

The following excerpt is reprinted from the California Board of Behavioral Sciences Statutes and Regulations Relating to the Practice of Professional Clinical Counseling. Published January 2026.
Available online at <https://www.bbs.ca.gov/pdf/publications/lawsregs.pdf>.

CALIFORNIA BOARD OF BEHAVIORAL SCIENCES STATUTES AND REGULATIONS RELATING TO THE PRACTICE OF PROFESSIONAL CLINICAL COUNSELING

CHAPTER 16. LICENSED PROFESSIONAL CLINICAL COUNSELORS

ARTICLE 1. REGULATION

§4999.11. LEGISLATIVE INTENT

In enacting this chapter, the Legislature recognizes that licensed professional clinical counselors practice a separate and distinct profession from the professions practiced by licensed marriage and family therapists and licensed clinical social workers. As such, the Legislature recognizes the need to appropriately test licensed marriage and family therapists and licensed clinical social workers seeking to become licensed professional clinical counselors on the difference in practice between the professions.

§4999.12. DEFINITIONS

For purposes of this chapter, the following terms have the following meanings:

- (a) "Board" means the Board of Behavioral Sciences.
- (b) "Accredited" means a school, college, or university accredited by a regional or national institutional accrediting agency that is recognized by the United States Department of Education.
- (c) "Approved" means a school, college, or university that possessed unconditional approval by the Bureau for Private Postsecondary Education at the time of the applicant's graduation from the school, college, or university.
- (d) "Applicant for licensure" means an unlicensed person who has completed the required education and required hours of supervised experience for licensure.
- (e) "Licensed professional clinical counselor" or "LPCC" means a person licensed under this chapter to practice professional clinical counseling, as defined in Section 4999.20.
- (f) "Associate" means an unlicensed person who meets the requirements of Section 4999.42 and is registered with the board.
- (g) "Clinical counselor trainee" means an unlicensed person who is currently enrolled in a master's or doctoral degree program, as specified in Section 4999.32 or 4999.33, that is designed to qualify the person for licensure, and who has completed no less than 12 semester units or 18 quarter units of coursework in any qualifying degree program.
- (h) "Supervisor" means an individual who meets all of the following requirements:
 - (1) Has held an active license for at least two years within the five-year period immediately preceding any supervision as either:
 - (A) A licensed professional clinical counselor, licensed marriage and family therapist, psychologist licensed pursuant to Chapter 6.6 (commencing with Section 2900), licensed clinical social worker, licensed educational psychologist, or equivalent out-of-state license. A licensed educational psychologist may only supervise the provision of educationally related mental health services that are consistent with the scope of practice of an educational psychologist, as specified in Section 4989.14.
 - (B) A physician and surgeon who is certified in psychiatry by the American Board of Psychiatry and Neurology, or an out-of-state licensed physician and surgeon who is certified in psychiatry by the American Board of Psychiatry and Neurology.
 - (2) For at least two years within the five-year period immediately preceding any supervision, has practiced psychotherapy, provided psychological counseling pursuant to paragraph (5) of subdivision (a) of Section 4989.14, or provided direct clinical supervision of psychotherapy performed by marriage and family therapist trainees, associate marriage and family therapists, associate professional clinical counselors, or associate clinical social workers. Supervision of psychotherapy performed by a social work intern or a professional clinical counselor trainee shall be accepted if the supervision provided is substantially equivalent to the supervision required for registrants.
 - (3) Has received training in supervision as specified in this chapter and by regulation.
 - (4) Has not provided therapeutic services to the supervisee.
 - (5) Has and maintains a current and active license that is not under suspension or probation as one of the following:
 - (A) A marriage and family therapist, professional clinical counselor, clinical social worker, or licensed educational psychologist issued by the board.
 - (B) A psychologist licensed pursuant to Chapter 6.6 (commencing with Section 2900).
 - (C) A physician and surgeon who is certified in psychiatry by the American Board of Psychiatry and Neurology.
 - (6) Is not a spouse, domestic partner, or relative of the supervisee.
 - (7) Does not currently have or previously had a personal, professional, or business relationship with the supervisee that undermines the authority or effectiveness of the supervision.
- (i) "Client centered advocacy" includes, but is not limited to, researching, identifying, and accessing resources, or other activities, related to obtaining or providing services and supports for clients or groups of clients receiving psychotherapy or counseling services.

