

Texas State Board of Social Worker Examiners

Board Meeting Agenda for April 24, 2026, 10 a.m.

The April 24, 2026 meeting of the Texas State Board of Social Worker Examiners will be held by videoconference call, as authorized under Texas Government Code §551.127. One or more board members may appear at the scheduled meeting via videoconference call or in-person, and the presiding member will be physically present at 1801 Congress Avenue, Suite 7.102, Austin, Texas 78701. In the event of internet connectivity problems, the physical meeting location will be moved to 1801 Congress Avenue, Suite 7.301, Austin, Texas 78701. These alternate locations will be open to the public, but seating is limited to first come, first served. Due to the size of these alternate meeting rooms, public seating will be limited by their relative occupancy ratings.

In lieu of attending in person, members of the public are encouraged to access and participate virtually in this meeting by entering the URL address <https://us02web.zoom.us/j/81574136864> into their web browser. Telephone access numbers and additional videoconference call access information can be found in the attached addendum. An electronic copy of the agenda and meeting materials will be made available at www.bhec.texas.gov prior to the meeting. A recording of the meeting will be made available on the Council's YouTube channel after the meeting is adjourned. To obtain a copy of the recording, please contact the Council's public information officer at open.records@bhec.texas.gov.

For members of the public who wish to give public comment, after the meeting convenes and the public comment item is reached on the agenda, the presiding member will allow those who are attending in person to give public comment first and then ask those joining by computer to use the "raise hand" feature to indicate who would like to make a public comment. Those individuals who raise their hand will then be allowed to unmute and give public comment. Once all of the individuals with raised hands have been given an opportunity to make public comment, the individuals appearing by telephone will be asked whether they would like to make a public comment. (Those attending by phone use *6 to unmute.) Please note that public comment is not intended for a discussion or a question-and-answer session with the board. Additionally, when making a public comment, please identify yourself and whether you are speaking individually or on behalf of an organization. All public comments will be limited to 3 minutes, unless otherwise directed by the presiding officer. In lieu of providing public comment during the meeting, you may submit written public comments via <https://forms.office.com/r/599j3WJDsp>. Only those written public comments received by 5 p.m. on the last business day prior to the meeting will be submitted to the board members for their consideration. No written comments received will be read aloud during the meeting.

Please note: The board may request input during the meeting from any interested parties or members of the public during its discussion of an agenda item.

If you are planning to attend this meeting and need auxiliary aids, services or materials in an alternate format, please contact the Council at least 5 working days before the meeting date. Phone: (512) 305-7700, TTY/RELAY TEXAS: 711 or 1-800-RELAY TX.

The board may go into Executive Session to deliberate any item listed on this agenda if authorized under Texas Open Meetings Act, Government Code, Ch. 551.

The board may discuss and take action concerning any matter on the agenda and in a different order from what it appears herein.

SW BOARD MEETING AGENDA FOR APRIL 24, 2026, 10 A.M.

1. Call to order. *Includes roll call and excusal of absences if necessary.*
2. Welcome and announcements. *Includes items of public interest and concern.*
3. Public Comment. *Comments will be received from individuals attending in person, by virtual meeting, and by phone.*

INFORMATIONAL ITEMS – NO ACTIONS WILL BE TAKEN.

4. Reports on general matters.

- a. Report from the Board Chair. *May include discussion of current challenges and accomplishments; lawsuits; interaction with stakeholders, state officials, and staff; committee appointments and functions; workload of Board members; conferences; and general information regarding the routine functioning of the Board.*
- b. Report from the Board's Delegates to the Texas Behavioral Health Executive Council. *May include discussion regarding the activities of the Executive Council, including recently proposed or adopted rules.*
- c. Report from the Board Administrator and other staff. *May include discussion of operations, organization, and staffing; workload processing and statistical information; customer service accomplishments, inquiries, and challenges; media, legislative, and stakeholder contacts and concerns; special projects; and general information regarding the routine functioning of the program.*
- d. Reports from Committees.
 1. Report from Ethics Committee Chair Mr. Brumley.
 2. Report from Licensing Standards and Qualification Committee Chair Ms. Delapeña.
 3. Report from Professional Development Committee Chair Mr. Trevino.
 4. Report from Rules Committee Chair Ms. Andrade.

MATTERS FOR POTENTIAL BOARD ACTION

5. Licensing matters. *May include discussion of licensing regulations and operations as they pertain to application processing.*
 - a. Board review and possible action on appeal of license applications, including Crystal Kinmon, Benito Lugo, Jimmy McGuire, and Alora Swayzer.
6. Examination matters. *May include reports from the Board's jurisprudence exam vendor and discussion of exam content and format.*
 - a. Board review and possible action related to changes in the Board's jurisprudence exam.
7. Enforcement matters. *May include discussion of quarterly enforcement activities, as well as discussion of agreed orders executed or cases dismissed by the Council's Executive Director.*
 - a. Board review and possible action regarding contested cases from State Office of Administrative Hearings (SOAH).
 - b. Board review and possible action regarding agreed orders to be executed by the Board.
8. Rulemaking. *May include discussion and referral of potential rule changes to the Rules Committee, as well as discussion of the status of rule proposals sent to the Executive Council.*
 - a. Adoption of Rules: Discussion and possible action to recommend adoption of new rules, amendments, or repeal of rules in Title 22 of the Texas Administrative Code:
 - b. Proposal of Rules: Discussion and possible action to recommend proposal of new rules, amendments, or repeal of rules in Title 22 of the Texas Administrative Code: §781.313 *Competency and the Required Basis for Professional Judgments.*
9. Recommendations for agenda items for the next meeting.
10. Adjournment.

CONTACT: Sarah Faszholz, Board Administrator
Texas State Board of Social Worker Examiners

Visit BHEC's Contact Us webpage at <https://www.bhec.texas.gov/contact-us/index.html>, launch the Email-Us webform, and select "Administration and Executive Leadership" from the drop-down menu to send an email.

Addendum: Additional Videoconference and Telephone Conference Call Information

When: Apr 24, 2026 10:00 AM Central Time (US and Canada)

Topic: Texas State Board of Social Worker Examiners' April 24, 2026 meeting

Join from PC, Mac, iPad, or Android: <https://us02web.zoom.us/j/81574136864>

Phone one-tap:

+13462487799,,81574136864# US (Houston)

+12532158782,,81574136864# US (Tacoma)

Join via audio:

+1 346 248 7799 US (Houston)

+1 253 215 8782 US (Tacoma)

+1 669 444 9171 US

+1 669 900 9128 US (San Jose)

+1 719 359 4580 US

+1 253 205 0468 US

+1 301 715 8592 US (Washington DC)

+1 305 224 1968 US

+1 309 205 3325 US

+1 312 626 6799 US (Chicago)

+1 360 209 5623 US

+1 386 347 5053 US

+1 507 473 4847 US

+1 564 217 2000 US

+1 646 558 8656 US (New York)

+1 646 931 3860 US

+1 689 278 1000 US

Webinar ID: 815 7413 6864

International numbers available: <https://us02web.zoom.us/j/81574136864>

Summary of Council's Activities

A. Affecting Title 22 of the Texas Administrative Code (22 TAC), the Council's rulemaking actions taken at its February 17, 2026, meeting, included adopted rules, published in the March 13, 2026, *Texas Register* and effective **March 18, 2026** (updated [Consolidated Rulebooks](#) were posted March 25, 2026):

1. [§781.102](#) *Definitions* – updates language related to supervisors to remove terminology that suggests the Council approves individual supervisory relationships.
2. [§781.302](#) *The Practice of Social Work* – updates rule references to clinical and non-clinical supervision plans.
3. [§781.303](#) *General Standards of Practice* – requires a licensee who provides services to a client, who concurrently receives services from another provider, to seek consent from the client to contact the other provider and to strive to establish a collaborative relationship with that provider and clarifies a licensee must report any knowledge of unlicensed practice.
4. [§781.322](#) *Child Custody Evaluations* – conforms the rule to the statutory changes made to §§107.104 and 107.112 of the Family Code by H.B. 2340 from the 89th Legislature, Regular Session (2025).
5. [§781.401](#) *Qualifications for Licensure* – aligns the rule with statutory language, uses more plain language to describe licensure requirements, replacing the phrase "Council-approved supervisor" with the more accurate term "qualified supervisor," and removes language related to the independent practice recognition specialty, which is proposed to be included in a new rule.
6. [§781.402](#) [[Proposed Repeal](#)] *Clinical Supervision for LCSW and Non-Clinical Supervision for Independent Practice Recognition*
7. [§781.402](#) *Types of Supervision* – consolidates existing rule language regarding the types of supervision provided by social work licensees and makes non-substantive edits, using more plain, direct language.
8. [§781.403](#) [[Proposed Repeal](#)] *Independent Practice Recognition (Non-Clinical)*
9. [§781.403](#) *Supervision Process* – consolidates existing rule language regarding the supervision process and requirements supervisors must perform; clarifies the type of records a supervisor must keep, including a detailed log of supervision sessions and a plan for the custody of records in the event a supervisor ceases practice; requires a supervisee to notify supervisors of any pending complaints against the supervisee and to share a copy of any remediation plan with all current and future supervisors; and makes non-substantive edits to use more plain, direct language.
10. [§781.404](#) *Recognition as a Supervisor* – consolidates existing rule language regarding the requirements to hold supervisor status, clarifies that a supervisor must hold a social work license issued by the Council, adds requirements for actions a licensee must take if supervisor status is revoked or expires, and removes language related to types of supervision and the supervision process, which is proposed to move to other consolidated rule sections.
11. [§781.405](#) [[Proposed Repeal](#)] *Application for Licensure*
12. [§781.405](#) *Clinical Supervision for Licensed Clinical Social Worker* – consolidates existing rule language related to accruing clinical supervised experience and applying to reclassify LMSW to LCSW, including what information must be submitted to the Council with the application; clarifies how an LMSW may continue to perform clinical social work services after completing supervised experience requirements; and makes non-substantive edits to use more plain, direct language.
13. [§781.406](#) [[Proposed Repeal](#)] *Required Documentation of Qualifications for Licensure*

14. [§781.406](#) *Independent Practice Recognition* – consolidates existing rule language related to the independent practice recognition (IPR) specialty, including requirements to qualify for the specialty designation and qualification to supervise the experience required to earn the specialty; clarifies that an LBSW or LMSW under supervision toward the IPR designation may own and operation a non-clinical practice under that supervision; and makes non-substantive edits to use more plain, direct language.
 15. [§781.407](#) *Prohibited Independent Practice* – consolidates existing rule language related to prohibitions on independent social work practice, including that an LMSW working towards an LCSW may not own or operate a private practice to provide clinical social work services; expands the guidelines the Council will rely on; and makes clarifying edits to better guide a determining whether independent practice is occurring.
 16. [§781.419](#) *Licensing of Military Service Members, Military Veterans, and Military Spouses* – aligns the Council's rules with changes made to Texas Occupations Code Chapter 55 by the 89th Legislature, regarding licensing of military service members, veterans, and spouses.
 17. [§781.805](#) *Schedule of Sanctions* – corresponds to rule changes in Chapter 781.
 18. [§882.60](#) *Special Provisions Applying to Military Service Members, Veterans, and Spouses* – aligns the Council's rules with changes made to Texas Occupations Code Chapter 55 by the 89th Legislature regarding licensing of military service members, veterans, and spouses.
 19. [§882.61](#) *Special Licensing Provisions for Service Members and Military Spouses* – aligns the Council's rules with changes made to Texas Occupations Code Chapter 55 by the 89th Legislature regarding licensing of military service members, veterans, and spouses.
 20. [§884.11](#) *Informal Conferences* – streamlines the enforcement process and better aligns it with other agency rules.
 21. [§885.1](#) *Executive Council Fees* – removes a prior fee schedule that has not been in effect for over two years; adds a fee for requesting an 11" by 14" wall printing of a license; and conforms language to other rule changes that rename Licensed Specialists in School Psychology to School Psychologist.
- B. There were no proposed rules considered at the Council's February 17, 2026, meeting.
- C. Other Council updates include but may not be limited to the following:
1. Year-to-Date Financial Report
 2. Report on enforcement operations
 3. Operating Budget for Fiscal Year 2026
 4. Review of new and updated agency policies
 5. President's December 11, 2025 Executive Order Ensuring a National Policy Framework for Artificial Intelligence

Texas Behavioral Health Executive Council
Operating Budget
As of December 31, 2025

Program	Licensing	Enforcement	Indirect	TexasOnline	Totals
Appropriations - GR	2,598,502	2,145,273	239,975	180,405	5,164,155
Excess Collected Revenue		8,800			8,800
Appropriation Transfers In (Salary Adjustments)	19,260	19,260			38,521
Interagency Transfers out (HPC)	-149,040	-149,040			-298,080
Interagency Transfers out					0
Interagency Transfers in					0
eStrategy Exam Revenue	317,919				317,919
eStrategy Exam Appropriation Receipts	48,360				48,360
eStrategy Exam Revenue Credit Card Fees				10,929	10,929
Lapsed Funds					0
Total Receipts	2,835,001	2,024,293	239,975	191,334	5,290,604
Expenditures					
7002 Sal-Full Time Class	617,755	579,348	43,787		-1,240,890
7003 Sal-Part Time Class					0
7017 One Time Merit Increase	4,600				-4,600
7022 Longevity	8,360	7,300	360		-16,020
7023 Lump Sum Termination					0
7024 Termination - Death Benefit					0
7033 Employee Retirement Cont.	8,408	6,698			-15,107
7040 Additional Payroll Ret. Cont.	3,089	2,897	219		-6,204
7042 Payroll Health Insurance 1%	5,427	4,915	438		-10,780
7050 Benefit Repl Pay					0
7101 Travel-In St-Pub Trans	1,719	1,719			-3,438
7102 Travel-In State Mileage	1,697	1,697			-3,393
7104 Travel-In State Actual Overnight	255	255			-511
7105 Travel-In State Incident	755	755			-1,509
7106 Travel-In State Meals	779	779			-1,557
7107 Travel-In State Non-Overnight					0
7108 Travel-In State Meals					0
7110 Bd Member Meals	1,926	1,926			-3,851
7111 Travel - OOS-Public Trans	1,919	1,841			-3,760
7114 Travel - OOS Actual Expense	414	414			-828
7115 Travel - OOS Incidental	280	281			-561
7116 Travel - OOS Meals/Lodging	1,110	1,110			-2,219
7124 Travel-In State Twin Engine Aircraft					0
7130 Travel - OOS Board Member Meals	384	384			-768
7135 Travel-Hotel Occ.Tax	7	7			-13
7136 Travel-Hotel Occ.Tax-Galveston					0
7201 Membership Fees			575		-575
7203 Reg Fees Empl Trng	125	125	2,355		-2,605
7204 Insurance Premiums					0
7210 Fees and Other Charges					0
7211 Awards					0
7219 eStrategy Exam Credit Card fees				10,804	-10,804
7219 Texas.gov Subscription fees				60,320	-60,320
7223 Court Costs					0
7253 Prof Serv-Other	2,400	1,050			-3,450
7257 Legal Services - SOAH					0
7267 Pers. Prop. Repair-Comp					0
7273 Printing Forms/Bus Cds	1,173				-1,173
7275 IT Services					0
7276 Elec Comm - Internet	25	25	509		-558
7285 DataCenter Costs	5,772	5,771			-11,543

7286	Freight Delivery					0
7291	Postal Services					0
7295	Investigation Expenses					0
7299	eStrategy Exams					0
7299	Purc. Contracted Svc	314,270		1,613		-315,883
7300	Consumables	4,123	1,408			-5,530
7303	Subscriptions					0
7334	Furn & Equip-expensed	311	311			-622
7335	Computer Parts-expensed					0
7367	Pers. Prop. - Maint					0
7374	Pers. Prop. - Equipment					0
7377	Pers. Prop. Comp Equip - expensed					0
7378	Pers. Prop. Comp Equip - controlled					0
7380	Intangible - Computer Software					0
7382	Pers. Prop. - Books/Ref Mat.					0
7406	Rental - Equipment	598	598			-1,196
7442	Rental of Motor Vehicles					0
7503	Telecomm-Long Distance		136			-136
7470	Rental-Storage/Space			90		-90
7510	Telcom Parts/ Supplies					0
7526	Waste Disposal/Shredding					0
7806	Interest on Late Pmts					0
7947	SORM Pmt					0
7961	Telecomm-Cap Compl	2,265	2,265			-4,530
7962	Cap. Cplx. Transfers	2,231	2,231			-4,462
7984	Unemployment			3,536		-3,536
Total Expense		992,174	626,244	53,482	71,124	1,743,023
Cash Available (Encumbrances)		1,842,827	1,398,050	186,493	120,210	3,547,581
Percent of Budget Spent		35%	31%	22%	37%	33%
Percent of Budget Remaining		65%	69%	78%	63%	67%

Percent of FY 2025 Remaining

66%

<u>Board</u>		<u>2023</u>		<u>2024</u>		<u>2025</u>		<u>2026 YTD</u>		<u>FY 26 Travel Budget</u>
BHEC	\$	2,026	\$	1,278	\$	4,314	\$	2,249	\$	5,000
LPC	\$	3,761	\$	4,460	\$	9,104	\$	2,852	\$	10,000
MFT	\$	1,410	\$	6,487	\$	10,491	\$	4,124	\$	10,000
PSYCH	\$	6,886	\$	9,730	\$	4,709	\$	6,700	\$	10,000
SW	\$	2,494	\$	5,138	\$	2,448	\$	1,800	\$	10,000
Totals	\$	16,577	\$	27,093	\$	31,066	\$	17,725	\$	45,000

