMFTs. EX: "Counselor" term perceived as "below" other licensed professionals</p>	<ul style="list-style-type: none"><li>- Collaboration between key groups that have the ability to educate, communicate, and disseminate information about LPCCs on a statewide level (e.g., BBS, CMHDA, CiMH, OSHPD, CALPCC)</li><li>- Use of multi-media approach to educate and communicate the public and diverse communities about LPCCs professional role, scope of practice, and scope of competency</li></ul>

# LACK OF CLARITY, UNDERSTANDING AND DELINEATION: LPCC ROLE AND SCOPE

Barrier	Recommendation
<p>County DMHs and MH contract providers would like to employ LPCCs but hesitant to do so due to lack of clarity, understanding &amp; delineation in LPCCs professional role, restriction in scope, and supervisory capability.</p> <p>EX1: Myth about LPCCs not within scope of practice to treat children</p> <p>EX2: Myth that LPCCs training and scope is not paralleled with LMFTs</p>	<ul style="list-style-type: none"> <li>- Public/community education on LPCCs (role, scope, supervisory capabilities) via a multi-media approach</li> <li>- Collaboration with County DMHs and MH providers in educating the local communities on LPCCs</li> </ul>
<p>Most County DMHs do not have LPCC job classifications/descriptions within their system. Lengthy and multi-layered approval process to develop new job classification/description.</p> <p>DRAFT</p>	<ul style="list-style-type: none"> <li>- Develop regional county ad hoc committee that includes HR staff to develop standardize LPCC job classification/description</li> <li>- Share classifications statewide that have been developed in counties (e.g., some counties have generic therapist classifications that do not require changes to include LPCCs)</li> </ul>

# SCOPE OF PRACTICE V. COMPETENCY

Barrier	Recommendation
<p><b>Restriction in legal scope of practice</b> is not commensurate with LPCCs scope of competency. The legal mandate to restrict LPCCs scope of practice inadvertently undermines/devalues LPCCs uniquely diverse contribution within the professional counseling arena</p>	<ul style="list-style-type: none"> <li>- Remove restriction in scope of practice to ensure parity in scope amongst all licensed discipline</li> <li>- CA to model after the other 49 states' LPCC licensing requirements</li> <li>- Enhance collaboration amongst the licensed disciplines, and their national affiliated associations</li> </ul>
<p><b>Restriction in supervisory capability:</b></p> <p>(1) Only LMFTs and LPCCs (if LPCC has met the 3 additional education requirements) can supervise PCC interns for the additional supervised 500 hours requirement, specifically working with couples, families and children). <b>May create hardship for employers who do not have LMFTs or LPCCs in their organizations to provide required supervision. May discourage employers to hire LPCCs</b></p> <p>(2) MFT interns can be supervised by LCSWs, and Licensed Psychologists, without restrictions (i.e., neither discipline is required to take the additional education requirements). MFT interns can be supervised by LPCCs as long as the LPCC has met the additional education requirements. <b>May discourage employers to hire LPCCs</b></p>	<ul style="list-style-type: none"> <li>-Remove restriction in LPCC supervision capability, which will enhance the diversity of perspectives and training within the psychotherapy and counseling fields</li> <li>- CA to model after the other 49 states' in LPCC supervisory capability</li> <li>- Enhance collaboration amongst the licensed disciplines, and their national affiliated associations</li> </ul>

# ADDITIONAL EDUCATION REQUIREMENT

Barrier	Recommendation
<p>Additional LPCC education requirements (e.g., additional MFT coursework and training required to see couples and families) may discourage potential students to pursue a career as a licensed professional clinical counselor. It may also create more confusion and bottle-neck challenges to an already resourced-strained regulatory body, as well as potentially perpetuate the shortage of qualified clinical supervisors within the MH/Behavioral health sectors.</p>	<ul style="list-style-type: none"><li>-Remove additional LPCC education requirements</li><li>- CA to model after the other 49 states in regards to LPCC education criteria</li></ul>