- (j) “Advertising,” as appears in this chapter, includes, but is not limited to, any public communication as defined in subdivision (a) of Section 651, the issuance of any card, sign, or device to any person, or the causing, permitting, or allowing of any sign or marking on, or in, any building or structure, or in any newspaper, magazine, directory, or any printed matter whatsoever, with or without any limiting qualification. Signs within religious buildings or notices in bulletins from a religious organization mailed to a congregation are not advertising within the meaning of this chapter.
- (k) “Referral” means evaluating and identifying the needs of a client to determine whether it is advisable to refer the client to other specialists, informing the client of that judgment, and communicating that determination as requested or deemed appropriate to referral sources.
- (l) “Research” means a systematic effort to collect, analyze, and interpret quantitative and qualitative data that describes how social characteristics, behavior, emotion, cognitions, disabilities, mental disorders, and interpersonal transactions among individuals and organizations interact.
- (m) “Supervision” means responsibility for, and control of, the quality of mental health and related services provided by the supervisee. Consultation or peer discussion shall not be considered supervision and shall not qualify as supervised experience. Supervision includes, but is not limited to, all of the following:
 - (1) Ensuring the extent, kind, and quality of counseling performed is consistent with the education, training, and experience of the supervisee.
 - (2) Monitoring and evaluating the supervisee’s assessment, diagnosis, and treatment decisions and providing regular feedback.
 - (3) Monitoring and evaluating the supervisee’s ability to provide services at the site or sites where the supervisee is practicing and to the particular clientele being served.
 - (4) Monitoring and addressing clinical dynamics, including, but not limited to, countertransference-, intrapsychic-, interpersonal-, or trauma-related issues that may affect the supervisory or the practitioner-patient relationship.
 - (5) Ensuring the supervisee’s compliance with laws and regulations governing the practice of licensed professional clinical counseling.
 - (6) Reviewing the supervisee’s progress notes, process notes, and other patient treatment records, as deemed appropriate by the supervisor.
 - (7) With the client’s written consent, providing direct observation or review of audio or video recordings of the supervisee’s counseling or therapy, as deemed appropriate by the supervisor.
- (n) “Clinical setting” means any setting that meets both of the following requirements:
 - (1) Lawfully and regularly provides mental health counseling or psychotherapy.
 - (2) Provides oversight to ensure that the associate’s work meets the experience and supervision requirements set forth in this chapter and in regulation and is within the scope of practice of the profession.

§4999.12.5. REGISTRANT TITLE NAME CHANGE

- (a) (1) The title “professional clinical counselor intern” or “professional clinical counselor registered intern” is hereby renamed “associate professional clinical counselor” or “registered associate professional clinical counselor,” respectively. Any reference in any statute or regulation to a “professional clinical counselor” or “registered associate professional clinical counselor.”
- (2) Any reference in this chapter to the term “intern” means “associate.”
- (b) Nothing in this section shall be construed to expand or constrict the scope of practice of a person licensed or registered pursuant to this chapter.

§4999.13. ENGAGING IN PRACTICE

A person engages in the practice of professional clinical counseling when he or she performs or offers to perform or holds himself or herself out as able to perform this service for remuneration in any form, including donations.

ARTICLE 2. SCOPE OF PRACTICE

§4999.20. SCOPE OF PRACTICE

- (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, and the use, application, and integration of the coursework and training required by Sections 4999.32 and 4999.33. “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.
- (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.
- (3) “Professional clinical counseling” does not include the provision of clinical social work services.
- (b) “Counseling interventions and psychotherapeutic techniques” means the application of cognitive, affective, verbal or nonverbal, systemic or holistic counseling strategies that include principles of development, wellness, and maladjustment that reflect a pluralistic society. These interventions and techniques are specifically implemented in the context of a professional clinical counseling relationship and use a variety of counseling theories and approaches.

- (c) "Assessment" means selecting, administering, scoring, and interpreting tests, instruments, and other tools and methods designed to measure an individual's attitudes, abilities, aptitudes, achievements, interests, personal characteristics, disabilities, and mental, emotional, and behavioral concerns and development and the use of methods and techniques for understanding human behavior in relation to coping with, adapting to, or ameliorating changing life situations, as part of the counseling process. "Assessment" shall not include the use of projective techniques in the assessment of personality, individually administered intelligence tests, neuropsychological testing, or utilization of a battery of three or more tests to determine the presence of psychosis, dementia, amnesia, cognitive impairment, or criminal behavior.
- (d) Professional clinical counselors shall refer clients to other licensed health care professionals when they identify issues beyond their own scope of education, training, and experience.