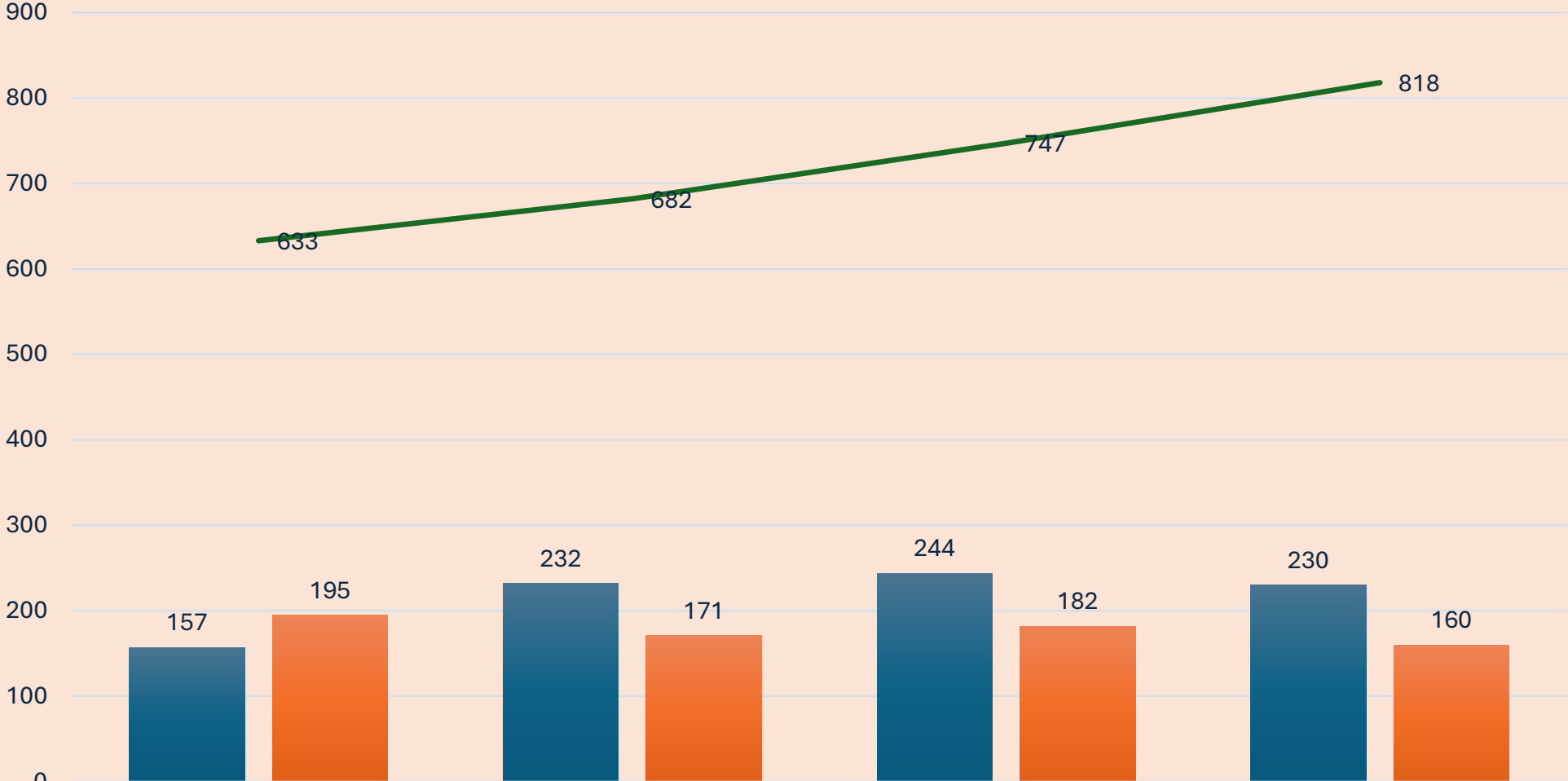
Remaining FY26 Budget

\$	2,751	
		Does not include 1/30/26
\$	7,148	meeting
\$	5,876	
\$	3,300	
\$	8,200	
\$	27,275	

FY 26 Q1 Enforcement Report

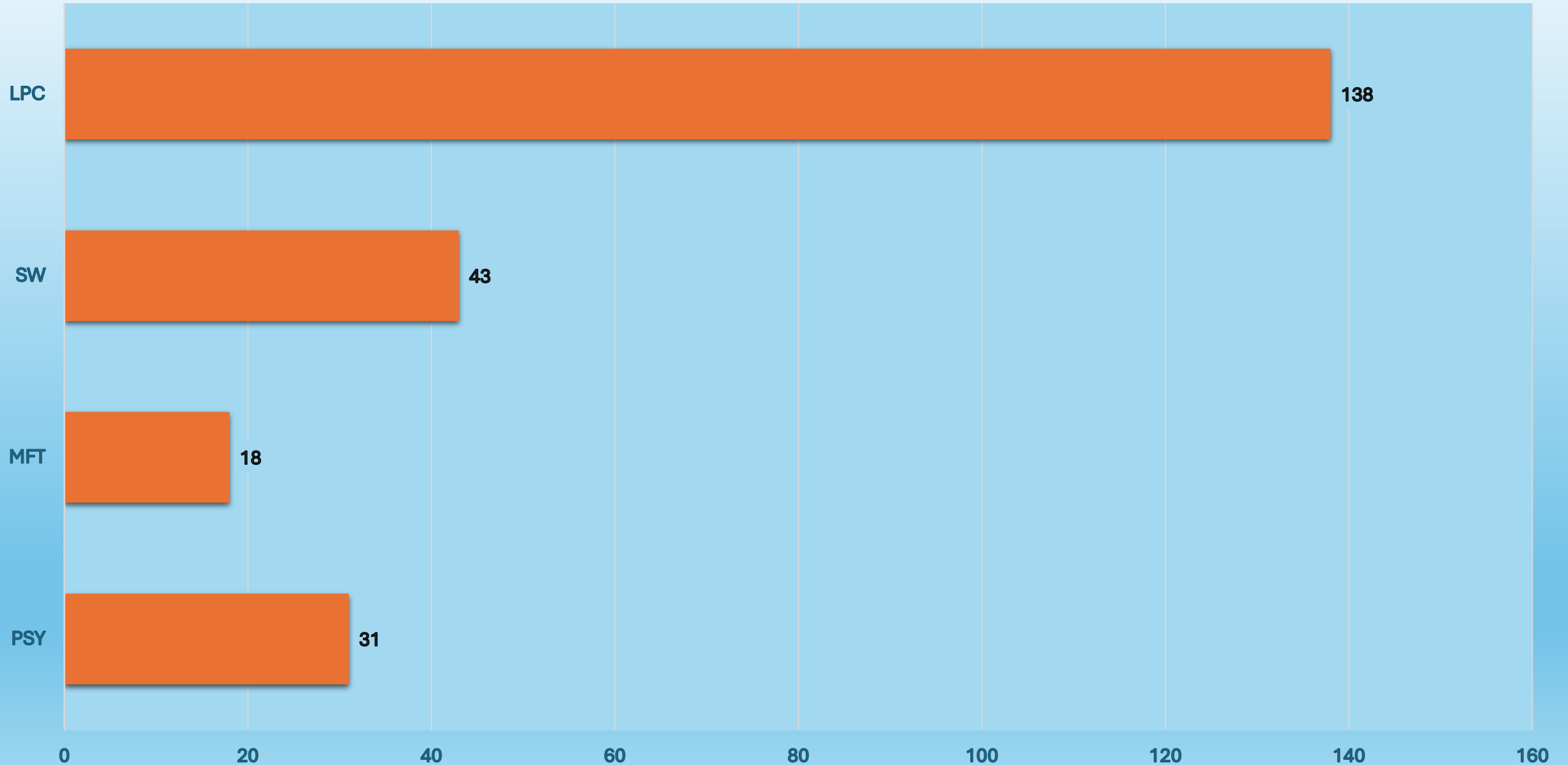
(September 1, 2025- November 31, 2025)

Complaints: Received, Resolved & Pending

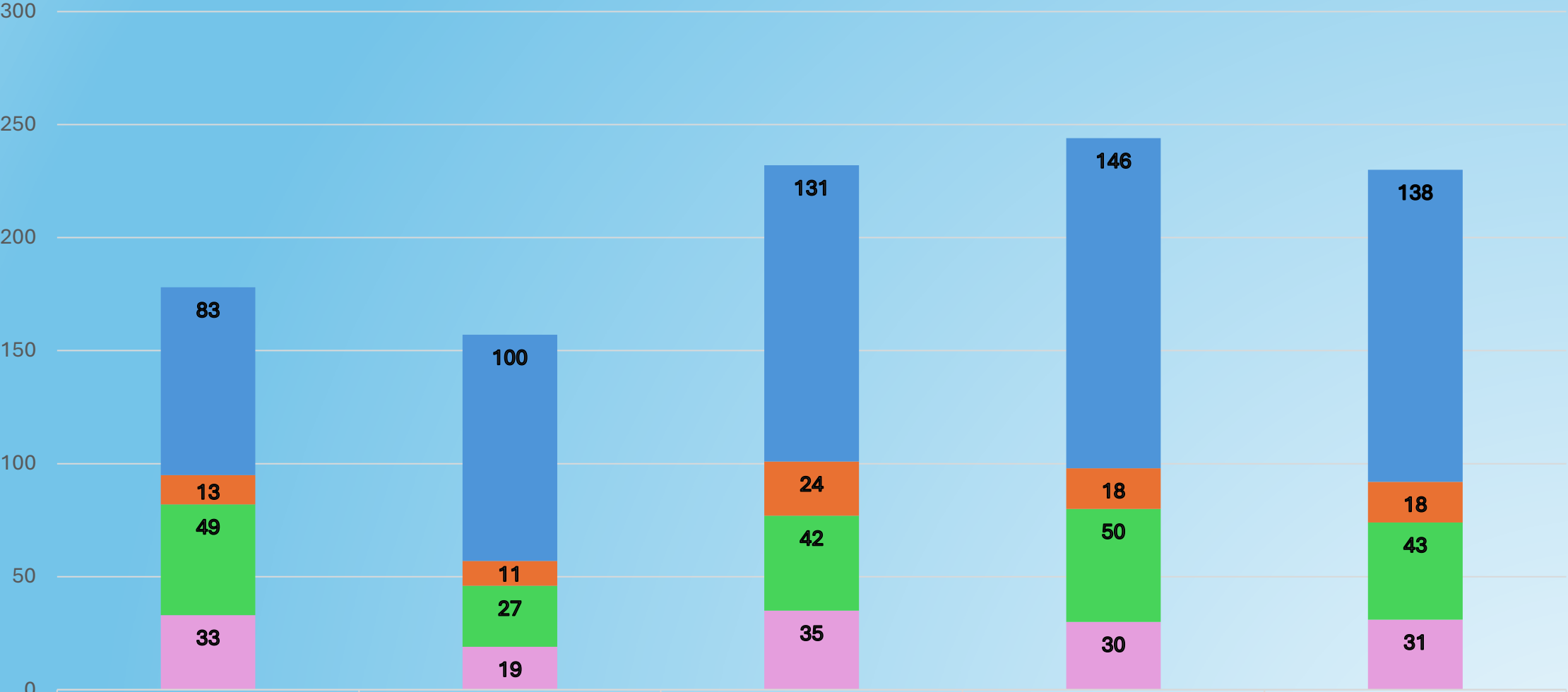


New Complaints Received	157	232	244	230
Complaints Resolved	195	171	182	160
Total Pending Complaints	633	682	747	818

New Complaints Received by Board During Q1

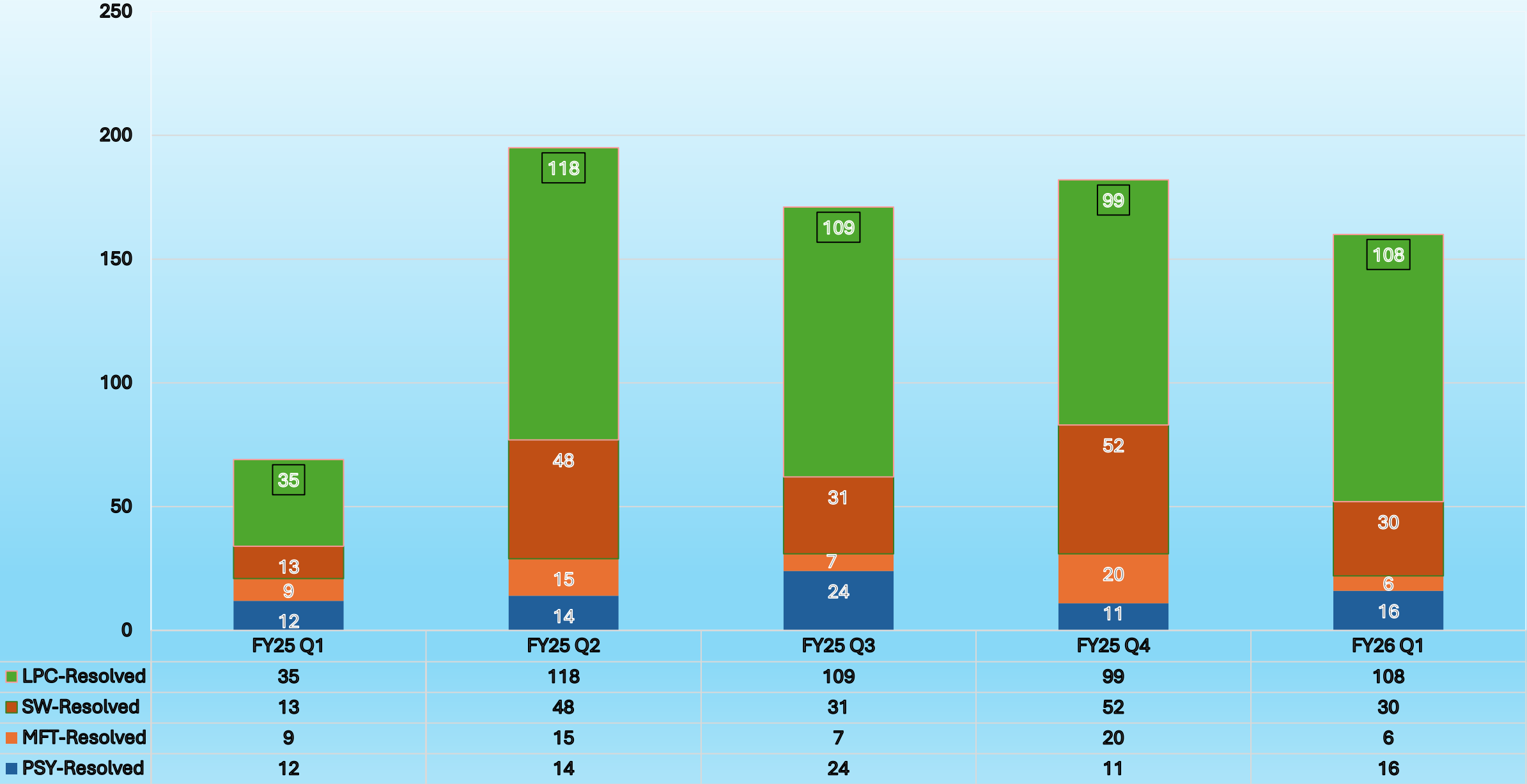


Complaints Received by Board

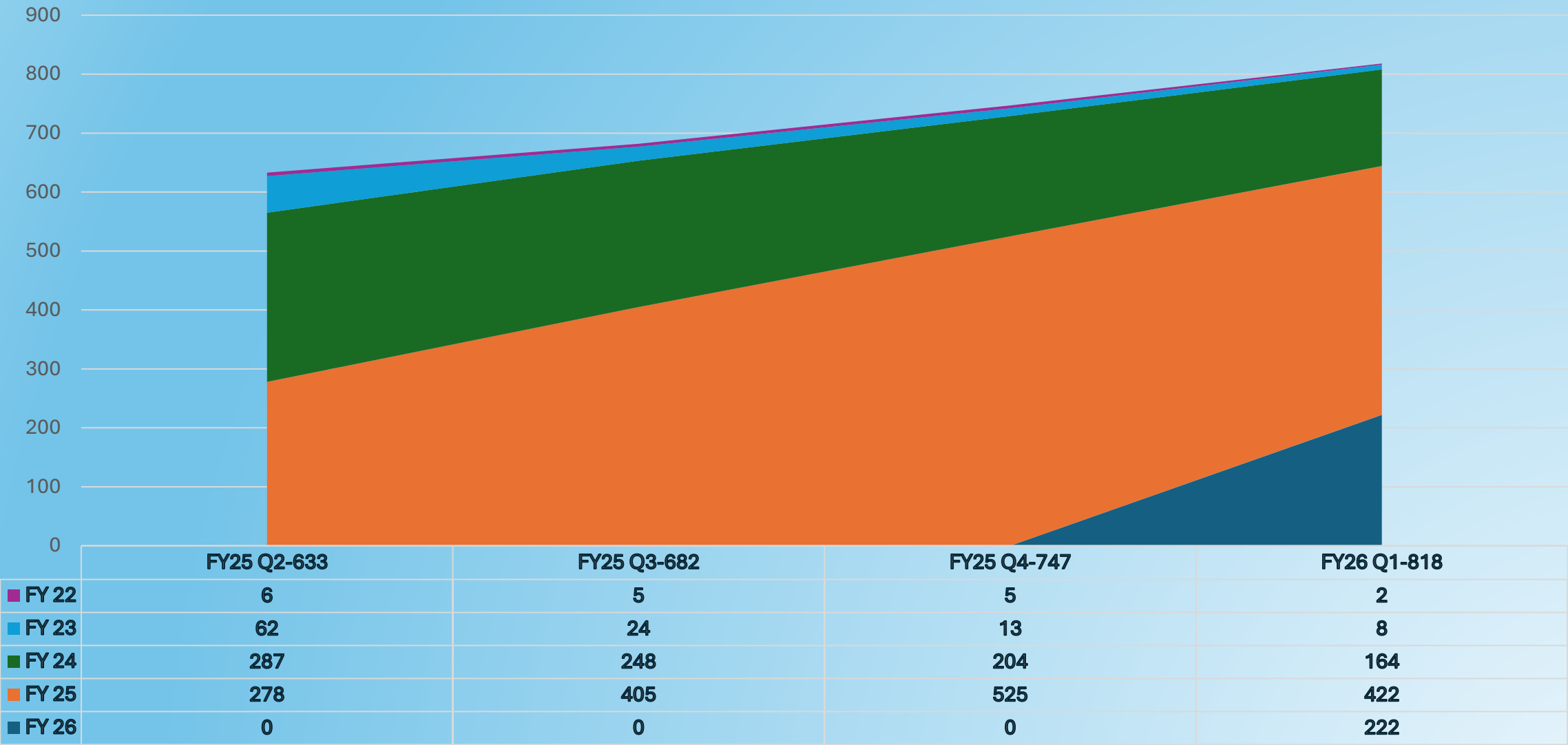


	FY25 Q1	FY25 Q2	FY25 Q3	FY25 Q4	FY26 Q1
LPC-Received	83	100	131	146	138
MFT-Received	13	11	24	18	18
SW-Received	49	27	42	50	43
PSY-Received	33	19	35	30	31