# BBS REGULATORY AND RESOURCE CHALLENGES

Barrier	Recommendation
<p><b>Lack of needed resources (e.g., staffing)</b> at BBS has delayed SB 788 Implementation (e.g., Grandparenting applications)</p>	<p>Add staff to support BBS’s efforts to expedite applications</p>
<p><b>Lack of needed resources</b> at BBS has delayed curricula approval process, subsequently delaying universities’ ability to implement LPCC counseling training programs</p>	<p>Add staff to support BBS’s efforts to expedite curricula approval process</p>
<p><b>Regulatory challenge:</b> to identify and track those who have met the required <i>500 hours supervised experience working with couples, families or children</i></p>	<p>Add staff to support BBS’s efforts to identify and track LPCC licensure requirement</p>
<p>Out of state applicants: how to determine most effective/efficient way to integrate CA degree requirements (e.g., CE vs. going through formal education process)</p>	<p>Add staff to support BBS’s efforts in this area</p>

# LIMITED PRACTICUM SITES AND SUPERVISORS

Barrier	Recommendation
Limited practicum sites for PCC interns	<ul style="list-style-type: none"><li>-Outreach to county DMHs and community providers, and provide information/education on LPCCs and the benefits of having PCC interns in their organizations/agencies</li><li>- Enhance collaboration between academic institutions and community-based providers</li></ul>
LPCCs are not yet able to supervise PCC interns due to newness of licensure (e.g., requires two years of the license to supervise). Unclear to the MH/Behavioral health providers as to who can supervise PCC interns	Use multi-media approach in educating the community about licensed professionals who can supervise PCC interns

# LIMITED CACREP ACCREDITATION

Barrier	Recommendation
<p>Only some Counseling Training Programs in CA are CACREP-accredited (most CSUs are; most private universities are not): may impact number of LPCCs who can work at DoD and VA programs, unless LPCC graduated from a CACREP-accredited university. <b>Adds to statewide workforce shortage of qualified MH professionals, particularly in working with Vets, those on active duty, and their families.</b></p>	<ul style="list-style-type: none"><li>-Encourage more universities to become CACREP-accredited</li><li>-Provide financial incentives to students who attend CACREP-accredited training programs.</li></ul>
<p>Online (often private) universities who offer counseling training programs that are CACREP-accredited are often more expensive than traditional state universities. Increased tuition can be an added hardship on the potential student, who may decide to go into another (non-MH/BH) educational and career pathway.</p>	<p>Develop scholarships, stipends and loan forgiveness/repayment targeted to LPCCs</p>

# COST OF EDUCATION

Barrier	Recommendation
<p><b>Cost of education not affordable</b> to many - especially with the increased education requirement of 60-units. This may significantly impact students' decision to go into the LPCC career pathway (e.g., 3 unit course costs \$3,600)</p>	<p>Develop financial incentive programs for LPCC students, such as scholarships, stipends, and loan forgiveness/repayment programs EX: MHSA funded stipends provided for MFT students within MFT Consortium</p>

# MASTER-LEVEL PROFESSIONAL COUNSELING TERMINAL DEGREE FOR LPCCs

Barrier	Recommendation
<p>CACREP will no longer be providing accreditation to doctoral programs in Counseling Psychology. This will create an educational gap for those faculty who desire to obtain a doctoral degree teaching in academia. Master-level counseling programs will therefore become the terminal degree for these individuals.</p>	<p>Collaborate with both the UC and CSU systems to develop doctoral programs to prepare counselor educators</p>

# Coordinated Health Workforce Pathway

K-12 Education

## Target Groups:

- Career hotlines workers
  - Deaf/HoH community
  - LPCCs from other states
  - Psychology clubs @ college campuses
  - Substance abuse counselors
  - Those working within Inpatient systems
  - Underserved ethnic groups
  - Under represented groups
  - Veterans
  - Older Students
  - Online Universities
- Case managers/MH workers/Lived Experience  
Jr. High/H.S. & Comm College Students  
Undergraduates: SW, Soc, Psych, Education

Master-Level Professional Counseling terminal degree for those interested in doctoral degree in teaching academia

Lack of financial incentives



Pre-Training

Health Professions Education

Workforce

Cultural Sensitivity and Responsiveness

Lack of information about LPCCs as a career choice

Cost of education not affordable

Limited practicum sites

Quality, Diversity, Health Workforce

Lack of clarity of LPCC role and scope of practice and competence  
Restriction on LPCC scope of practice & supervisory

THANK YOU! 😊