ARTICLE 3. LICENSURE

§4999.30. NECESSITY OF LICENSE

Except as otherwise provided in this chapter, a person shall not practice or advertise the performance of professional clinical counseling services without a license issued by the board, and shall pay the license fee required by this chapter.

§4999.32. QUALIFYING DEGREE PROGRAM FOR LICENSURE OR REGISTRATION; GRADUATE STUDY BEGAN BEFORE AUGUST 1, 2012 AND COMPLETED ON OR BEFORE DECEMBER 31, 2018

- (a) This section shall apply to applicants for licensure or registration who began graduate study before August 1, 2012, and completed that study on or before December 31, 2018. Those applicants may alternatively qualify under paragraph (2) of subdivision (a) of Section 4999.33.
- (b) To qualify for licensure or registration, applicants shall possess a master's or doctoral degree that is counseling or psychotherapy in content and that meets the requirements of this section, obtained from an accredited or approved institution, as defined in Section 4999.12. For purposes of this subdivision, a degree is "counseling or psychotherapy in content" if it contains the supervised practicum or field study experience described in paragraph (3) of subdivision (c) and, except as provided in subdivision (d), the coursework in the core content areas listed in subparagraphs (A) to (I), inclusive, of paragraph (1) of subdivision (c).
- (c) The degree described in subdivision (b) shall be a single, integrated program that contains not less than 48 graduate semester units or 72 graduate quarter units of instruction, which shall, except as provided in subdivision (d), include all of the following:
 - (1) The equivalent of at least three semester units or four quarter units of graduate study in each of the following core content areas:
 - (A) Counseling and psychotherapeutic theories and techniques, including the counseling process in a multicultural society, an orientation to wellness and prevention, counseling theories to assist in selection of appropriate counseling interventions, models of counseling consistent with current professional research and practice, development of a personal model of counseling, and multidisciplinary responses to crises, emergencies, and disasters.
 - (B) Human growth and development across the lifespan, including normal and abnormal behavior and an understanding of developmental crises, disability, psychopathology, and situational and environmental factors that affect both normal and abnormal behavior.
 - (C) Career development theories and techniques, including career development decisionmaking models and interrelationships among and between work, family, and other life roles and factors, including the role of multicultural issues in career development.
 - (D) Group counseling theories and techniques, including principles of group dynamics, group process components, developmental stage theories, therapeutic factors of group work, group leadership styles and approaches, pertinent research and literature, group counseling methods, and evaluation of effectiveness.
 - (E) Assessment, appraisal, and testing of individuals, including basic concepts of standardized and nonstandardized testing and other assessment techniques, norm-referenced and criterion-referenced assessment, statistical concepts, social and cultural factors related to assessment and evaluation of individuals and groups, and ethical strategies for selecting, administering, and interpreting assessment instruments and techniques in counseling.
 - (F) Multicultural counseling theories and techniques, including counselors' roles in developing cultural self-awareness, identity development, promoting cultural social justice, individual and community strategies for working with and advocating for diverse populations, and counselors' roles in eliminating biases and prejudices, and processes of intentional and unintentional oppression and discrimination.
 - (G) Principles of the diagnostic process, including differential diagnosis, and the use of current diagnostic tools, such as the current edition of the Diagnostic and Statistical Manual of Mental Disorders, the impact of co-occurring substance use disorders or medical psychological disorders, established diagnostic criteria for mental or emotional disorders, and the treatment modalities and placement criteria within the continuum of care.
 - (H) Research and evaluation, including studies that provide an understanding of research methods, statistical analysis, the use of research to inform evidence-based practice, the importance of research in advancing the profession of counseling, and statistical methods used in conducting research, needs assessment, and program evaluation.
 - (I) Professional orientation, ethics, and law in counseling, including professional ethical standards and legal considerations, licensing law and process, regulatory laws that delineate the profession's scope of practice, counselor-client privilege, confidentiality, the client dangerous to self or others, treatment of minors with or without parental consent, relationship between practitioner's sense of self and human values, functions and relationships with other human service providers, strategies for collaboration, and advocacy processes needed to address institutional and social barriers that impede access, equity, and success for clients.