Complaints Resolved by Board

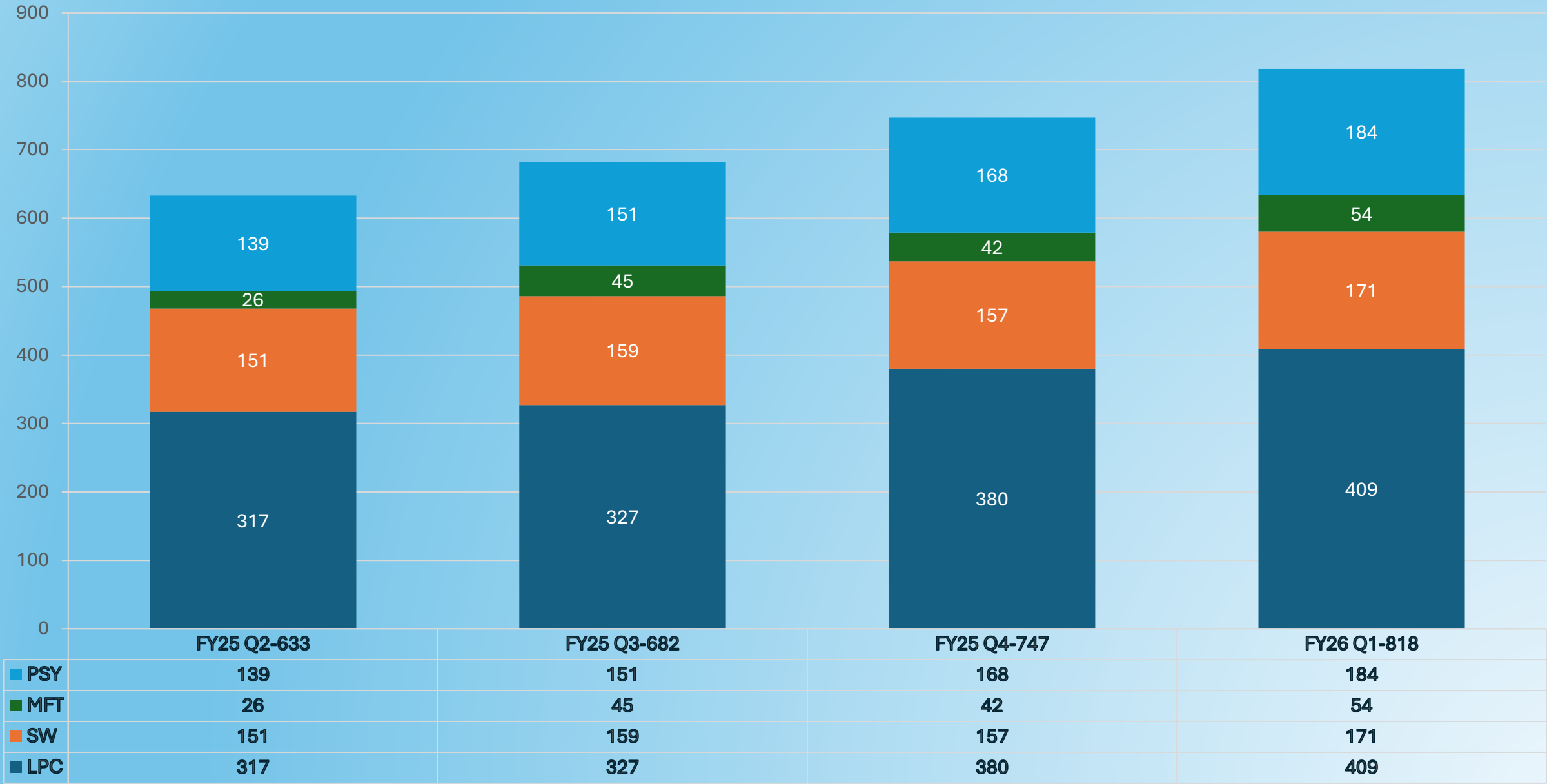


Pending Complaints by Fiscal Year

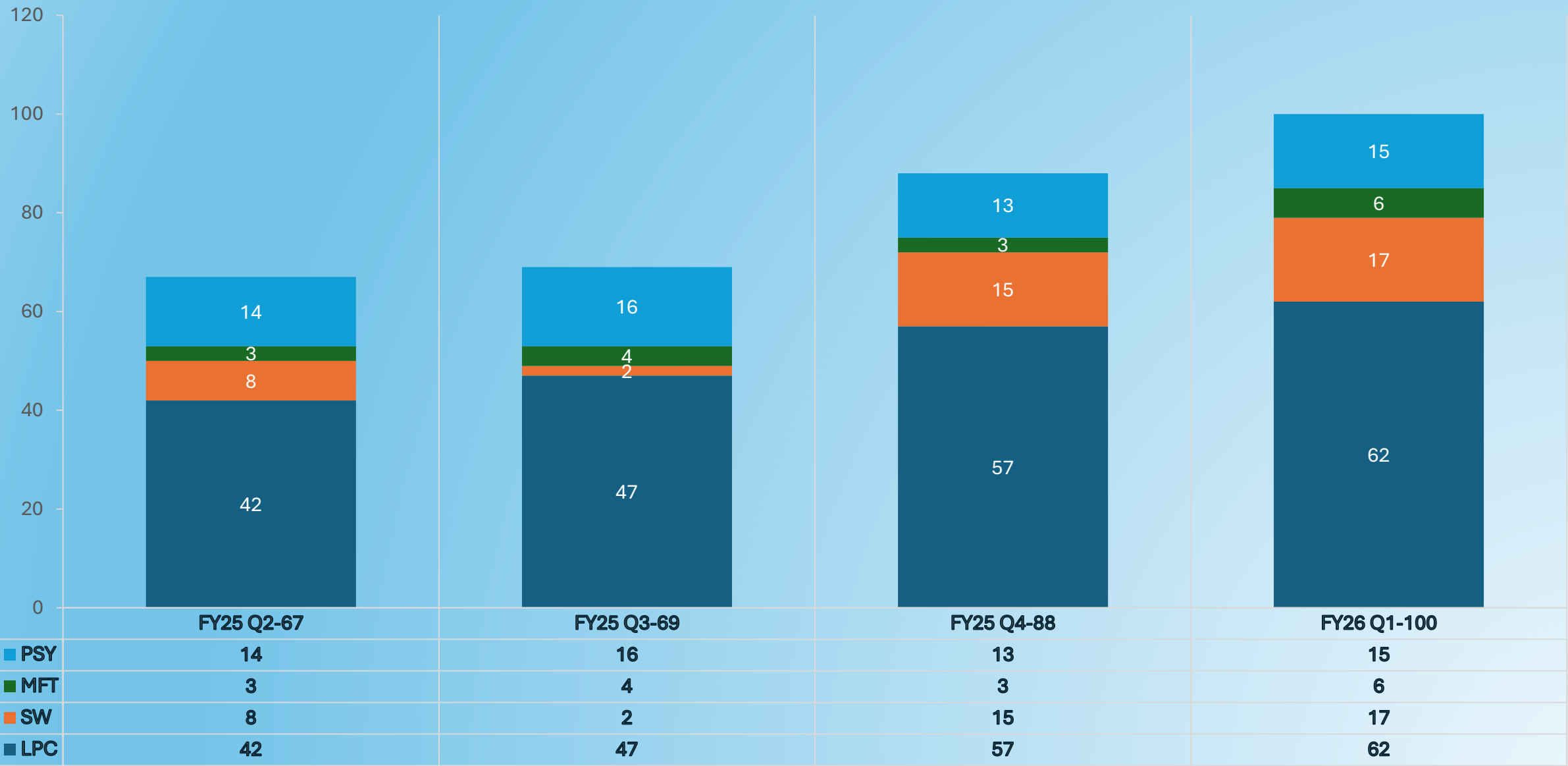


FY 26 FY 25 FY 24 FY 23 FY 22

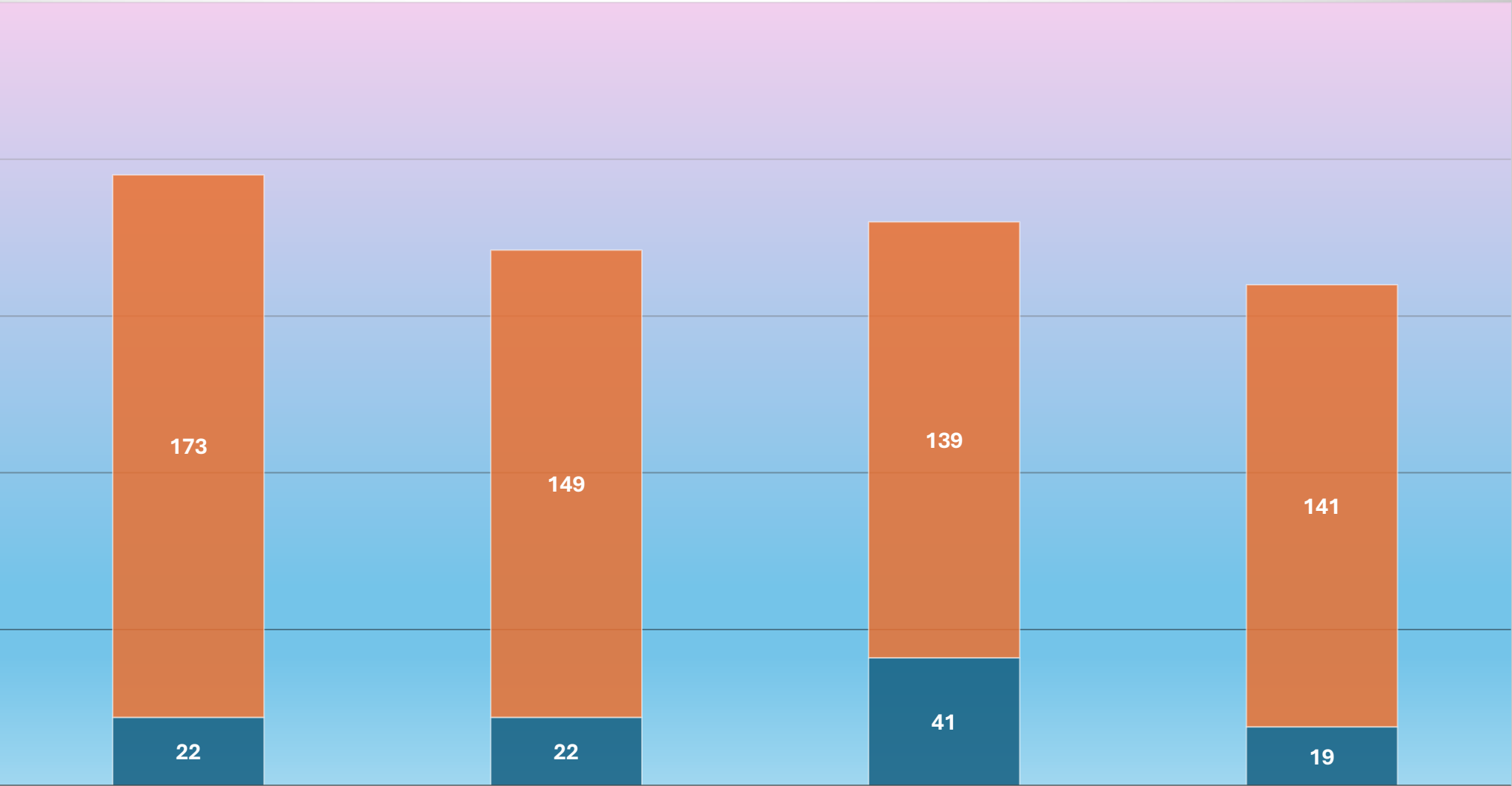
PENDING COMPLAINTS BY BOARD



PRIORITY 1 COMPLAINTS (IMMINENT PHYSICAL HARM AND SEXUAL MISCONDUCT)

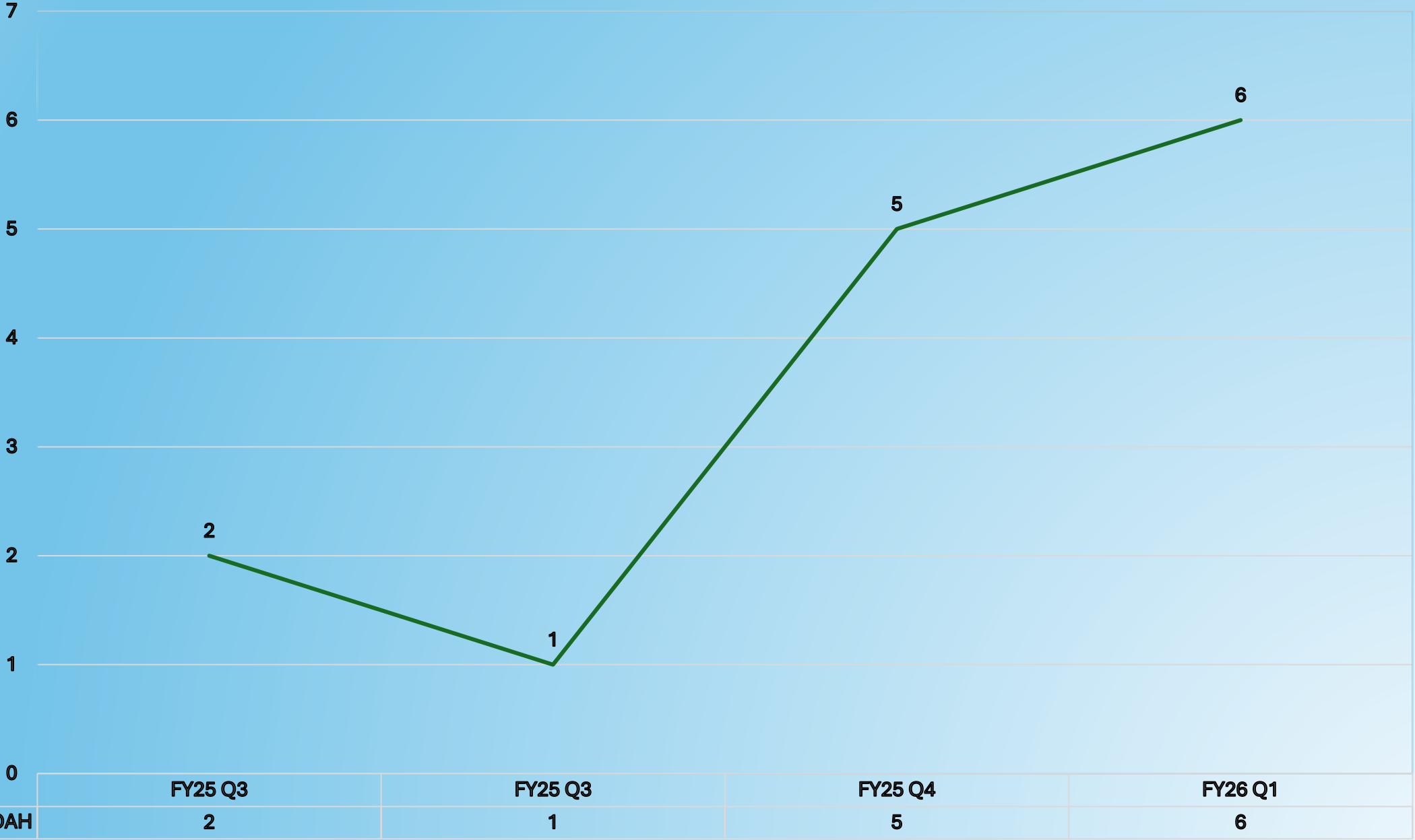


Resolved Complaints by Quarter

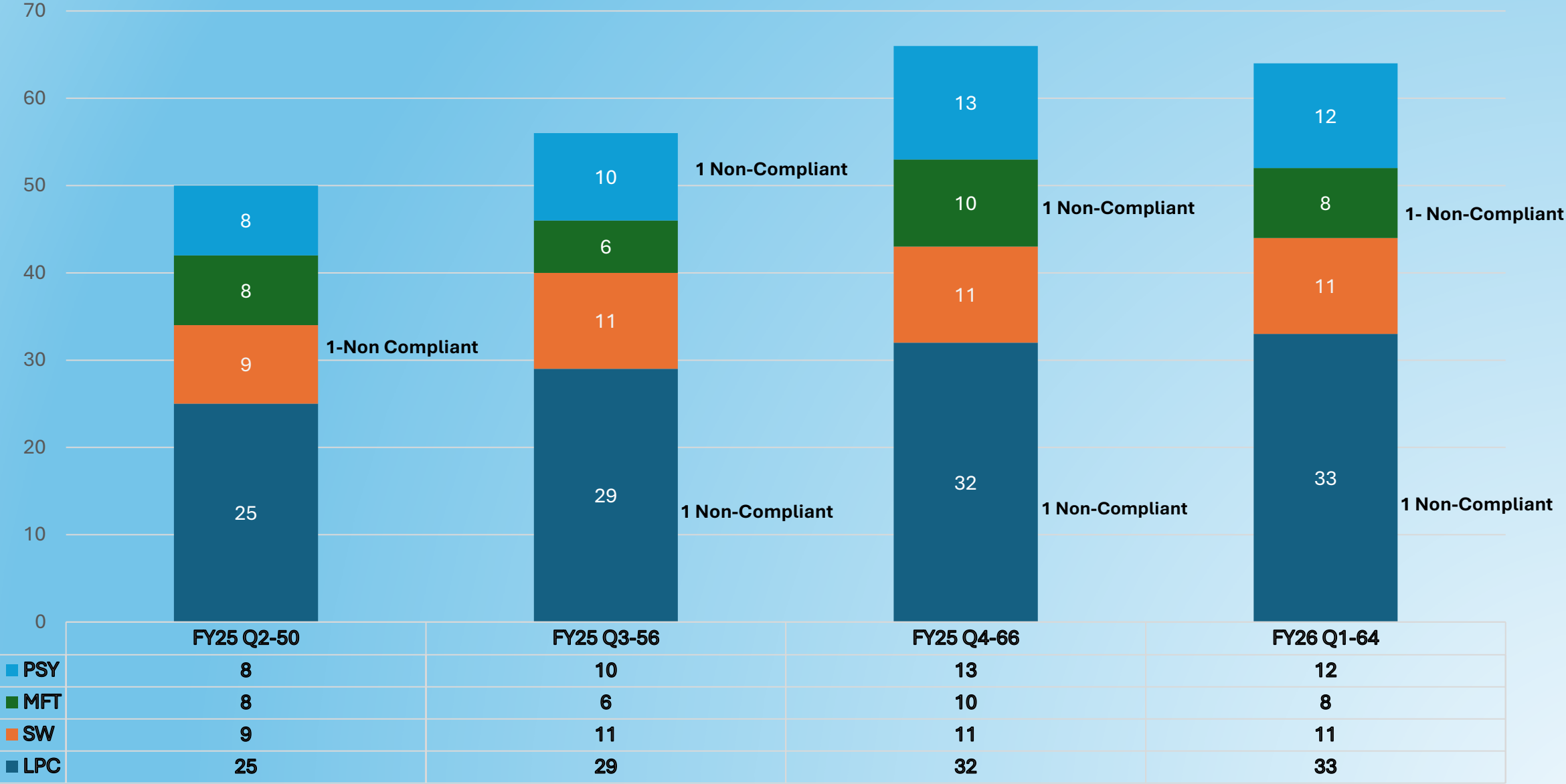


	FY25 Q2-195	FY25 Q3-171	FY25 Q4-180	FY26 Q1-160
By Dismissal	173	149	139	141
By Disciplinary Order	22	22	41	19

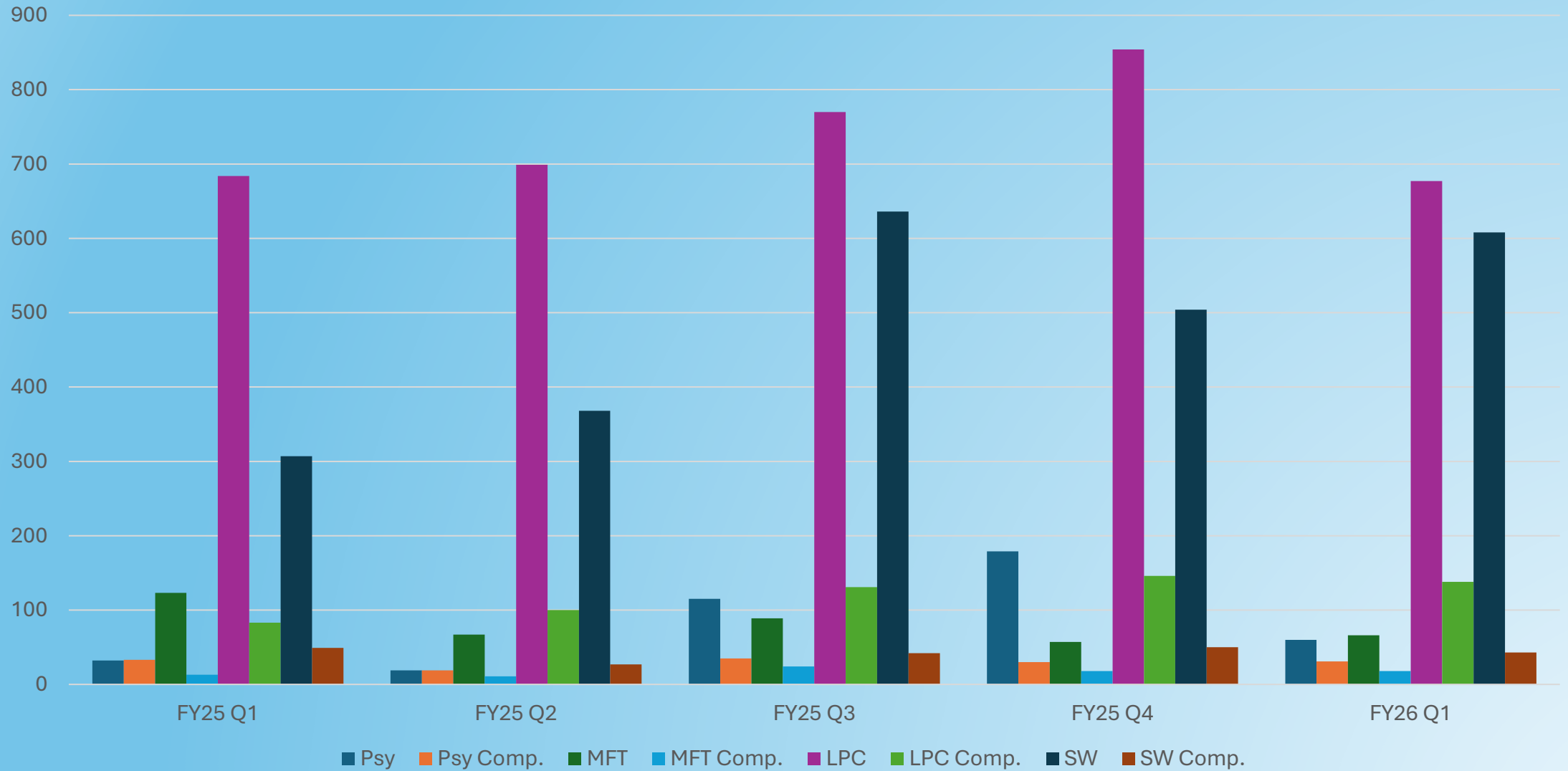
Contested Complaints Heard at SOAH



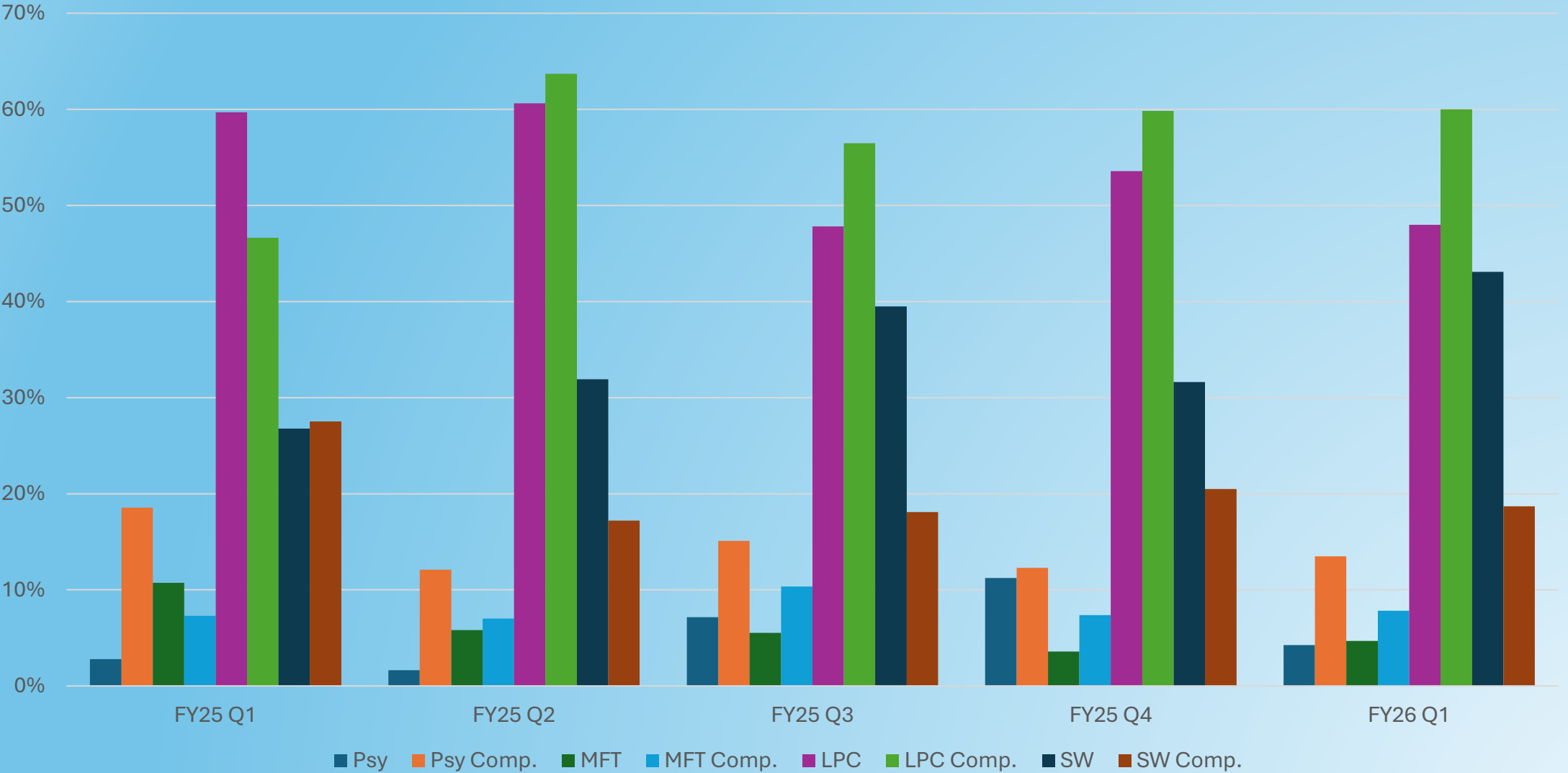
Under Compliance



New Licenses vs. New Complaints



Percentage of New Licenses and Complaints



Total number of Licenses



	FY25 Q1	FY25 Q2	FY25 Q3	FY25 Q4	FY26 Q1
SW	33793	34158	34794	35295	35907
LPC	38237	38936	39706	40560	41237
MFT	5261	5328	5417	5474	5540
Psy	11885	11904	12019	12198	12258
Total	89176	90326	91936	93527	94942

**OPERATING BUDGET
FISCAL YEAR 2026**

Submitted to the
**Governor's Office of Budget and Planning
and the Legislative Budget Board**

by

**TEXAS BEHAVIORAL HEALTH
EXECUTIVE COUNCIL**

November 24, 2025

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CERTIFICATE

Agency Name Texas Behavioral Health Executive Council

This is to certify that the information contained in the agency operating budget filed with the Legislative Budget Board (LBB) and the Office of the Governor, Budget and Policy Division, is accurate to the best of my knowledge and that the electronic submission to the LBB via the Automated Budget and Evaluation System of Texas (ABEST) and the PDF file submitted via the LBB Document Submission application are identical.

Additionally, should it become likely at any time that unexpended balances will accrue for any account, the LBB and the Office of the Governor will be notified in writing in accordance with Senate Bill 1, Article IX, Section 7.01, Eighty-ninth Legislature, Regular Session, 2025.

Chief Executive Office or Presiding Judge

Darrel Spinks
Signature

Darrel Spinks
Printed Name

Executive Director
Title

11/19/25
Date

Board or Commission Chair

John Bielamowicz
Signature

John K. Bielamowicz
Printed Name

Presiding Member
Title

November 19, 2025
Date

Chief Financial Officer

Jennifer Noack
Signature

Jennifer Noack
Printed Name

Chief Financial Officer
Title

11-19-25
Date

Budget Overview
89th Regular Session, Fiscal Year 2026 Operating Budget
Automated Budget and Evaluation System of Texas (ABEST)

510 Behavioral Health Executive Council

	GENERAL REVENUE FUNDS						OTHER FUNDS		ALL FUNDS	
	2025	2026	2025	2026	2025	2026	2025	2026	2025	2026
Goal: 1. Protect Public through										
Quality Program of Licensure										
1.1.1. Licensing	1,985,477	2,393,122					1,246,464	1,131,055	3,231,941	3,524,177
1.1.2. Texas.Gov	235,238	180,405					32,121	29,945	267,359	210,350
Total, Goal	2,220,715	2,573,527					1,278,585	1,161,000	3,499,300	3,734,527
Goal: 2. Protect the Public through										
Enforcement of Laws and Rules										
2.1.1. Enforcement	2,178,475	2,184,757					30,550	15,000	2,209,025	2,199,757
Total, Goal	2,178,475	2,184,757					30,550	15,000	2,209,025	2,199,757
Goal: 3. Indirect Administration										
3.1.1. Indirect Administration	47,063	239,975							47,063	239,975
Total, Goal	47,063	239,975							47,063	239,975
Total, Agency	4,446,253	4,998,259					1,309,135	1,176,000	5,755,388	6,174,259
Total FTEs									56.4	60.0

2.A. Summary of Budget By Strategy

DATE : 11/13/2025

TIME : 10:48:34AM

89th Regular Session, Fiscal Year 2026 Operating Budget
Automated Budget and Evaluation System of Texas (ABEST)

Agency code: 510 Agency name: Behavioral Health Executive Council

Goal/Objective/STRATEGY	EXP 2024	EXP 2025	BUD 2026
1 Protect Public through Quality Program of Licensure			
1 Ensure Practitioners Meet Standards for Licensure			
1 LICENSING	\$3,097,785	\$3,231,941	\$3,524,177
2 TEXAS.GOV	\$248,548	\$267,359	\$210,350
TOTAL, GOAL 1	\$3,346,333	\$3,499,300	\$3,734,527
2 Protect the Public through Enforcement of Laws and Rules			
1 Ensure All Practitioners Comply with Established Laws and Rules			
1 ENFORCEMENT	\$2,123,389	\$2,209,025	\$2,199,757
TOTAL, GOAL 2	\$2,123,389	\$2,209,025	\$2,199,757
3 Indirect Administration			
1 Indirect Administration			
1 INDIRECT ADMINISTRATION	\$48,028	\$47,063	\$239,975
TOTAL, GOAL 3	\$48,028	\$47,063	\$239,975

2.A. Summary of Budget By Strategy

DATE : 11/13/2025

TIME : 10:48:34AM

89th Regular Session, Fiscal Year 2026 Operating Budget
Automated Budget and Evaluation System of Texas (ABEST)

Agency code: 510 Agency name: Behavioral Health Executive Council

Goal/Objective/STRATEGY	EXP 2024	EXP 2025	BUD 2026
General Revenue Funds:			
1 General Revenue Fund	\$4,243,845	\$4,446,253	\$4,998,259
	\$4,243,845	\$4,446,253	\$4,998,259
Other Funds:			
666 Appropriated Receipts	\$1,273,905	\$1,309,135	\$1,176,000
	\$1,273,905	\$1,309,135	\$1,176,000
TOTAL, METHOD OF FINANCING	\$5,517,750	\$5,755,388	\$6,174,259
FULL TIME EQUIVALENT POSITIONS	58.7	56.4	60.0

2.B. Summary of Budget By Method of Finance
89th Regular Session, Fiscal Year 2026 Operating Budget
Automated Budget and Evaluation System of Texas (ABEST)

DATE: 11/13/2025
TIME: 10:48:48AM

Agency code: 510

Agency name: Behavioral Health Executive Council

METHOD OF FINANCING	Exp 2024	Exp 2025	Bud 2026
<u>GENERAL REVENUE</u>			
<u>1</u> General Revenue Fund			
<i>REGULAR APPROPRIATIONS</i>			
Regular Appropriations from MOF Table (2024-25 GAA)	\$4,163,286	\$4,361,190	\$0
Regular Appropriations from MOF Table (2026-27 GAA)	\$0	\$0	\$5,164,155
<i>RIDER APPROPRIATION</i>			
Art IX, Sec 9.04, Texas.gov Project: Occupational Licenses (2024-25 GAA)	\$81,013	\$99,238	\$0
Comments: The agency collected \$217,013 in Texas.gov subscriptions fees in FY24, and \$235,238 in FY25. Each of these years only \$136,000 was budgeted. Beginning with the FY26-27 budget, this increased to \$180,405.			
Art IX, Sec 9.04, Texas.gov Project: Occupational Licenses (2026-27 GAA)	\$0	\$0	\$0
Comments: The agency collected \$217,013 in Texas.gov subscriptions fees in FY24, and \$235,238 in FY25. Each of these years only \$136,000 was budgeted. Beginning with the FY26-27 budget, this increased to \$180,405. The agency still expects to collect around \$225,000, so the anticipated difference is included here.			
Art IX, Sec 17.15, Salary Increase for Licensed Attorneys (2026-2027 GAA)	\$0	\$0	\$34,104
<i>LAPSED APPROPRIATIONS</i>			
Regular Appropriations from MOF Table (2024-25 GAA)	\$(454)	\$(14,175)	\$0
Regular Appropriations from MOF Table (2026-27 GAA)	\$0	\$0	\$(200,000)
Comments: No way to implement a social worker Spanish licensing exam, as BHEC does not own the exam.			
TOTAL, General Revenue Fund	\$4,243,845	\$4,446,253	\$4,998,259

2.B. Summary of Budget By Method of Finance
89th Regular Session, Fiscal Year 2026 Operating Budget
Automated Budget and Evaluation System of Texas (ABEST)

DATE: 11/13/2025
TIME: 10:48:48AM

Agency code: 510		Agency name: Behavioral Health Executive Council		
METHOD OF FINANCING		Exp 2024	Exp 2025	Bud 2026
TOTAL, ALL GENERAL REVENUE		\$4,243,845	\$4,446,253	\$4,998,259
OTHER FUNDS				
<u>666</u> Appropriated Receipts				
REGULAR APPROPRIATIONS				
Regular Appropriations from MOF Table (2024-2025 GAA)		\$1,148,500	\$1,148,500	\$0
Regular Appropriations from MOF Table (2026-27 GAA)		\$0	\$0	\$1,176,000
RIDER APPROPRIATION				
Art IX, Sec 8.02, Reimbursements and Payments (2024-25 GAA)		\$38,850	\$15,550	\$0
Art IX, Sec 8.02, Reimbursements and Payments (2026-27 GAA)		\$0	\$0	\$0
Art IX, Sec 12.02, Publications or Sales of Records (2024-25 GAA)		\$32,894	\$72,582	\$0
Art IX, Sec 12.02, Publications or Sales of Records (2026-27 GAA)		\$0	\$0	\$0
Art IX, Sec 8.10, Credit, Charge, or Debit Card Service (2024-25 GAA)		\$1,590	\$2,176	\$0
Art IX, Sec 8.10, Credit, Charge, or Debit Card Service (2026-27 GAA)		\$0	\$0	\$0
Art IX, Sec 8.07, Seminars and Conferences (2024-25 GAA)		\$52,071	\$70,327	\$0
Art IX, Sec 8.07, Seminars and Conferences (2026-27 GAA)		\$0	\$0	\$0
TOTAL, Appropriated Receipts		\$1,273,905	\$1,309,135	\$1,176,000
TOTAL, ALL OTHER FUNDS		\$1,273,905	\$1,309,135	\$1,176,000

DATE: 11/13/2025
TIME: 10:48:48AM

Agency name: **Behavioral Health Executive Council**

METHOD OF FINANCING	Exp 2024	Exp 2025	Bud 2026
GRAND TOTAL	\$5,517,750	\$5,755,388	\$6,174,259

FULL-TIME-EQUIVALENT POSITIONS

REGULAR APPROPRIATIONS

68.0	68.0	0.0
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0.0	0.0	64.0
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LAPSED APPROPRIATIONS

(9.3)	(11.6)	0.0
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Comments: The agency has reallocated the funding for four FTEs in order to award promotions to existing staff for absorbing additional responsibilities of terminated staff or vacant positions.

0.0 0.0 (4.0)

Comments: The Legislature only gave BHEC partial funding for vacant FTEs, so we were not able to fill four positions for FY2026.