- (2) In addition to the course requirements described in paragraph (1), a minimum of 12 semester units or 18 quarter units of advanced coursework to develop knowledge of specific treatment issues, special populations, application of counseling constructs, assessment and treatment planning, clinical interventions, therapeutic relationships, psychopathology, or other clinical topics.
- (3) Not less than six semester units or nine quarter units of supervised practicum or field study experience that involves direct client contact in a clinical setting that provides a range of professional clinical counseling experience, including the following:
 - (A) Applied psychotherapeutic techniques.
 - (B) Assessment.
 - (C) Diagnosis.
 - (D) Prognosis.
 - (E) Treatment planning.
 - (F) Treatment.
 - (G) Issues of development, adjustment, and maladjustment.
 - (H) Health and wellness promotion.
 - (I) Other recognized counseling interventions.
 - (J) A minimum of 150 hours of face-to-face supervised clinical experience counseling individuals, families, or groups.
- (d) (1) (A) An applicant whose degree is deficient in no more than two of the required areas of study listed in subparagraphs (A) to (I), inclusive, of paragraph (1) of subdivision (c) may satisfy those deficiencies by successfully completing postmaster's or postdoctoral degree coursework at an accredited or approved institution, as defined in Section 4999.12.
- (B) Notwithstanding subparagraph (A), an applicant shall not be deficient in the required areas of study specified in subparagraph (E) or (G) of paragraph (1) of subdivision (c) unless the applicant meets one of the following criteria and remediates the deficiency:
 - (i) The application for licensure was received by the board on or before August 31, 2020.
 - (ii) The application for registration was received by the board on or before August 31, 2020, and the registration was subsequently issued by the board.
- (2) Coursework taken to meet deficiencies in the required areas of study listed in subparagraphs (A) to (I), inclusive, of paragraph (1) of subdivision (c) shall be the equivalent of three semester units or four quarter units of study.
- (3) The board shall make the final determination as to whether a degree meets all requirements, including, but not limited to, course requirements, regardless of accreditation.
- (e) In addition to the degree described in this section, or as part of that degree, an applicant shall complete the following coursework or training prior to registration as an associate:
 - (1) A minimum of 15 contact hours of instruction in alcoholism and other chemical substance abuse dependency, as specified by regulation.
 - (2) A minimum of 10 contact hours of training or coursework in human sexuality as specified in Section 25, and any regulations promulgated thereunder.
 - (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 seven contact hours of training or coursework in child abuse assessment and reporting as specified in Section 28 and any regulations adopted thereunder.
 - (6) A minimum of 18 contact hours of instruction in California law and professional ethics for professional clinical counselors that includes, but is not limited to, instruction in advertising, scope of practice, scope of competence, treatment of minors, confidentiality, dangerous clients, psychotherapist-client privilege, recordkeeping, client access to records, dual relationships, child abuse, elder and dependent adult abuse, online therapy, insurance reimbursement, civil liability, disciplinary actions and unprofessional conduct, ethics complaints and ethical standards, termination of therapy, standards of care, relevant family law, therapist disclosures to clients, and state and federal laws related to confidentiality of patient health information. When coursework in a master's or doctoral degree program is acquired to satisfy this requirement, it shall be considered as part of the 48 semester unit or 72 quarter unit requirement in subdivision (c).
 - (7) A minimum of 10 contact hours of instruction in aging and long-term care, which may include, but is not limited to, the biological, social, and psychological aspects of aging. On and after January 1, 2012, this coursework shall include instruction on the assessment and reporting of, as well as treatment related to, elder and dependent adult abuse and neglect.
 - (8) A minimum of 15 contact hours of instruction in crisis or trauma counseling, including multidisciplinary responses to crises, emergencies, or disasters, and brief, intermediate, and long-term approaches.

§4999.46. SUPERVISED POST-MASTER'S EXPERIENCE

- (a) Except as provided in subdivision (b), all applicants shall have an active associate registration with the board in order to gain postdegree hours of supervised experience.
- (b) (1) Postdegree hours of experience gained before the issuance of an associate registration shall be credited toward licensure if all of the following apply:
 - (A) The registration applicant applies for the associate registration and the board receives the application within 90 days of the granting of the qualifying master's degree or doctoral degree.