58.7 56.4 60.0

NUMBER OF 100% FEDERALLY FUNDED FTEs

2.C. Summary of Budget By Object of Expense
89th Regular Session, Fiscal Year 2026 Operating Budget
Automated Budget and Evaluation System of Texas (ABEST)

DATE: 11/13/2025
TIME: 10:49:04AM

Agency code: 510		Agency name: Behavioral Health Executive Council		
OBJECT OF EXPENSE		EXP 2024	EXP 2025	BUD 2026
1001	SALARIES AND WAGES	\$3,207,046	\$3,484,191	\$3,734,208
1002	OTHER PERSONNEL COSTS	\$499,999	\$485,724	\$307,720
2001	PROFESSIONAL FEES AND SERVICES	\$41,464	\$54,135	\$134,148
2003	CONSUMABLE SUPPLIES	\$27,065	\$11,271	\$23,840
2004	UTILITIES	\$275	\$412	\$600
2005	TRAVEL	\$43,321	\$45,782	\$130,000
2006	RENT - BUILDING	\$1,148	\$360	\$360
2007	RENT - MACHINE AND OTHER	\$9,358	\$10,210	\$10,560
2009	OTHER OPERATING EXPENSE	\$1,688,074	\$1,663,303	\$1,832,823
5000	CAPITAL EXPENDITURES	\$0	\$0	\$0
Agency Total		\$5,517,750	\$5,755,388	\$6,174,259

2.D. Summary of Budget By Objective Outcomes
89th Regular Session, Fiscal Year 2026 Operating Budget
Automated Budget and Evaluation system of Texas (ABEST)

Date : 11/17/2025
Time: 10:53:33AM

Agency code: 510 Agency name: Behavioral Health Executive Council

Goal/ Objective / OUTCOME		Exp 2024	Exp 2025	Bud2026
1	Protect Public through Quality Program of Licensure			
	<i>1 Ensure Practitioners Meet Standards for Licensure</i>			
KEY	1 Percent of Licensees with No Recent Violations	99.74 %	99.75 %	98.00 %
2	Protect the Public through Enforcement of Laws and Rules			
	<i>1 Ensure All Practitioners Comply with Established Laws and Rules</i>			
KEY	1 Percent of Complaints Resulting in Disciplinary Action	15.00 %	17.00 %	16.00 %
	2 Percent of Documented Complaints Resolved Within Six Months	44.00 %	49.00 %	40.00 %

3.A. Strategy Level Detail

89th Regular Session, Fiscal Year 2026 Operating Budget
Automated Budget and Evaluation System of Texas (ABEST)

DATE: 11/17/2025
TIME: 11:23:33AM

Agency code: **510** Agency name: **Behavioral Health Executive Council**

GOAL: 1 Protect Public through Quality Program of Licensure

OBJECTIVE: 1 Ensure Practitioners Meet Standards for Licensure

STRATEGY: 1 Operate Quality Program of Licensure

Service Categories:

Service: 23 Income: A.2 Age: B.3

CODE	DESCRIPTION	EXP 2024	EXP 2025	BUD 2026
Output Measures:				
KEY 1	Number of New Certificates/Licensees Issued to Individuals	11,601.00	12,093.00	12,500.00
KEY 2	Number of Certificates/Licenses Renewed (Individuals)	32,374.00	36,535.00	38,500.00
Efficiency Measures:				
KEY 1	Average Time to Process Applications (Days)	29.74	29.12	30.00
Explanatory/Input Measures:				
KEY 1	Total Number of Individuals Licensed	83,828.00	92,113.00	100,000.00
Objects of Expense:				
1001	SALARIES AND WAGES	\$1,632,066	\$1,766,359	\$1,825,973
1002	OTHER PERSONNEL COSTS	\$248,726	\$254,624	\$159,272
2001	PROFESSIONAL FEES AND SERVICES	\$19,732	\$28,286	\$111,324
2003	CONSUMABLE SUPPLIES	\$12,246	\$8,276	\$11,920
2004	UTILITIES	\$0	\$0	\$0
2005	TRAVEL	\$21,661	\$22,891	\$75,000
2006	RENT - BUILDING	\$0	\$0	\$180
2007	RENT - MACHINE AND OTHER	\$4,679	\$5,105	\$5,280
2009	OTHER OPERATING EXPENSE	\$1,158,675	\$1,146,400	\$1,335,228
5000	CAPITAL EXPENDITURES	\$0	\$0	\$0
TOTAL, OBJECT OF EXPENSE		\$3,097,785	\$3,231,941	\$3,524,177
Method of Financing:				
1	General Revenue Fund	\$1,894,265	\$1,985,477	\$2,393,122
SUBTOTAL, MOF (GENERAL REVENUE FUNDS)		\$1,894,265	\$1,985,477	\$2,393,122

Method of Financing:

3.A. Strategy Level Detail

DATE: 11/17/2025

TIME: 11:23:33AM

89th Regular Session, Fiscal Year 2026 Operating Budget
Automated Budget and Evaluation System of Texas (ABEST)

Agency code: 510 Agency name: Behavioral Health Executive Council

GOAL: 1 Protect Public through Quality Program of Licensure

OBJECTIVE: 1 Ensure Practitioners Meet Standards for Licensure

STRATEGY: 1 Operate Quality Program of Licensure

Service Categories:

Service: 23 Income: A.2 Age: B.3

CODE	DESCRIPTION	EXP 2024	EXP 2025	BUD 2026
666	Appropriated Receipts	\$1,203,520	\$1,246,464	\$1,131,055
SUBTOTAL, MOF (OTHER FUNDS)		\$1,203,520	\$1,246,464	\$1,131,055
TOTAL, METHOD OF FINANCE :		\$3,097,785	\$3,231,941	\$3,524,177
FULL TIME EQUIVALENT POSITIONS:		30.6	29.8	30.5

3.A. Strategy Level Detail

89th Regular Session, Fiscal Year 2026 Operating Budget
Automated Budget and Evaluation System of Texas (ABEST)

DATE: 11/17/2025
TIME: 11:23:33AM

Agency code: **510** Agency name: **Behavioral Health Executive Council**

GOAL: 1 Protect Public through Quality Program of Licensure

OBJECTIVE: 1 Ensure Practitioners Meet Standards for Licensure

STRATEGY: 2 Texas.gov. Estimated and Nontransferable

Service Categories:

Service: 23 Income: A.2 Age: B.3

CODE	DESCRIPTION	EXP 2024	EXP 2025	BUD 2026
Objects of Expense:				
2009	OTHER OPERATING EXPENSE	\$248,548	\$267,359	\$210,350
TOTAL, OBJECT OF EXPENSE		\$248,548	\$267,359	\$210,350
Method of Financing:				
1	General Revenue Fund	\$217,013	\$235,238	\$180,405
SUBTOTAL, MOF (GENERAL REVENUE FUNDS)		\$217,013	\$235,238	\$180,405
Method of Financing:				
666	Appropriated Receipts	\$31,535	\$32,121	\$29,945
SUBTOTAL, MOF (OTHER FUNDS)		\$31,535	\$32,121	\$29,945
TOTAL, METHOD OF FINANCE :		\$248,548	\$267,359	\$210,350
FULL TIME EQUIVALENT POSITIONS:				

3.A. Strategy Level Detail

DATE: 11/17/2025

TIME: 11:23:33AM

89th Regular Session, Fiscal Year 2026 Operating Budget
Automated Budget and Evaluation System of Texas (ABEST)

Agency code: **510** Agency name: **Behavioral Health Executive Council**

GOAL: 2 Protect the Public through Enforcement of Laws and Rules

OBJECTIVE: 1 Ensure All Practitioners Comply with Established Laws and Rules

STRATEGY: 1 Operate A Quality Investigation/Enforcement Program

Service Categories:

Service: 23 Income: A.2 Age: B.3

CODE	DESCRIPTION	EXP 2024	EXP 2025	BUD 2026
Output Measures:				
KEY 1	Complaints Resolved	479.00	607.00	700.00
KEY 2	Number of Complaints Pending	562.00	747.00	850.00
Efficiency Measures:				
KEY 1	Average Time for Complaint Resolution	311.35	294.39	300.00
Explanatory/Input Measures:				
KEY 1	Number of Complaints Received	632.00	803.00	1,000.00
Objects of Expense:				
1001	SALARIES AND WAGES	\$1,574,980	\$1,717,832	\$1,729,245
1002	OTHER PERSONNEL COSTS	\$251,273	\$231,100	\$148,448
2001	PROFESSIONAL FEES AND SERVICES	\$21,732	\$25,849	\$22,824
2003	CONSUMABLE SUPPLIES	\$8,019	\$2,995	\$11,920
2004	UTILITIES	\$275	\$412	\$600
2005	TRAVEL	\$21,660	\$22,891	\$55,000
2006	RENT - BUILDING	\$0	\$0	\$180
2007	RENT - MACHINE AND OTHER	\$4,679	\$5,105	\$5,280
2009	OTHER OPERATING EXPENSE	\$240,771	\$202,841	\$226,260
5000	CAPITAL EXPENDITURES	\$0	\$0	\$0
TOTAL, OBJECT OF EXPENSE		\$2,123,389	\$2,209,025	\$2,199,757
Method of Financing:				
1	General Revenue Fund	\$2,084,539	\$2,178,475	\$2,184,757
SUBTOTAL, MOF (GENERAL REVENUE FUNDS)		\$2,084,539	\$2,178,475	\$2,184,757

Method of Financing:

3.A. Strategy Level Detail

DATE: 11/17/2025

TIME: 11:23:33AM

89th Regular Session, Fiscal Year 2026 Operating Budget
Automated Budget and Evaluation System of Texas (ABEST)

Agency code: **510** Agency name: **Behavioral Health Executive Council**

GOAL: 2 Protect the Public through Enforcement of Laws and Rules

OBJECTIVE: 1 Ensure All Practitioners Comply with Established Laws and Rules

STRATEGY: 1 Operate A Quality Investigation/Enforcement Program

Service Categories:

Service: 23 Income: A.2 Age: B.3

CODE	DESCRIPTION	EXP 2024	EXP 2025	BUD 2026
666	Appropriated Receipts	\$38,850	\$30,550	\$15,000
SUBTOTAL, MOF (OTHER FUNDS)		\$38,850	\$30,550	\$15,000
TOTAL, METHOD OF FINANCE :		\$2,123,389	\$2,209,025	\$2,199,757
FULL TIME EQUIVALENT POSITIONS:		28.1	26.6	26.5

3.A. Strategy Level Detail

89th Regular Session, Fiscal Year 2026 Operating Budget
Automated Budget and Evaluation System of Texas (ABEST)

DATE: 11/17/2025
TIME: 11:23:33AM

Agency code: **510** Agency name: **Behavioral Health Executive Council**

GOAL: 3 Indirect Administration

OBJECTIVE: 1 Indirect Administration

STRATEGY: 1 Indirect Administration

Service Categories:

Service: 23 Income: A.2 Age: B.3

CODE	DESCRIPTION	EXP 2024	EXP 2025	BUD 2026
Objects of Expense:				
1001	SALARIES AND WAGES	\$0	\$0	\$178,990
2003	CONSUMABLE SUPPLIES	\$6,800	\$0	\$0
2006	RENT - BUILDING	\$1,148	\$360	\$0
2009	OTHER OPERATING EXPENSE	\$40,080	\$46,703	\$60,985
TOTAL, OBJECT OF EXPENSE		\$48,028	\$47,063	\$239,975
Method of Financing:				
1	General Revenue Fund	\$48,028	\$47,063	\$239,975
SUBTOTAL, MOF (GENERAL REVENUE FUNDS)		\$48,028	\$47,063	\$239,975
TOTAL, METHOD OF FINANCE :		\$48,028	\$47,063	\$239,975
FULL TIME EQUIVALENT POSITIONS:		0.0	0.0	3.0

3.A. Strategy Level Detail

89th Regular Session, Fiscal Year 2026 Operating Budget
Automated Budget and Evaluation System of Texas (ABEST)

DATE: 11/17/2025
TIME: 11:23:33AM

SUMMARY TOTALS:

OBJECTS OF EXPENSE:	\$5,517,750	\$5,755,388	\$6,174,259
METHODS OF FINANCE :	\$5,517,750	\$5,755,388	\$6,174,259
FULL TIME EQUIVALENT POSITIONS:	58.7	56.4	60.0

4.D. Estimated Revenue Collections Supporting Schedule
89th Regular Session, Fiscal Year 2026 Operating Budget
Automated Budget and Evaluation System of Texas (ABEST)

DATE: 11/13/2025
TIME: 10:49:48AM

Agency Code: **510**

Agency name: **Behavioral Health Executive Council**

FUND/ACCOUNT		Exp 2024	Est 2025	Est 2026
<u>1</u>	General Revenue Fund			
	Beginning Balance (Unencumbered):	\$0	\$0	\$0
	Estimated Revenue:			
	3175 Professional Fees	1,359,009	1,503,191	1,526,288
	3562 Health Related Profession Fees	3,161,183	3,480,152	3,795,738
	3616 Social Worker Regulation	2,106,247	2,245,788	2,438,970
	3770 Administrative Penalties	7,850	7,200	8,000
	Subtotal: Estimated Revenue	6,634,289	7,236,331	7,768,996
	Total Available	\$6,634,289	\$7,236,331	\$7,768,996
DEDUCTIONS:				
	Expended/Estimate/Budgeted	(4,243,845)	(4,446,253)	(4,998,259)
	Indirect Costs	(975,714)	(992,678)	(1,055,704)
	Total, Deductions	\$(5,219,559)	\$(5,438,931)	\$(6,053,963)
Ending Fund/Account Balance		\$1,414,730	\$1,797,400	\$1,715,033

REVENUE ASSUMPTIONS:

CONTACT PERSON:

Jennifer Noack

4.D. Estimated Revenue Collections Supporting Schedule
89th Regular Session, Fiscal Year 2026 Operating Budget
Automated Budget and Evaluation System of Texas (ABEST)

DATE: 11/13/2025
TIME: 10:49:48AM

Agency Code: **510**

Agency name: **Behavioral Health Executive Council**

FUND/ACCOUNT	Exp 2024	Est 2025	Est 2026
666 Appropriated Receipts			
Beginning Balance (Unencumbered):	\$0	\$0	\$0
Estimated Revenue:			
3719 Fees/Copies or Filing of Records	147,606	172,582	201,312
3722 Conf, Semin, & Train Regis Fees	1,055,950	1,073,958	1,163,594
3802 Reimbursements-Third Party	38,850	30,550	32,000
3879 Credit Card and Related Fees	31,499	32,045	34,790
Subtotal: Estimated Revenue	1,273,905	1,309,135	1,431,696
Total Available	\$1,273,905	\$1,309,135	\$1,431,696
DEDUCTIONS:			
Expended/Estimated/Budgeted	(1,273,905)	(1,309,135)	(1,176,000)
Total, Deductions	\$(1,273,905)	\$(1,309,135)	\$(1,176,000)
Ending Fund/Account Balance	\$0	\$0	\$255,696

REVENUE ASSUMPTIONS:

CONTACT PERSON:

Jennifer Noack

Policy on Verification of Lawful Presence and Authority to Work for Licensure Applicants and Renewals

Purpose

This policy intended to document the process the Texas Behavioral Health Executive Council has used since the agency's launch on September 1, 2020, to verify whether applicants for licensure are lawfully present and eligible to work in the United States, as required by federal law. In addition, it is intended to provide agency staff with guidance on navigating the often complex interplay between federal immigration requirements and state occupational licensure.

I. Federal Law: 8 U.S.C. § 1621 (PRWORA § 411)

Under the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (PRWORA), Congress created federal restrictions on who may receive *state and local public benefits*. These provisions are codified at **8 U.S.C. § 1621**.

Key points relevant to our work:

1. Licenses Are Public Benefits

Occupational and professional licenses issued by state agencies are expressly defined as "public benefits." Therefore, BHEC may issue and renew a license only in a manner that complies with federal eligibility rules.

2. Eligibility Is Restricted to Certain Individuals

Absent an affirmative state law enacted pursuant to 8 U.S.C. § 1621(d), public benefits may be provided only to:

- U.S. citizens,
- "Qualified aliens," and
- Certain other non-citizens who are lawfully present under federal immigration law.

3. Lawful Presence Alone Is Insufficient When Licensure Permits Employment

Where an occupational license authorizes the holder to engage in employment or the practice of a profession, federal law requires not only lawful presence in the United States, but independent authorization to work.

Aliens who lack federal employment authorization are ineligible to receive or renew an occupational license from this agency, even if they are otherwise lawfully present.

This also applies to individuals located outside of the United States who seek licensure and cannot demonstrate federal work authorization. Applicants located outside of the

United States who cannot demonstrate federal work authorization are similarly ineligible and will be denied licensure; however, the denial may include a finding that the applicant has met all substantive licensure requirements and would otherwise be eligible for licensure except for the lack of federal work authorization in the United States.

These requirements are mandated by federal law. The Council has no discretion to expand eligibility or recognize work authorization beyond that conferred by federal immigration authorities.

II. BHEC's Verification Process

To maintain consistent compliance with 8 U.S.C. § 1621, the Council follows the same straightforward verification process for each applicant, promoting clarity and uniformity.

1. Determining Who Must Complete a SAVE Verification

Every applicant is asked a simple question within the licensure application:
“Are you a United States citizen?”

If an applicant indicates they are a U.S. citizen:

If an applicant attests that they are a United States citizen, the applicant must submit a copy of **one** of the following documents to verify that attestation¹:

1. A valid, unexpired driver's license or state identification certificate issued by a state or territory of the United States that complies with the REAL ID Act;
2. a birth certificate issued by the appropriate vital statistics agency of a U.S. state, a U.S. territory, or the District of Columbia indicating birth in the United States;
3. a valid, unexpired passport or passport card issued by the United States government;
4. a valid, unexpired license to carry a handgun issued by the Texas Department of Public Safety under Texas Government Code, Chapter 411, Subchapter H;
5. a U.S. Certificate of Naturalization (Form N-550 or N-570); or
6. a U.S. Certificate of Citizenship (Form N-560 or N-561).

The applicant must also submit their Social Security number as part of the application process.

If an applicant indicates they are *not* a U.S. citizen:

The applicant must complete and submit the Council's SAVE Program Information Form.

To be considered complete, an application file must contain verification, through the DHS–USCIS Systematic Alien Verification for Entitlements (SAVE) Program, of a non-citizen applicant's immigration or citizenship status and any federally granted authorization to work in the United States.

¹ Agency staff shall implement this requirement by ensuring that all applications for licensure require this supporting documentation in accordance with the authority found at 22 TAC 882.2(a)(8).

This requirement is established in 22 TAC § 882.2(a)(5), which requires verification of immigration and citizenship information and any associated employment authorization necessary for licensure.

License Renewals by Non-Citizens

Non-citizens seeking to renew an existing license are subject to the same federal and state eligibility requirements as initial applicants. At the time of renewal, a non-citizen licensee must demonstrate that they remain lawfully present in the United States and, where applicable, continue to possess federal authorization to work in the United States. Renewal applications submitted by non-citizens must therefore include verification, through the DHS–USCIS Systematic Alien Verification for Entitlements (SAVE) Program, of the licensee’s current immigration status and any federally granted employment authorization. A renewal application that does not include this verification is incomplete and may not be approved.

2. SAVE Form Collection

Non-citizen applicants complete the SAVE form located at: <https://bhec.texas.gov/forms-and-publications/>.

This form collects the specific information required by the U.S. Citizenship and Immigration Services (USCIS) **Systematic Alien Verification for Entitlements (SAVE) Program**.

3. Verification Through USCIS SAVE

Once the SAVE form is received:

1. Staff enter the applicant’s information into the SAVE system;
2. SAVE returns an official federal determination regarding the applicant’s immigration status and work authorization;
3. Staff rely **exclusively** on that determination to assess whether the applicant is lawfully present and authorized to work in the U.S., and therefore eligible for licensure.