- (B) For applicants completing graduate study on or after January 1, 2020, the experience is obtained at a workplace that, prior to the registration applicant gaining supervised experience hours, requires completed Live Scan fingerprinting. The applicant shall provide the board with a copy of that completed State of California "Request for Live Scan Service" form with their application for licensure.
- (C) The board subsequently grants the associate registration.
- (2) The applicant shall not be employed or volunteer in a private practice or a professional corporation until they have been issued an associate registration by the board.
- (c) Supervised experience that is obtained for the purposes of qualifying for licensure shall be related to the practice of professional clinical counseling and comply with the following:
 - (1) A minimum of 3,000 postdegree hours performed over a period of not less than two years (104 weeks).
 - (2) Not more than 40 hours in any seven consecutive days.
 - (3) Not less than 1,750 hours of direct clinical counseling with individuals, groups, couples, or families using a variety of psychotherapeutic techniques and recognized counseling interventions.
 - (4) A maximum of 1,250 hours of nonclinical practice, consisting of direct supervisor contact, administering and evaluating psychological tests, writing clinical reports, writing progress or process notes, client centered advocacy, and workshops, seminars, training sessions, or conferences directly related to professional clinical counseling that have been approved by the applicant's supervisor.
 - (5) A maximum of 1,200 hours gained under the supervision of a licensed educational psychologist providing educationally related mental health services that are consistent with the scope of practice of an educational psychologist, as specified in Section 4989.14.
- (d) An individual who submits an application for licensure between January 1, 2016, and December 31, 2020, may alternatively qualify under the experience requirements of this section that were in place on January 1, 2015.
- (e) Experience hours shall not have been gained more than six years prior to the date the application for licensure was received by the board.

§4999.46.1. RESPONSIBILITIES OF ASSOCIATES

- (a) An associate or applicant for licensure shall be under the supervision of a supervisor at all times.
- (b) An associate shall do both of the following:
 - (1) Inform each client, before performing any professional services, that the associate is unlicensed and under supervision.
 - (2) Renew the registration a maximum of five times. A registration shall not be renewed or reinstated beyond six years from the last day of the month during which it was issued, regardless of whether it has been revoked.
- (c) When no further renewals are possible, an applicant may apply for and obtain a subsequent associate registration number if the applicant meets the educational requirements for a subsequent associate registration number and has passed the California law and ethics examination. An applicant issued a subsequent associate registration number shall not be employed or volunteer in a private practice.

§4999.46.2. DIRECT SUPERVISOR CONTACT

- (a) Except for experience gained by attending workshops, seminars, training sessions, or conferences, as described in paragraph (4) of subdivision (c) of Section 4999.46, direct supervisor contact shall occur as follows:
 - (1) Supervision shall include at least one hour of direct supervisor contact in each week for which experience is credited in each work setting.
 - (2) A trainee shall receive an average of at least one hour of direct supervisor contact for every five hours of direct clinical counseling performed each week in each setting.
 - (3) An associate gaining experience who performs more than 10 hours of direct clinical counseling in a week in any setting shall receive at least one additional hour of direct supervisor contact for that setting. For experience gained after January 1, 2009, no more than six hours of supervision, whether individual supervision, triadic supervision, or group supervision, shall be credited during any single week.
 - (4) Of the 104 weeks of required supervision, 52 weeks shall be individual supervision, triadic supervision, or a combination of both.
- (b) (1) For purposes of this chapter, "one hour of direct supervisor contact" means any of the following:
 - (A) Individual supervision, which means one hour of face-to-face contact between one supervisor and one person receiving supervision for providing clinical mental health services.
 - (B) Triadic supervision, which means one hour of face-to-face contact between one supervisor and two persons receiving supervision for providing clinical mental health services.
 - (C) Group supervision, which means two hours of face-to-face contact between one supervisor and no more than eight persons receiving supervision for providing clinical mental health services. Segments of group supervision may be split into no less than one continuous hour. The supervisor shall ensure that the amount and degree of supervision is appropriate for each person in the group.
- (2) For purposes of this subdivision, "face-to-face contact" means in-person contact, contact via two-way, real-time videoconferencing, or some combination of these.
- (c) The supervisor shall be responsible for ensuring compliance with federal and state laws relating to confidentiality of patient health information.
- (d) (1) Within 60 days of the commencement of supervision, a supervisor shall conduct a meeting with the supervisee during which the supervisor shall assess the appropriateness of allowing the supervisee to receive supervision via two-way, real-time videoconferencing. This assessment of appropriateness shall include, but is not limited to, the abilities of the supervisee, the preferences of both the supervisee and supervisor, and the privacy of the locations of the supervisee and supervisor while supervision is conducted.