The Council does **not** interpret immigration documents or make independent judgments. USCIS determines lawful presence and authorization to work; we follow that determination.

III. Summary for Staff

- Federal law (8 U.S.C. § 1621) prohibits the Council from issuing or renewing licenses to individuals who are not lawfully present in the U.S. The Immigration and Nationality Act (INA) also prohibits a non-citizen from working in the United States without authorization to work.
- We determine who must undergo verification by asking applicants whether they are U.S. citizens.

- All non-citizens must complete the SAVE form.
- USCIS's SAVE Program provides the official determination of lawful presence and work authorization, and staff must rely solely on that determination.

This policy should serve as a reference for staff and as documentation of the process we follow to ensure full compliance with federal law.

PRESIDENTIAL ACTIONS

ENSURING A NATIONAL POLICY FRAMEWORK FOR ARTIFICIAL INTELLIGENCE

Executive Orders

December 11, 2025

By the authority vested in me as President by the Constitution and the laws of the United States of America, it is hereby ordered:

Section 1. Purpose. United States leadership in Artificial Intelligence (AI) will promote United States national and economic security and dominance across many domains. Pursuant to Executive Order 14179 of January 23, 2025 (Removing Barriers to American Leadership in Artificial Intelligence), I revoked my predecessor’s attempt to paralyze this industry and directed my Administration to remove barriers to United States AI leadership. My Administration has already done tremendous work to advance that objective, including by updating existing Federal regulatory frameworks to remove barriers to and encourage adoption of AI applications across sectors. These efforts have already delivered tremendous benefits to the American people and led to trillions of dollars of investments across the country. But we remain in the earliest days of this technological revolution and are in a race with adversaries for supremacy within it. To win, United States AI companies must be free to innovate without cumbersome regulation. But excessive State regulation thwarts this imperative. First, State-by-State regulation by definition creates a patchwork of 50 different regulatory regimes that makes compliance more challenging, particularly for start-ups. Second, State laws are increasingly responsible for requiring entities to embed ideological bias within models. For example, a new Colorado law banning “algorithmic discrimination” may even force AI models to produce false results in order to avoid a “differential treatment or impact”

on protected groups. Third, State laws sometimes impermissibly regulate beyond State borders, impinging on interstate commerce.

My Administration must act with the Congress to ensure that there is a minimally burdensome national standard — not 50 discordant State ones. The resulting framework must forbid State laws that conflict with the policy set forth in this order.

That framework should also ensure that children are protected, censorship is prevented, copyrights are respected, and communities are safeguarded. A carefully crafted national framework can ensure that the United States wins the AI race, as we must.

Until such a national standard exists, however, it is imperative that my Administration takes action to check the most onerous and excessive laws emerging from the States that threaten to stymie innovation.

Sec. 2. Policy. It is the policy of the United States to sustain and enhance the United States' global AI dominance through a minimally burdensome national policy framework for AI.

Sec. 3. AI Litigation Task Force. Within 30 days of the date of this order, the Attorney General shall establish an AI Litigation Task Force (Task Force) whose sole responsibility shall be to challenge State AI laws inconsistent with the policy set forth in section 2 of this order, including on grounds that such laws unconstitutionally regulate interstate commerce, are preempted by existing Federal regulations, or are otherwise unlawful in the Attorney General's judgment, including, if appropriate, those laws identified pursuant to section 4 of this order. The Task Force shall consult from time to time with the Special Advisor for AI and Crypto, the Assistant to the President for Science and Technology, the Assistant to the President for Economic Policy, and the Assistant to the President and Counsel to the President regarding the emergence of specific State AI laws that warrant challenge.

Sec. 4. Evaluation of State AI Laws. Within 90 days of the date of this order, the Secretary of Commerce, consistent with the Secretary's authorities under 47 U.S.C. 902(b), shall, in consultation with the Special Advisor for AI and Crypto, the Assistant to the President for Economic Policy, the Assistant to the President for Science and Technology, and the Assistant to the President and Counsel to the President, publish an evaluation of existing State AI laws that identifies onerous laws that conflict with the policy set forth in section 2 of this order, as well as laws that should be referred to the Task Force established pursuant to section 3 of this order. That evaluation of State AI

laws shall, at a minimum, identify laws that require AI models to alter their truthful outputs, or that may compel AI developers or deployers to disclose or report information in a manner that would violate the First Amendment or any other provision of the Constitution. The evaluation may additionally identify State laws that promote AI innovation consistent with the policy set forth in section 2 of this order.

Sec. 5. Restrictions on State Funding. (a) Within 90 days of the date of this order, the Secretary of Commerce, through the Assistant Secretary of Commerce for Communications and Information, shall issue a Policy Notice specifying the conditions under which States may be eligible for remaining funding under the Broadband Equity Access and Deployment (BEAD) Program that was saved through my Administration's "Benefit of the Bargain" reforms, consistent with 47 U.S.C. 1702(e)-(f). That Policy Notice must provide that States with onerous AI laws identified pursuant to section 4 of this order are ineligible for non-deployment funds, to the maximum extent allowed by Federal law. The Policy Notice must also describe how a fragmented State regulatory landscape for AI threatens to undermine BEAD-funded deployments, the growth of AI applications reliant on high-speed networks, and BEAD's mission of delivering universal, high-speed connectivity.

(b) Executive departments and agencies (agencies) shall assess their discretionary grant programs in consultation with the Special Advisor for AI and Crypto and determine whether agencies may condition such grants on States either not enacting an AI law that conflicts with the policy of this order, including any AI law identified pursuant to section 4 or challenged pursuant to section 3 of this order, or, for those States that have enacted such laws, on those States entering into a binding agreement with the relevant agency not to enforce any such laws during the performance period in which it receives the discretionary funding.

Sec. 6. Federal Reporting and Disclosure Standard. Within 90 days of the publication of the identification specified in section 4 of this order, the Chairman of the Federal Communications Commission shall, in consultation with the Special Advisor for AI and Crypto, initiate a proceeding to determine whether to adopt a Federal reporting and disclosure standard for AI models that preempts conflicting State laws.

Sec. 7. Preemption of State Laws Mandating Deceptive Conduct in AI Models. Within 90 days of the date of this order, the Chairman of the Federal Trade Commission shall, in consultation with the Special Advisor for AI and Crypto, issue a policy statement on the application of the Federal Trade Commission Act's prohibition on unfair and deceptive

acts or practices under 15 U.S.C. 45 to AI models. That policy statement must explain the circumstances under which State laws that require alterations to the truthful outputs of AI models are preempted by the Federal Trade Commission Act's prohibition on engaging in deceptive acts or practices affecting commerce.

Sec. 8. Legislation. (a) The Special Advisor for AI and Crypto and the Assistant to the President for Science and Technology shall jointly prepare a legislative recommendation establishing a uniform Federal policy framework for AI that preempts State AI laws that conflict with the policy set forth in this order.

(b) The legislative recommendation called for in subsection (a) of this section shall not propose preempting otherwise lawful State AI laws relating to:

- (i) child safety protections;
- (ii) AI compute and data center infrastructure, other than generally applicable permitting reforms;
- (iii) State government procurement and use of AI; and
- (iv) other topics as shall be determined.

Sec. 9. General Provisions. (a) Nothing in this order shall be construed to impair or otherwise affect:

- (i) the authority granted by law to an executive department or agency, or the head thereof; or
- (ii) the functions of the Director of the Office of Management and Budget relating to budgetary, administrative, or legislative proposals.

(b) This order shall be implemented consistent with applicable law and subject to the availability of appropriations.

(c) This order is not intended to, and does not, create any right or benefit, substantive or procedural, enforceable at law or in equity by any party against the United States, its departments, agencies, or entities, its officers, employees, or agents, or any other person.

(d) The costs for publication of this order shall be borne by the Department of Commerce.

DONALD J. TRUMP

THE WHITE HOUSE,

December 11, 2025.



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TEXAS BEHAVIORAL HEALTH EXECUTIVE COUNCIL
2nd QUARTER MEASURES
FY 2026

Number of Licenses Renewed (from ald12)

LSSP	456
LIC	697
LPA	76
LPC	3482
MFT	461
LBSW	358
LMSW	1390
LCSW	1808
AP	10

Total 8,738

Number of Licenses Issued (from ald11 and BO)

LPA	16
PLP	109
LIC	72
LSSP	14
LPCA	786
LPC	160
LPC Upgrade	649
MFTA	75
MFT	38
MFT Upgrade	54
LBSW	34
LMSW	470
LCSW	173
LMSW Upgrade	25
LCSW Upgrade	389
TEMP SW	17

Total 3,071

Number of Complaints Resolved (from BO report)

LP/LPA	19
LSSP	2
LPC	96
MFT	7
SW	16
Total	140

Percent of Complaint Resolved Within Six Months (from BO report)

1 st Qtr	83/158 =	53%
2 nd Qtr	47/140 =	34%
3 rd Qtr		
4 th Qtr		
YTD	130/298=	44%

Percent of Complaints Resolved resulting in Disciplinary Action (from BO report)

1 st Qtr	19/158 =	12%
2 nd Qtr	28/140 =	20%
3 rd Qtr		
4 th Qtr		
YTD	47/298 =	16%

Average Time for Complaint Resolution (from BO report)

1 st Qtr	48,875 days to resolve 158 complaints = 309.34 days
2 nd Qtr	49,215 days to resolve 140 complaints = 351.54 days
3 rd Qtr	
4 th Qtr	
YTD	98,090 days to resolve 298 complaints = 329.17 days

Number of Complaints Pending (from BO report) 945

Closed	4
File at SOAH	0
ISC Scheduled	17
Legal Review	538
NOV Sent	4
Open	2
Under Investigation	380

Average Time for Application Processing (from BO report) (**Bold averages only**)

1 st Qtr	76,193 days to process 2,985 applications =	25.53 days
2 nd Qtr	84,885 days to process 2,967 applications =	28.61 days
3 rd Qtr		
4 th Qtr		
YTD	161,078 days to process 5,952 applications =	27.07 days

LPA Initial	1632 days to process 32 applications =	51.00
LPA Final	2792 days to process 16 applications =	174.50
LIC Initial	4750 days to process 119 applications =	39.92
LIC Final	10036 days to process 72 applications =	139.39
LSSP	544 days to process 14 applications =	38.86
Temp LIC	89 days to process 7 applications =	12.72
LPC Initial	11689 days to process 160 applications =	73.06
LPCA Initial	23443 days to process 786 applications =	29.83
LPC Upgrade	7513 days to process 649 applications =	11.58
MFT License	4744 days to process 38 applications =	124.85
MFTA License	12063 days to process 75 applications =	160.84
MFTA Upgrade	903 days to process 54 applications =	16.73
Temp MFT	254 days to process 10 applications =	25.40
SW License	8601 days to process 434 applications =	19.82
SW OOS License	12782 days to process 243 applications =	52.60
SW Upgrade	7848 days to process 414 applications =	18.96
Temp SW License	93 days to process 7 applications =	13.29

- Those in **BOLD** are the applications we have more control over (i.e. we are not waiting for them to take and pass a national exam).

Calculations reviewed by:

David Zinn

Date:

3/25/26

2nd QUARTER PERFORMANCE MEASURES
FISCAL YEAR 2026

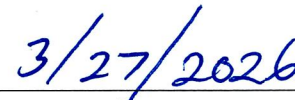
Submitted to the
Governor's Office of Budget and Planning
and the Legislative Budget Board

by

**Texas Behavioral Health Executive
Council**


Executive Director

March 27, 2026


Date

Agency code: 510

Agency name: Behavioral Health Executive Council

Type/Strategy/Measure	2026 Target	2026 Actual	2026 YTD	Percent of Annual Target	Target Range
Output Measures					
<u>1-1-1 LICENSING</u>					
1 # NEW LICENSEES ISSUED					
Quarter 1	12,000.00	3,111.00	3,111.00	25.93 %	2,400.00 - 3,600.00
Quarter 2	12,000.00	3,071.00	6,182.00	51.52 %	5,400.00 - 6,600.00
2 # LICENSE RENEWALS					
Quarter 1	34,500.00	9,636.00	9,636.00	27.93 %	6,900.00 - 10,350.00
Quarter 2	34,500.00	8,738.00	18,374.00	53.26 %	15,525.00 - 18,975.00
<u>2-1-1 ENFORCEMENT</u>					
1 COMPLAINTS RESOLVED					

* Varies by 5% or more from target.

Agency code: 510

Agency name: Behavioral Health Executive Council

Type/Strategy/Measure	2026 Target	2026 Actual	2026 YTD	Percent of Annual Target	Target Range
Output Measures					
1 COMPLAINTS RESOLVED					
Quarter 1	500.00	158.00	158.00	31.60 % *	100.00 - 150.00

Explanation of Variance: FACTORS CAUSING THE VARIANCE:

The FY26 target for number of complaints resolved is 500, or 125 per quarter. During the first quarter of FY26, the agency exceeded its target by resolving 158 complaints. This is due to the efficiency and dedication of the investigative and legal staff.

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE:

The agency had 818 pending complaints at the end of this quarter and received 228 new complaints during this quarter. While the investigatory time and resources needed to resolve a complaint vary according to the nature and type of complaint received, the agency believes it will continue to exceed this target assuming it is able to maintain full or near-full staffing level of investigative and legal staff. Additionally, the agency is receiving more complaints than anticipated, which should lead to more resolved complaints, given that the agency was able to hire two new staff attorneys at the beginning of FY26 to help with resolution of the substantive complaints.

* Varies by 5% or more from target.

Agency code: 510

Agency name: Behavioral Health Executive Council

Type/Strategy/Measure	2026 Target	2026 Actual	2026 YTD	Percent of Annual Target	Target Range
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Output Measures**1 COMPLAINTS RESOLVED**

Quarter 2	500.00	140.00	298.00	59.60 % *	225.00 - 275.00
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Explanation of Variance: FACTORS CAUSING THE VARIANCE:

The FY25 target for number of complaints resolved is 610, or 152 per quarter. During the second quarter of FY 25, the agency exceeded its target by resolving 193 complaints.

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE:

The agency had 633 pending complaints at the end of this quarter and received 157 complaints during the first quarter. While the investigatory time and resources needed to resolve a complaint vary according to the nature and type of complaint received, the agency believes it can closely approach this target assuming it is able to maintain full or near-full staffing level of investigative staff. However, roughly 80% of the existing pending complaints have been investigated and referred to the legal division, which is understaffed. Therefore, the agency has requested additional staff attorneys in its 26-27 LAR to address this.

2 COMPLAINTS PENDING

Quarter 1	850.00	818.00	818.00	96.24 %	807.50 - 892.50
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* Varies by 5% or more from target.

Agency code: 510

Agency name: Behavioral Health Executive Council

Type/Strategy/Measure	2026 Target	2026 Actual	2026 YTD	Percent of Annual Target	Target Range
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Output Measures

2 COMPLAINTS PENDING

Quarter 2	850.00	945.00	945.00	111.18 % *	807.50 - 892.50
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Explanation of Variance: FACTORS CAUSING THE VARIANCE:

The FY25 target for number of complaints pending is 500. During the second quarter of FY 25, the agency had 633 complaints pending. Of this amount, approximately 80% of these are substantive complaints that have been sent to the legal division after the investigation has been completed.

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE:

The agency needs additional staff attorneys to process the substantive complaints that are referred to the legal division in a shorter timeframe. The agency believes that the average complaints pending will continue to exceed the target of 500 for the remainder of the biennium, even assuming the Council is able to maintain full or close-to-full staffing levels. The agency has requested additional staff attorneys in its 26-27 LAR to address this.

Efficiency Measures1-1-1 LICENSING

1 AVG TIME TO PROCESS APP (DAYS)

* Varies by 5% or more from target.

Agency code: 510

Agency name: Behavioral Health Executive Council

Type/Strategy/Measure	2026 Target	2026 Actual	2026 YTD	Percent of Annual Target	Target Range
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Efficiency Measures**1 AVG TIME TO PROCESS APP (DAYS)**

Quarter 1	35.00	25.53	25.53	72.94 % *	33.25 - 36.75
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Explanation of Variance: FACTORS CAUSING THE VARIANCE:

The FY26 target for the average time for license issuance is 35 days. In the first quarter of FY26, the agency bested this measure by having an average license issuance time of only 26 days. This is due to the efficiency and dedication of the licensing staff.

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE:

The average time for license issuance in FY25 was 30 days. This number has decreased in the first quarter of FY26 due to the dedication and efficiency of the licensing staff. As long as the Council is able to maintain full or close-to-full staffing levels in this division, the agency will continue to meet or beat this target during the 2026-2027 biennium.

Quarter 2	35.00	28.61	27.07	77.34 % *	33.25 - 36.75
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Explanation of Variance: FACTORS CAUSING THE VARIANCE:

The FY25 target for the average time for license issuance is 55 days. In the second quarter of FY 25, the agency bested this measure by having an average license issuance time of only 32 days.

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE:

The average time for license issuance for FY 24 was 30 days. This number has remained an average of 30-31 days, due to the dedication and efficiency of the licensing staff. The agency believes that this target will continue to be met or beat during the biennium assuming the Council is able to maintain full or close-to-full staffing levels. Additionally, the agency requested that this target be lowered to 35 days in its 2026-2027 LAR.

2-1-1 ENFORCEMENT

* Varies by 5% or more from target.

Agency code: 510

Agency name: Behavioral Health Executive Council

Type/Strategy/Measure	2026 Target	2026 Actual	2026 YTD	Percent of Annual Target	Target Range
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Efficiency Measures

1 AVG TIME/COMPLAINT RESOLUTION

Quarter 1	375.00	309.30	309.30	82.48 % *	356.25 - 393.75
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Explanation of Variance: FACTORS CAUSING THE VARIANCE:

The FY26 target for the average time for complaint resolution is 375 days. In the first quarter of FY26, the agency bested this measure by having an average processing resolution time of 310 days. This is due to the efficiency and dedication of the investigative and legal staff.

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE:

In FY25, even with the dedication and efficiency of the enforcement and legal staff, the agency needed additional staff attorneys to process the substantive complaints that were referred to the legal division in a shorter timeframe. The agency has been able to hire two new staff attorneys at the beginning of FY26 and believes that as long as the Council is able to maintain full or close-to-full staffing levels in this division, the agency will continue to meet or beat this target during the 2026-2027 biennium.

* Varies by 5% or more from target.

Agency code: 510

Agency name: Behavioral Health Executive Council

Type/Strategy/Measure	2026 Target	2026 Actual	2026 YTD	Percent of Annual Target	Target Range
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Efficiency Measures

1 AVG TIME/COMPLAINT RESOLUTION

Quarter 2	375.00	351.54	329.17	87.78 % *	356.25 - 393.75
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Explanation of Variance: FACTORS CAUSING THE VARIANCE:

The FY25 target for the average time for complaint resolution is 625 days. In the second quarter of FY 25, the agency bested this measure by having an average processing resolution time of 288 days.