- (2) The supervisor shall document the results of the assessment made pursuant to paragraph (1), and shall not utilize supervision via two-way, real-time videoconferencing if their assessment finds it is not appropriate.
- (e) Direct supervisor contact shall occur within the same week as the hours claimed.
- (f) Alternative supervision may be arranged during a supervisor's vacation or sick leave if the alternative supervision meets the requirements in this chapter.
- (g) Notwithstanding any other law, once the required number of experience hours are gained, associates and applicants for licensure shall receive a minimum of one hour of direct supervisor contact per week for each practice setting in which direct clinical counseling is performed. Once the required number of experience hours are gained, further supervision for nonclinical practice, as defined in paragraph (4) of subdivision (c) of Section 4999.46, shall be at the supervisor's discretion.

§4999.50. ISSUANCE OF LICENSE; REQUIREMENTS

- (a) The board may issue a professional clinical counselor license to any person who meets all of the following requirements:
 - (1) He or she has received a master's or doctoral degree described in Section 4999.32 or 4999.33, as applicable.
 - (2) He or she has completed at least 3,000 hours of supervised experience in the practice of professional clinical counseling.
 - (3) He or she provides evidence of a passing score, as determined by the board, on the examinations designated in Section 4999.53.
- (b) An applicant for licensure who has satisfied the requirements of this chapter shall be issued a license as a professional clinical counselor.

ARTICLE 4. PRACTICE REQUIREMENTS

§4999.70. DISPLAY OF LICENSE

A licensee shall display his or her license in a conspicuous place in his or her primary place of practice.

§4999.72. FICTITIOUS BUSINESS NAME

Any licensed professional clinical counselor who owns a business using a fictitious business name shall not use any name that is false, misleading, or deceptive, and shall inform the patient, prior to the commencement of treatment, of the name and license designation of the owner or owners of the practice.

§4999.74. COUNSELING RELATIONSHIP AND PROCESS; DISCLOSURE REQUIREMENT

Licensed professional clinical counselors shall provide to each client accurate information about the counseling relationship and the counseling process.

§4999.75. CLIENT RECORDS: RETENTION

- (a) A licensed professional clinical counselor shall retain a client's or patient's health service records for a minimum of seven years from the date therapy is terminated. If the client or patient is a minor, the client's or patient's health service records shall be retained for a minimum of seven years from the date the client or patient reaches 18 years of age. Health service records may be retained in either a written or an electronic format.
- (b) This section shall apply only to the records of a client or patient whose therapy is terminated on or after January 1, 2015.

§4999.76. CONTINUING EDUCATION REQUIREMENT

- (a) (1) Except as provided in subdivision (d), the board shall not renew any license pursuant to this chapter unless the applicant certifies to the board, on a form prescribed by the board, that the applicant has completed not less than 36 hours of approved continuing education in or relevant to the field of professional clinical counseling in the preceding two years, as determined by the board.
- (2) The board shall not renew any registration pursuant to this chapter unless the registrant certifies under penalty of perjury to the board, and on a form prescribed by the board, that they have completed not less than three hours of continuing education in the subject of California law and ethics during the preceding year.
- (b) (1) In determining its continuing education requirements, the board shall consider including a course in menopausal mental health.
- (2) In determining its continuing education requirements, the board shall consider including a course in maternal mental health.
- (c) The board shall have the right to audit the records of any applicant to verify the completion of the continuing education requirement. Applicants shall maintain records of completed continuing education coursework for a minimum of two years and shall make these records available to the board for auditing purposes upon request.
- (d) The board may establish exceptions from the continuing education requirement of this section for good cause, as defined by the board.
- (e) The continuing education shall be obtained from one of the following sources:
 - (1) A school, college, or university that is accredited or approved, as defined in Section 4999.12. Nothing in this paragraph shall be construed as requiring coursework to be offered as part of a regular degree program.
 - (2) Other continuing education providers as specified by the board by regulation.
- (f) The board shall establish, by regulation, a procedure for identifying acceptable providers of continuing education courses, and all providers of continuing education, as described in paragraphs (1) and (2) of subdivision (e), shall adhere to procedures established by the board. The board may revoke or deny the right of a provider to offer continuing education coursework pursuant to this section for failure to comply with this section or any regulation adopted pursuant to this section.
- (g) Training, education, and coursework by approved providers shall incorporate one or more of the following:
 - (1) Aspects of the discipline that are fundamental to the understanding or the practice of professional clinical counseling.
 - (2) Significant recent developments in the discipline of professional clinical counseling.
 - (3) Aspects of other disciplines that enhance the understanding or the practice of professional clinical counseling.

- (h) A system of continuing education for licensed professional clinical counselors shall include courses directly related to the diagnosis, assessment, and treatment of the client population being served.
- (i) The continuing education requirements of this section shall fully comply with the guidelines for mandatory continuing education established by the Department of Consumer Affairs pursuant to Section 166.

ARTICLE 5. ENFORCEMENT

§4999.90. UNPROFESSIONAL CONDUCT

The board may refuse to issue any registration or license, or may suspend or revoke the registration or license of any associate or licensed professional clinical counselor, if the applicant, licensee, or registrant has been guilty of unprofessional conduct. Unprofessional conduct includes, but is not limited to, the following:

- (a) The conviction of a crime substantially related to the qualifications, functions, or duties of a licensee or registrant under this chapter. The record of conviction shall be conclusive evidence only of the fact that the conviction occurred. The board may inquire into the circumstances surrounding the commission of the crime in order to fix the degree of discipline or to determine if the conviction is substantially related to the qualifications, functions, or duties of a licensee or registrant under this chapter. A conviction has the same meaning as defined in Section 7.5. The board may order any license or registration suspended or revoked, or may decline to issue a license or registration when the time for appeal has elapsed, or the judgment of conviction has been affirmed on appeal, or, when an order granting probation is made suspending the imposition of sentence. All actions pursuant to this subdivision shall be taken pursuant to Division 1.5 (commencing with Section 475).
- (b) Securing a license or registration by fraud, deceit, or misrepresentation on any application for licensure or registration submitted to the board, whether engaged in by an applicant for a license or registration, or by a licensee in support of any application for licensure or registration.
- (c) Administering to themselves any controlled substance or using any of the dangerous drugs specified in Section 4022, or any alcoholic beverage to the extent, or in a manner, as to be dangerous or injurious to the person applying for a registration or license or holding a registration or license under this chapter, or to any other person, or to the public, or, to the extent that the use impairs the ability of the person applying for or holding a registration or license to conduct with safety to the public the practice authorized by the registration or license. The board shall deny an application for a registration or license or revoke the license or registration of any person, other than one who is licensed as a physician and surgeon, who uses or offers to use drugs in the course of performing licensed professional clinical counseling services.
- (d) Gross negligence or incompetence in the performance of licensed professional clinical counseling services.
- (e) Violating, attempting to violate, or conspiring to violate any of the provisions of this chapter or any regulation adopted by the board.
- (f) Misrepresentation as to the type or status of a license or registration held by the person, or otherwise misrepresenting or permitting misrepresentation of the licensee's or registrant's education, professional qualifications, or professional affiliations to any person or entity.
- (g) Impersonation of another by any licensee, registrant, or applicant for a license or registration, or, in the case of a licensee or registrant, allowing any other person to use the licensee's or registrant's or registration.
- (h) Aiding or abetting, or employing, directly or indirectly, any unlicensed or unregistered person to engage in conduct for which a license or registration is required under this chapter.
- (i) Intentionally or recklessly causing physical or emotional harm to any client.
- (j) The commission of any dishonest, corrupt, or fraudulent act substantially related to the qualifications, functions, or duties of a licensee or registrant.
- (k) Engaging in sexual relations with a client, or a former client within two years following termination of therapy, soliciting sexual relations with a client, or committing an act of sexual abuse, or sexual misconduct with a client, or committing an act punishable as a sexually related crime, if that act or solicitation is substantially related to the qualifications, functions, or duties of a licensed professional clinical counselor.
- (l) Performing, or holding oneself out as being able to perform, or offering to perform, or permitting any trainee, applicant, or registrant under supervision to perform, any professional services beyond the scope of the license authorized by this chapter.
- (m) Failure to maintain confidentiality, except as otherwise required or permitted by law, of all information that has been received from a client in confidence during the course of treatment and all information about the client which is obtained from tests or other means.
- (n) Prior to the commencement of treatment, failing to disclose to the client or prospective client the fee to be charged for the professional services, or the basis upon which that fee will be computed.
- (o) Paying, accepting, or soliciting any consideration, compensation, or remuneration, whether monetary or otherwise, for the referral of professional clients. All consideration, compensation, or remuneration shall be in relation to professional clinical counseling services actually provided by the licensee. This subdivision does not prevent collaboration among two or more licensees in a case or cases. However, no fee shall be charged for that collaboration, except when disclosure of the fee has been made in compliance with subdivision (n).
- (p) Advertising in a manner that is false, fraudulent, misleading, or deceptive, as defined in Section 651.
- (q) Reproduction or description in public, or in any publication subject to general public distribution, of any psychological test or other assessment device, the value of which depends in whole or in part on the naivete of the subject, in ways that might invalidate the test or device.
- (r) Any conduct in the supervision of a registered associate, trainee, or applicant by any licensee that violates this chapter or any rules or regulations adopted by the board.
- (s) Performing or holding oneself out as being able to perform mental health services beyond the scope of one's competence, as established by one's education, training, or experience. This subdivision shall not be construed to expand the scope of the license authorized by this chapter.