HOW THE AGENCY PLANS TO DEAL WITH THE VARIANCE:

The average time for complaint resolution for FY 24 was 312 days. This number has now slightly decreased to an average of 294 days. Even with the dedication and efficiency of the enforcement and legal staff, the agency needs additional staff attorneys to process the substantive complaints that are referred to the legal division in a shorter timeframe. The agency believes that while this target on average will continue to be met or beat during the biennium, the quarterly average may begin to increase, even assuming the Council is able to maintain full or close-to- full staffing levels. The agency has requested additional staff attorneys in its 26-27 LAR to address this. Additionally, the agency has requested that this target be lowered to 375 days in its 2026-2027 LAR.

* Varies by 5% or more from target.

From: Texas Behavioral Health Executive Council
Sent: Friday, March 13, 2026 10:05 PM
Subject: Notice of New Guidance Document Regarding Chapter 161, Subchapter Y,
Health and Safety Code



Texas Behavioral Health Executive Council

1801 Congress Ave., Ste. 7.300

Austin, Texas 78701

www.bhec.texas.gov

**Texas State Board of
Examiners of Marriage
and Family Therapists**

**Texas State Board of
Examiners of
Professional Counselors**

**Texas State Board of
Examiners of
Psychologists**

**Texas State Board of
Social Worker
Examiners**

Dear Subscriber:

The Texas Behavioral Health Executive Council has issued a guidance document titled *Guidance on the Treatment of Gender Identity-related Concerns Under Chapter 161, Subchapter Y, Texas Health & Safety Code*.

The document is intended to assist licensees in understanding how Chapter 161, Subchapter Y of the Texas Health & Safety Code relates to clinical practice.

The guidance document is available for download by [clicking here](#).

Please note that replies to this email are not monitored and will be deleted. If you need to contact agency staff regarding a matter set forth in this email, please follow the instructions on the Council's Contact Us web page.

Texas Behavioral Health Executive Council
1801 Congress Ave., Ste. 7.300 Con
Austin, Texas 78701





**Guidance on the Treatment of Gender Identity-related
Concerns Under Chapter 161, Subchapter Y, Texas
Health & Safety Code.**

Texas Behavioral Health Executive Council
1801 Congress., Ste. 7.300
Austin, Texas 78701
(512) 305-7700
www.bhec.texas.gov

Executive Summary

This guidance document is intended to assist Council licensees in understanding how Texas Health & Safety Code Chapter 161, Subchapter Y affects **clinical practice involving minors experiencing gender dysphoria or other identity-related concerns**.

Key points for licensees:

- Licensees may not provide or **facilitate** treatments or procedures prohibited under Section 161.702, including puberty blockers, cross-sex hormones, or surgery, for the purpose of medically transitioning a child's biological sex.
- Public funds may not be used to provide or facilitate these prohibited treatments.
- Therapeutic engagement that does not facilitate a prohibited medical transition is generally not restricted by Section 161.702.
- Using statutory language and intent as the guide, licensees should evaluate whether a treatment plan is intended to facilitate a prohibited procedure; intent and purpose are key considerations.

Nothing in this guidance alters existing practice acts, ethical standards, scope-of-practice requirements, or duty-of-care obligations, except to clarify compliance with Texas Health & Safety Code Chapter 161, Subchapter Y.

II. Overview of Chapter 161, Subchapter Y

Chapter 161, Subchapter Y prohibits certain procedures and treatments for children under Section 161.702, including:

- Surgery to alter the child's sex.
- Puberty blockers.
- Cross-sex hormones.

The statute prohibits both providing and facilitating these procedures. The term “**facilitate**” is not defined in Subchapter Y. For purposes of this guidance, facilitation is interpreted consistent with its commonly understood meaning: any action by a licensee that assists, enables, or contributes to a minor's access to a procedure or treatment prohibited under Section 161.702, Texas Health and Safety Code. This includes conduct undertaken under a Texas license for the purpose of enabling a minor to obtain such procedures or treatments, regardless of where the procedure or treatment ultimately occurs.

Facilitation can include, but is not limited to, preparing or providing evaluations, assessments, letters, certifications, recommendations, referral letters, or treatment plans that are intended to support or lead to a prohibited procedure.

III. Interpretation of Texas Health & Safety Code Chapter 161, Subchapter Y

Texas Health & Safety Code Chapter 161, Subchapter Y has been interpreted under the authority found in Texas Government Code Chapter 402, Subchapter C to mean:

- Council licensees are **“health care providers”** under Subchapter Y.
- Licensees cannot provide or **facilitate** procedures or treatments prohibited under Section 161.702.
- Public funds may not be used, directly or indirectly, to provide or facilitate prohibited treatments.

Council licensees may not provide a course of treatment intended to affirm a child’s perception of sex that is inconsistent with the child’s biological sex when that course of treatment is intended to facilitate the medical transitioning of a child through a treatment or procedure prohibited under Section 161.702.

Licensees should consider both intent and purpose: care intended to facilitate prohibited procedures falls under the statutory prohibition, while other therapeutic care does not.

Professional Judgment and Evidence-Based Practice

Licensees must exercise professional judgment grounded in scientifically and professionally derived knowledge. Questions concerning the safety and efficacy of certain gender-affirming medical interventions for minors remain the subject of ongoing scientific debate and review.

Licensees should exercise caution and ensure that clinical decision-making is informed by a careful review of available empirical evidence, applicable law, and professional standards of care. Licensees should not rely solely on advocacy materials, policy statements, or position papers that may intermix scientific assertions with policy or political perspectives, but instead should evaluate the quality and sufficiency of the underlying evidence when forming professional judgments.

IV. Treatment Not Implicated by the Statute

Subchapter Y does not prohibit all mental health treatment or supportive care for minors with gender dysphoria or other identity-related concerns. The following examples are generally not implicated:

- Treatment of co-occurring conditions: Therapy for depression, anxiety, trauma, or other mental health concerns.
- Exploratory psychotherapy: Open-ended, developmentally appropriate exploration of identity.

- Neutral supportive counseling: Providing a safe space, supporting resilience, processing family dynamics.
 - Crisis stabilization and safety planning: Risk assessments, emergency interventions unrelated to prohibited procedures.
 - Ethics-compliant clinical documentation: Documentation necessary for continuity of care, provided it is not intended to facilitate prohibited procedures.
-

V. Practices That Raise Statutory Concerns

With respect to a **minor**, the following activities constitute **prohibited facilitation**:

- Providing evaluations, letters (e.g., surgery readiness, medical clearance, assessment, support, or gender-affirming care letters), or documentation intended to enable access to puberty blockers, cross-sex hormones, or surgery prohibited under Section 161.702.
- Referring a minor for procedures or treatments prohibited under Section 161.702.
- Structuring a treatment plan intended to advance a minor's eligibility for procedures or treatments prohibited under Section 161.702.
- Using public funds to support services that facilitate procedures or treatments prohibited under Section 161.702 for a minor.

Violations of Chapter 161, Subchapter Y or agency rules intended to ensure adherence to professional standards of care based upon scientifically and professionally derived knowledge may subject a licensee to disciplinary action by the Council¹. In addition, Section 161.706 of the Texas Health and Safety Code authorizes the Attorney General to bring an enforcement action to restrain violations of Subchapter Y and to seek applicable civil remedies.

VI. Disclaimer

This guidance is provided for general informational purposes only. Licensees seeking further clarification should consult a trusted colleague or the individual responsible for addressing professional practice questions within any local, state, regional, or national professional association of which the licensee is a member. If additional clarification is needed, the licensee should consult a private attorney. The State Bar of Texas Lawyer Referral & Information Service may assist in locating an attorney if one cannot be identified through personal or professional recommendations.

¹ This guidance document does not establish a new policy or practice standard. Rather, it reflects longstanding professional standards that prohibit licensees from assisting or facilitating a client's participation in conduct that is unlawful.

From: Association of Social Work Boards
Sent: Monday, February 23, 2026 2:01 PM
Subject: Pilot program for online exam proctoring



Pilot program for online proctoring launches Monday, March 23, 2026

ASWB is excited to announce a **pilot program for online proctoring**. The pilot will launch on Monday, March 23, 2026. This initiative is part of ASWB's commitment to increasing accessibility and responding to exam candidates' feedback, all while maintaining industry standards and safeguarding exam security.

The pilot will offer online proctoring as an option to candidates who meet at least one of the following criteria to take the exam online:

- Live 100 miles or more from the nearest Pearson VUE test center
- Have approval for online proctoring as a nonstandard testing arrangement before registering for the exam

Limiting online proctoring to these candidates reduces exposure of exam items and minimizes the risk of security breaches.

Thank you for your support as we take this important step toward greater access to the social work licensing exams.

If you have questions about this pilot program, contact [Felicia Dennison](#), ASWB's Director of Exam Administration.

Association of Social Work Boards | 17126 Mountain Run Vista Ct. | Culpeper, VA 22701 US



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Exams for the future of social work:

Putting the candidate experience at the center of exam development

When it comes to social work licensure and regulation, ASWB is committed to ensuring that the licensing exams align with current professional practice. Partnering with a team of psychometricians and hundreds of volunteer social workers serving as subject matter experts, ASWB oversees an exam development process that incorporates real-world experience and embraces the entire examination environment — including the experience of candidates themselves.

“Meeting and exceeding industry standards are at the heart of examination development and administration at ASWB,” says Senior Director of Examination Services Lavina Harless, LCSW. “As we began to explore what the 2026 social work licensing exams would look like, we knew that the time was right to go beyond our typical content update and think carefully about what it means to create a more candidate-centric exam.”

Built on research, informed by conversation

ASWB’s analysis and publication of pass rate data in 2022 led to calls for adjustments to the assessment. But there are no easy solutions to addressing pass rate disparities.

[Contextualizing research](#) indicates that the source of the disparities can be traced back to systems issues that require a systems-based response. That means that every part of the profession — including professional associations and educational institutions — must collaborate to effect change.

As we began to explore what the 2026 social work licensing exams would look like, we knew that the time was right to go beyond our typical content update and think carefully about what it means to create a more candidate-centric exam.

— Senior Director of Examination Services Lavina Harless, LCSW

ASWB has committed to acting within its sphere of influence as a regulatory association. The association aims to reduce candidate burdens and support candidates in their path to professional status. The exam program launched several research initiatives with these aims in mind.

One early project, the [Community Conversations](#) in 2023, involved research into the candidate experience. This qualitative research gathered feedback from hundreds of social workers about their licensure journeys. Findings from that investigation suggested further initiatives, some of them already complete or underway, including increasing education about exam development and administration processes and providing free exam resources for educators and supervisors.

Exploring exam structure alternatives

Other findings of the Community Conversations led ASWB to engage psychometricians to further study potential changes. These experts explored several possibilities. Some options, such as reducing the length of the exam, are being implemented. Some are planned for the future, such as the addition of innovative item types. Others were studied but not adopted, such as delivery of different questions to each candidate, selected automatically in real time, based on candidate answers.

One option that ASWB carefully considered but eventually decided against was implementing an exam structure that would include separate modules for each content area. ASWB sought input and recommendations from the Human Resources Research Organization (HumRRO), PSI, and Pearson VUE.

Psychometricians used data on exam administrations to determine the effects of making the proposed change. The results indicated that modularizing the exam would negatively affect reliability, decrease pass rates, create undue burden for candidates on the path to licensure, complicate the licensure process for regulatory boards, and significantly increase candidate costs.

PSI staff reviewed the research and agreed with its conclusions. “More people would potentially need to retake a portion of the test,” said Isabelle Gonthier, Ph.D., ICE-CCP, chief assessment officer at PSI, “... which would not align with the stated goals of reducing the burden for candidates.

Practice analysis findings align with an enhanced exam design

Developing the content for the 2026 social work licensing exam began in 2024 with an analysis of the practice of social work. A rigorous research process that gathers data through a survey of thousands of social workers, the practice analysis is required to ensure the exam remains current and relevant. The development process also incorporates subject matter expertise provided by practicing social workers serving on the Practice Analysis Task Force. These contributions collectively led to the development of a new content outline for the exam’s next iteration.

The changes made to the licensing exam blueprints based on this practice analysis include structural and editorial modifications for comprehensiveness and relevance to current practice. While the number of knowledge statements was decreased to reduce redundancy and improve clarity, very little exam content was judged to need removal. Structurally, all examination blueprints were updated from four content areas to three. Because the values and ethics content area was ranked as more important than in previous studies, the blueprints emphasize this content area by giving it the highest percentage of questions.

[Read more about the 2026 exam blueprints.](#)

Another result of the practice analysis was a renewed focus on applied knowledge rather than the simple recall of information, consistent with psychometricians’ recommendations for an updated exam structure. In alignment with their recommendations, ASWB will develop the 2026 exam using an efficient and flexible compensatory structure.

The changes will have a direct impact on the candidate experience. The new exam will have fewer questions overall, fewer pretest questions, and a higher proportion of three-option questions. The questions selected for inclusion on the exams will meet a higher psychometric threshold for their ability to assess competence and will rely less on memorization, focusing

more on the application of knowledge through the use of problem-solving, reasoning, and the application of knowledge. Because of these changes and the reduced number of content areas, the exams will require fewer items while remaining statistically valid and psychometrically reliable.

2018 exam format

Four content areas

3- and 4-option multiple choice, with most questions having four options

150 operational questions

20 pretest questions

4-hour time limit

2026 exam format

Three content areas

3- and 4-option multiple choice, with more questions having three options

110 operational questions

12 pretest questions

4-hour time limit

Examination Development Director Carl Hokanson, LGSW, says questions are being written and reclassified for the new content blueprint, and ASWB has already begun working on developing the new exam design.

“The 2026 exam will be even more relevant to the real-world practice of social work,” says Hokanson, “because of an increased emphasis on the complex skills that practitioners use every day.” Equally important, he adds, is the improvement in the candidate experience. “We anticipate that test-takers will feel even less time pressure than before,” he says, “because they are answering fewer questions in the same amount of time.”

The next step in developing the exams is a standard setting workshop to be held in January 2026. More than 75 volunteers were selected from more than 1,700 applicants to join a larger and more diverse panel of social workers than ever before. They will participate in a process facilitated by psychometricians from Pearson VUE, tasked with recommending the passing standard that represents minimum competence for entry to safe and ethical social work practice.

ASWB will launch the updated social work licensing exams in August 2026. Please stay tuned to the ASWB website and social media channels for the latest and most accurate information about updates to the social work licensing exams.



Alignment Study:

Aligning ASWB Masters Exam Applied Knowledge Statements and CSWE Competencies

**Prepared
for:** Association of Social Work Boards
17126 Mountain Run Vista Ct.
Culpeper, VA 22701

Date: January 14, 2026

Authors: Soner Dumani
Emily A. Borawski
Eryn A. Nielsen
Alexandru Popa
Dea Mulolli
Dannele C. Ferreras

Alignment Study: Aligning ASWB Masters Exam Applied Knowledge Statements and CSWE Competencies

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Alignment Study: Aligning ASWB Masters Exam Applied Knowledge Statements and CSWE Competencies

Executive Summary

This exploratory study examined the correspondence between the Association of Social Work Boards (ASWB) Masters exam applied knowledge statements and the Council of Social Work Education (CSWE) social work competencies outlined in the Educational Policy and Accreditation Standards (EPAS). The ASWB framework comprises 109 applied knowledge statements organized into three content areas. The CSWE framework defines nine interrelated competencies, each with specific component behaviors (referred to as subcompetencies in this study).

HumRRO facilitated a two-day workshop in September 2025 with 11 experienced social work educators serving as subject matter experts (SMEs). Using calibrated independent judgment followed by group deliberation, SMEs rated all 109 applied knowledge statements against CSWE competencies, achieving consensus through structured discussion.

All nine CSWE competencies were represented across the applied knowledge statements. More than half of the applied knowledge statements matched with the *assessment* competency (Competency 7: Assess Individuals, Families, Groups, Organizations, and Communities; 30%) and the *intervention* competency (Competency 8: Intervene with Individuals, Families, Groups, Organizations, and Communities, 25%). Competency 1 (Demonstrate Ethical and Professional Behavior) aligned with 17% of the applied knowledge statements, emerging as another foundational competency for social work.

At the subcompetency level, Subcompetencies 7.a (Apply theories of human behavior and person-in-environment) and 8.a (Engage with clients and constituencies to implement culturally responsive, evidence-informed interventions) were most frequently matched with applied knowledge statements, while all other subcompetencies were represented except Subcompetency 4.a (Apply research findings to inform and improve practice, policy, and programs), which received no direct matches. Qualitative data suggested that SMEs showed the strongest agreement on competencies with explicit language (Competency 1 for ethics, Competency 8 for intervention) but struggled to distinguish overlapping definitions between engagement and assessment, indicating that definitional clarity drives alignment consistency.

Study Objective and Research Questions

The current study was designed to explore the potential correspondence between the Association of Social Work Boards (ASWB) Masters exam applied knowledge statements derived from a practice analysis and the Council of Social Work Education (CSWE) social work competencies as detailed in the Educational Policy and Accreditation Standards (EPAS).

This exploratory analysis differs from traditional alignment studies, which typically align assessment items with standards where test items were written specifically to measure those standards. Because the applied knowledge statements and CSWE competencies were developed independently through separate processes, the Human Resources Research Organization's (HumRRO) approach to this study is to understand *whether* and *how* these frameworks overlap, rather than to validate predetermined alignment. This exploratory analysis is intended to show where licensing requirements and educational standards currently align and where they differ, reflecting how these two systems were developed separately.

To guide this exploratory analysis, we developed two research questions that reflect our approach of identifying rather than validating alignment. These questions allow us to systematically examine the correspondence between independently developed instruments:

- To what extent do the ASWB applied knowledge statements correspond with the CSWE social work competencies in the EPAS?
- How are the CSWE social work competencies in the EPAS distributed across the ASWB applied knowledge content areas?

To answer these interrelated research questions, we employed a two-level mapping approach. Our primary analysis mapped applied knowledge statements to the high-level CSWE competencies, as these represent the overarching domains of social work practice and education. We also conducted a secondary analysis mapping applied knowledge statements to subcompetencies—defined as sets of behaviors that integrate the competency components and represent observable, measurable practice demonstrations informed by underlying content and processes. However, we approached the subcompetency-level analysis with caution, recognizing that distinctions between subcompetencies within the same competency often require nuanced interpretation and may not yield substantively different insights. This tiered approach allowed us to capture alignment at both strategic and operational levels while acknowledging the limitations of fine-grained categorization.

ASWB Masters Exam Applied Knowledge Statements

The applied knowledge statements provide detailed content outlines that specify the knowledge tested on the ASWB Masters social work licensing examination. These statements were derived from the recent practice analysis, which concluded in 2024, and serve as a blueprint for the content that should be covered in the assessment, essentially defining what a social worker should know and learn to perform competently, safely, and ethically at entry to practice (Trevino et al., 2024). The framework is comprehensive, containing 109 individual applied knowledge statements organized into three main categories. Each of these categories breaks down further into subcategories that identify the essential knowledge areas for competent social work practice.