- (t) Permitting a trainee, associate, or applicant under one's supervision or control to perform, or permitting the trainee, associate, or applicant to hold themselves out as competent to perform, mental health services beyond the trainee's, associate's, or applicant's level of education, training, or experience.
- (u) The violation of any statute or regulation governing the gaining and supervision of experience required by this chapter.
- (v) Failure to keep records consistent with sound clinical judgment, the standards of the profession, and the nature of the services being rendered.
- (w) Failure to comply with the child abuse reporting requirements of Section 11166 of the Penal Code.
- (x) Failing to comply with the elder and dependent adult abuse reporting requirements of Section 15630 of the Welfare and Institutions Code.
- (y) Repeated acts of negligence.
- (z) (1) Engaging in an act described in Section 261, 286, 287, 289, or former Section 288a, of the Penal Code with a minor or an act described in Section 288 or 288.5 of the Penal Code regardless of whether the act occurred prior to or after the time the registration or license was issued by the board. An act described in this subdivision occurring prior to the effective date of this subdivision shall constitute unprofessional conduct and shall subject the licensee to refusal, suspension, or revocation of a license under this section.
- (2) The Legislature hereby finds and declares that protection of the public, and in particular minors, from sexual misconduct by a licensee is a compelling governmental interest, and that the ability to suspend or revoke a license for sexual conduct with a minor occurring prior to the effective date of this section is equally important to protecting the public as is the ability to refuse a license for sexual conduct with a minor occurring prior to the effective date of this section.
- (aa) Engaging in any conduct that subverts or attempts to subvert any licensing examination or the administration of an examination as described in Section 123.
- (ab) Revocation, suspension, or restriction by the board of a license, certificate, or registration to practice as a professional clinical counselor, clinical social worker, educational psychologist, or marriage and family therapist.
- (ac) Failure to comply with the procedures set forth in Section 2290.5 when delivering health care via telehealth.
- (ad) Willful violation of Chapter 1 (commencing with Section 123100) of Part 1 of Division 106 of the Health and Safety Code.

§4999.91. DENIAL OF APPLICATION OR SUSPENSION OR REVOCATION OF LICENSE OR REGISTRATION; GROUNDS

The board may deny any application, or may suspend or revoke any license or registration issued under this chapter, for any of the following:

- (a) Denial of licensure, revocation, suspension, restriction, or any other disciplinary action imposed by this state or another state or territory of the United States, or by any other governmental agency, on a license, certificate, or registration to practice professional clinical counseling or any other healing art shall constitute grounds for disciplinary action for unprofessional conduct. A certified copy of the disciplinary action decision or judgment shall be conclusive evidence of that action.
- (b) Revocation, suspension, or restriction by the board of a license, certificate, or registration to practice clinical social work, professional clinical counseling, marriage and family therapy, or educational psychology shall also constitute grounds for disciplinary action for unprofessional conduct under this chapter.