The applied knowledge content areas and their subcategories are:

- Values and Ethics (27 statements)
 - Ethical principles and responsibilities (8 statements)
 - Diversity and social justice (9 statements)
 - Ethical service delivery (10 statements)
- Assessment and Planning (39 statements)
 - Assessment concepts (23 statements)
 - Assessment methods and techniques (10 statements)
 - Assessment practices (6 statements)
- Intervention and Practice (43 statements)
 - Practice concepts (9 statements)
 - Intervention methods and techniques (25 statements)
 - Practice evaluation and research (4 statements)
 - Supervision and administration (5 statements)

Appendix A displays all three content areas, the 10 subcategories, and the 109 applied knowledge statements that we used to map to the CSWE competencies.

CSWE Competencies

The Council on Social Work Education's (CSWE) Commission on Accreditation (COA) is recognized by the Council for Higher Education Accreditation (CHEA) as the accrediting body for baccalaureate and Masters degree programs in social work education in the United States and its territories. The COA establishes and implements accreditation standards that define competent preparation in social work and ensures that accredited programs meet these standards.

To fulfill this mission, CSWE's COA uses the Educational Policy and Accreditation Standards (EPAS), which establishes thresholds for professional competence and supports academic excellence across social work programs. According to the EPAS, social work practice competence is defined by nine interrelated competencies, each comprising component behaviors (we refer to these as subcompetencies in this study) that integrate knowledge, values, skills, and cognitive and affective processes. The nine CSWE social work competencies¹ outlined in the EPAS are:

- **Competency 1:** Demonstrate Professional and Ethical Behavior
- **Competency 2:** Advance Human Rights and Social, Racial, Economic, and Environmental Justice
- **Competency 3:** Engage Anti-Racism, Diversity, Equity, and Inclusion (ADEI) in Practice

¹ CSWE has adopted a competency-based education framework for its EPAS. Throughout the workshops, we used CSWE competencies, CSWE standards, and EPAS standards interchangeably, but they all refer to the same nine social work competencies that students are expected to demonstrate to enter social work professional practice.

- **Competency 4:** Engage in Practice-Informed Research and Research-Informed Practice
- **Competency 5:** Engage in Policy Practice
- **Competency 6:** Engage with Individuals, Families, Groups, Organizations, and Communities
- **Competency 7:** Assess Individuals, Families, Groups, Organizations, and Communities
- **Competency 8:** Intervene with Individuals, Families, Groups, Organizations, and Communities
- **Competency 9:** Evaluate Practice with Individuals, Families, Groups, Organizations, and Communities

Appendix B provides the subcompetencies listed under each competency.

Workshop Set-Up and Process

To examine the alignment between the applied knowledge statements and the CSWE competencies, HumRRO conducted two concurrent two-day in-person workshops with social work educators who were also licensed social workers serving as subject matter experts (SMEs). In advance of the workshops, SMEs were strategically assigned to two matched groups based on comparable experience and background characteristics to facilitate thorough applied knowledge statement coverage while avoiding the limitations of a single large-group format.

Before the formal rating process began, all SMEs participated together in a training session that covered the workshop's purpose, their roles, the background and methodology of alignment studies, and concrete examples of the rating task they would complete. During this training, SMEs completed a calibration exercise in which they independently matched **the first three** applied knowledge statements to CSWE competencies and then discussed their matching as a large group to build shared understanding of the evaluation criteria. The calibration exercise demonstrated strong interrater reliability and consensus around the CSWE competencies, which gave us confidence that the SMEs had internalized the matching approach sufficiently to proceed with independent work in two separate groups.

Following the calibration exercise, SMEs started working in their assigned groups, with each group assigned to rate approximately half of the 109 applied knowledge statements. One group rated statements sequentially, starting from the first applied knowledge statement, while the second panel rated them in reverse order, starting with the last applied knowledge statement, to ensure efficiency and completeness of ratings. SMEs in both groups also rated a small sample of the same applied knowledge statements. Over two days, SMEs independently selected the CSWE competency that best matched each applied knowledge statement, then engaged in group discussions to explain their reasoning, consider alternative perspectives, and reach a unified majority agreement on each statement. This combination of independent judgment and group deliberation balanced individual expertise with collective decision-making throughout the matching process.

Workshop Materials

ASWB provided several reference materials to inform the SMEs' ratings. These materials included the ASWB Masters exam applied knowledge statements; the 2022 CSWE Educational Policy and Accreditation Standards with detailed competency descriptions; and competency sublevel definitions to guide SMEs' alignment decisions.

In addition to the references provided by ASWB, HumRRO developed electronic item rating spreadsheets. Facilitators and notetakers monitored each SME's ratings in a primary spreadsheet. HumRRO also provided SMEs with training materials, including step-by-step instructions, as well as training slides. HumRRO developed the workshop evaluation survey used to collect feedback on the alignment training, tasks, and panel facilitation. All workshop materials were provided in both printed and electronic formats, except for the item rating spreadsheets, which were available only in electronic format.

ASWB arranged for the provision of all equipment needed to participate in the alignment workshop. For each SME, this arrangement included a laptop, one monitor, and a wired mouse/keyboard.

Panelists

ASWB recruited 11 licensed social workers to serve as SMEs across two groups. SMEs were selected to bring complementary expertise and perspectives to the alignment review. The SMEs, all of whom were social work educators, included Masters exam experts, blueprint developers, and practitioners in diverse professional roles.

SME demographics were collected through a voluntary survey at the conclusion of the workshop, and responses are detailed in Table 1. All 11 SMEs self-identified as women and held active social work licenses. The group brought substantial professional experience, with all SMEs reporting 15 or more years of social work practice and social work teaching. In terms of educational background, seven (64%) held doctoral degrees (Ph.D., DSW, Ed.D.), and four (36%) held master's degrees. Regarding racial diversity, six (55%) SMEs identified as white, five (36%) SMEs self-identified as Black, and one (9%) as Native American/Indigenous peoples. One panelist (9%) identified as Hispanic/Latino in ethnicity. SMEs ranged in age from 36 to 66 or over, with most SMEs (36%) in the 56–65 age range.

Table 1. SME Demographic Characteristics

Demographic	Characteristic	Count (%)
Gender	Woman	11 (100%)
Race	White	6 (55%)
	Black	4 (36%)
	Native American/Indigenous peoples	1 (9%)
Ethnicity	Not Hispanic/Latino	10 (91%)
	Hispanic/Latino	1 (9%)
Age	36–45	2 (18%)
	46–55	3 (27%)
	56–65	4 (36%)
	66 or over	2 (18%)
Licensure Status	Licensed Social Worker	11 (100%)
Highest Earned Degree	Ph.D. or equivalent (e.g., Ed.D.)	7 (64%)
	Masters degree	4 (36%)
Years of Teaching	15 or more years	11 (100%)

Note. Percentages may not sum to 100% due to rounding.

Workshop Process

The alignment workshop took place September 5–6, 2025, in Reston, Virginia. The workshop began with a general training session for all SMEs, led by HumRRO, with opening presentations on the purpose of regulation and blueprint development, as well as the purpose of accreditation and CSWE competency development, to provide context for both frameworks. Additional topics and activities included: (1) background on alignment studies, (2) an overview of the study methodology, (3) a brief description of workshop materials and the ratings to be completed, and (4) an overview of the applied knowledge statements and the CSWE competencies.

After SMEs were released to their assigned groups, HumRRO facilitators provided additional training to SMEs, including (1) a review of workshop materials, (2) a discussion of item ratings to be collected during the workshop, (3) access to and instruction in the use of the item reviewing platform, (4) detailed instruction on the rating sheet, and (5) an additional calibration exercise to ensure understanding of the process and rating criteria.

Over the course of the two-day workshop, SMEs completed individual ratings for all applied knowledge statements assigned to their group, reviewing statements in logical sets (not to exceed 10 items at a time), while the facilitator monitored SME responses. Statements for which SMEs provided differing ratings were then discussed as a group. The facilitator moderated the discussion, and a majority agreement rating among SMEs was determined and recorded by the facilitator. A notetaker also recorded relevant discussions that took place to reach the final majority rating. This process continued iteratively until all statements were rated.

Figure 1 illustrates a high-level overview of the steps of the in-person workshop:

Figure 1. Alignment Workshop Process



At the end of the workshop, HumRRO facilitators administered a demographic and workshop evaluation survey. SMEs responded to questions about the workshop's overall quality, the clarity and helpfulness of training materials, and their confidence in the alignment ratings they provided.

Results

Alignment between ASWB Masters Exam Applied Knowledge Statements and CSWE Competencies

SMEs evaluated all 109 applied knowledge statements and determined which CSWE competency each statement matched with. SMEs were instructed to identify a primary competency for each applied knowledge statement and note any secondary competencies that also applied in their open-ended comments.

All nine CSWE competencies were represented among the applied knowledge statements, demonstrating the breadth of the exam content across the CSWE competencies required of social work graduates.

- **Competency 7: Assess Individuals, Families, Groups, Organizations, and Communities** represented the largest proportion, with 33 applied knowledge statements matched (30.28%), reflecting the centrality of assessment skills in social work practice and on the Masters exam.
- **Competency 8: Intervene with Individuals, Families, Groups, Organizations, and Communities** was the second most represented competency, with 27 applied knowledge statements matched (24.77%), underscoring the importance of intervention knowledge and skills throughout the exam.
- **Competency 1: Demonstrate Ethical and Professional Behavior** aligned with 19 applied knowledge statements (17.43%), demonstrating the criticality of ethical and professional conduct for social work practice and the exam.

The remaining competencies showed more varied representation across different focus areas. This distribution suggests that while the exam addresses a broad range of social work competencies, it places particular emphasis on assessment and intervention knowledge, along with foundational ethical practice.

Twenty out of the 109 applied knowledge statements (18.3%) received 100% consensus during independent ratings and before any group discussions took place. Most of these applied knowledge statements were from the Intervention and Practice category (i.e., eight statements). There were only 10 instances where majority consensus differed from individual rating patterns (9.2%). Out of these 10 applied knowledge statements, seven of them were changed to a different competency based on group discussions. For example, 40% of the participants chose Competency 4 (specifically 4.a) for applied knowledge statements I.A.6, but after group discussions, the majority consensus was recorded for Competency 1 (specifically 1.a) because of its comprehensive, ethics-grounded approach to professional competency maintenance.

During group discussions, we observed common patterns when the majority consensus differed from individual ratings such as a) group discussions introduced sequencing arguments (e.g., engagement before assessment) that resolved ambiguities, b.) discussions often clarified whether applied knowledge statements address foundational knowledge or practice implementation, and c.) discussions further clarified scope (e.g., individual versus systems-level focus) which helped assignment to an appropriate competency.

Table 2 presents the majority agreement by CSWE competency.

Table 2. Majority Agreement by CSWE Competency

Majority CSWE Competency	Number of applied knowledge statements matched	Percentage
<u>Competency 1</u>	19	17.43
<u>Competency 2</u>	2	1.83
<u>Competency 3</u>	7	6.42
<u>Competency 4</u>	1	0.92
<u>Competency 5</u>	7	6.42
<u>Competency 6</u>	9	8.26
<u>Competency 7</u>	33	30.28
<u>Competency 8</u>	27	24.77
<u>Competency 9</u>	4	3.67

Alignment between ASWB Masters Exam Applied Knowledge Statements and CSWE Subcompetencies

Examining alignment at the subcompetency level provides a more granular view of how the applied knowledge statements align with specific dimensions within each broader competency. All subcompetencies, except for 4.a, *apply research findings to inform and improve practice, policy, and programs*, were represented among the applied knowledge statements, indicating that the exam content spans the full range of expected social work competencies at the subcompetency level.

- **Subcompetency 7.a: Apply theories of human behavior and person-in-environment, as well as other culturally responsive and interprofessional conceptual frameworks, when assessing clients and constituencies** was the most frequently aligned subcompetency, with 29 statements (26.61%). This substantial representation indicates that foundational theoretical knowledge for assessment is emphasized on the exam.
- **Subcompetency 8.a: Engage with clients and constituencies to critically choose and implement culturally responsive, evidence-informed interventions to achieve client and constituency goals** was the second most represented, with 24 statements (22.02%), highlighting the practical application of intervention skills.
- **Subcompetency 1.a: Make ethical decisions applying the standards of the National Association of Social Workers Code of Ethics, relevant laws and regulations, models for ethical decision making, ethical conduct of research, and additional codes of ethics within the profession as appropriate to the context** aligned with 12 statements (11.01%), reflecting the importance of ethical decision-making on the exam.

Subcompetency 1.c, 2.a, 2.b, and 4.b had the lowest representation, with only one applied knowledge statements aligned with each subcompetency. There was no direct match for subcompetency 4.a.

Although there was no direct match for subcompetency 4.a, this finding aligns with how 4.a is structured; as a broad, foundational subcompetency that serves as a **prerequisite** for many other subcompetencies. When examining individual-level data rather than consensus data, we observe that 4.a emerges as a **secondary component** for a few applied knowledge statements including I.A.6 (*Importance of professional development activities to improve practice and maintain current professional knowledge*) and III.C.4 (*Basic and applied research design and methods, data collection and analysis methods, and methods to assess reliability and validity in social work research*).

Table 3 presents the majority agreement by CSWE subcompetency.

Table 3. Majority Agreement by CSWE Subcompetency

Majority CSWE Subcompetency	Number of applied knowledge statements matched	Percentage
<u>Subcompetency 1.a</u>	12	11.01
<u>Subcompetency 1.b</u>	2	1.83
<u>Subcompetency 1.c</u>	1	0.92
<u>Subcompetency 1.d</u>	4	3.67
<u>Subcompetency 2.a</u>	1	0.92
<u>Subcompetency 2.b</u>	1	0.92
<u>Subcompetency 3.a</u>	4	3.67
<u>Subcompetency 3.b</u>	3	2.75
<u>Subcompetency 4.a</u>	0	0.00
<u>Subcompetency 4.b</u>	1	0.92
<u>Subcompetency 5.a</u>	4	3.67
<u>Subcompetency 5.b</u>	3	2.75
<u>Subcompetency 6.a</u>	4	3.67
<u>Subcompetency 6.b</u>	5	4.59
<u>Subcompetency 7.a</u>	29	26.61
<u>Subcompetency 7.b</u>	4	3.67
<u>Subcompetency 8.a</u>	24	22.02
<u>Subcompetency 8.b</u>	3	2.75
<u>Subcompetency 9.a</u>	2	1.83
<u>Subcompetency 9.b</u>	2	1.83

Summary of Qualitative Findings

The SME discussions revealed several key themes regarding the alignment between applied knowledge statements and CSWE competencies.

Competency 1: Demonstrate Ethical and Professional Behavior as a Foundational Framework

SMEs repeatedly justified selecting Competency 1 for ethical and legal statements by characterizing it as the overarching framework encompassing all ethical obligations. There were a total of 28 direct references in comments highlighting this pattern. The SMEs noted that while more specific competencies might also apply, Competency 1 serves as the foundational requirement for all practices.

Especially for applied knowledge statements listed under the Values and Ethics category, SMEs applied the systematic logic of first identifying that the content addressed ethics and/or law, then selected Competency 1 as the universal theme, while occasionally noting other competencies that may tangentially apply. The strongest alignment occurred when ethical language was explicit within statements, suggesting that CSWE's framework for this competency is well-established and clearly articulated. This finding aligns with social work's core values and supports ethics as a cross-cutting dimension of practice.

Broad application of Competency 8: Intervene with Individuals, Families, Groups, Organizations, and Communities

SMEs selected Competency 8 for a broad range of practice activities with clients. There were a total of 47 direct references in comments to Competency 8 as an intervention selection framework during group discussions. SMEs demonstrated clear and consistent reasoning that practice activities (e.g., techniques, methods, skill-building) represent interventions and therefore map to Competency 8. This theme shows the highest consensus of any theme, with SMEs providing consistent rationales across diverse intervention types. This finding also suggests that the definition and boundaries of Competency 8 are well understood and clearly articulated in CSWE documentation.

Engagement and Assessment: Distinguishing Overlapping Competencies

There were 31 direct references in comments highlighting the difficulty in distinguishing Competency 7 (Assessment) from Competency 6 (Engagement). During these discussions, SMEs frequently expressed uncertainty about whether applied knowledge statements about human behavior, development, and assessment methods (e.g., human development across lifespan, assessment techniques requiring HBSE knowledge) belonged under Competency 6 (engagement with person-in-environment knowledge) or Competency 7 (assessment using theories). Many SMEs explicitly acknowledged that both competencies could apply and noted that the distinction is ambiguous or context dependent. For such ambiguous cases, SMEs ended up favoring Competency 7 over Competency 6 (12 statements vs. 4 statements). This theme reveals a substantive overlap in CSWE competency definitions that creates ambiguity in matching applied knowledge statements. Both Competencies 6 and 7 require application of person-in-environment and HBSE knowledge. The distinction appears to be that Competency 7 emphasizes formal assessment methods, while Competency 6 emphasizes initial engagement.

On the other hand, when SMEs evaluated applied knowledge statements explicitly about assessment methods, risk assessment, or indicators to be assessed, they demonstrated high consensus on selecting Competency 7, with consistent reasoning tied to assessment terminology and frameworks. This finding supports the clarity of Competency 7's definition for assessment-specific content. The CSWE language around "applying theories... when assessing" creates clear semantic alignment with knowledge statements using assessment terminology.

Other themes emerging from the discussions include:

- **Individual Versus Systems Focus:** Some statements prompted discussion around individual versus systems focus, with SMEs shifting between person-centered (micro) and policy-focused (macro) interpretations. This reflects the complexity of social work practice operating across multiple system levels and indicates that current frameworks may not adequately accommodate this multilevel perspective.
- **High Consensus on Supervision-Related Statements:** One hundred percent consensus was achieved on supervision-related statements, the only category reaching unanimous agreement. SMEs attributed this clarity to the unique and explicit language used in these statements, which created unambiguous competency matches. These high-consensus areas demonstrate where the frameworks align optimally and provide a model for strengthening alignment in other competency areas.
- **High Consensus on Competency 3: Engage Anti-Racism, Diversity, Equity, and Inclusion (ADEI) in Practice:** SMEs demonstrated the highest consensus for Competency 3 alignment when applied knowledge statements explicitly addressed anti-racism, anti-oppression, diversity, equity, cultural humility, and related concepts. The semantic matching was nearly perfect, with only minimal deliberation or alternative consideration. This also supports the observation that CSWE's emphasis on ADEI is clearly articulated and understood by the SMEs.
- **Specificity Mismatch:** During group discussions, SMEs also mentioned a mismatch between the specificity levels of the ASWB and CSWE frameworks. ASWB statements are substantially more detailed and granular than CSWE competencies, which created challenges in identifying natural alignment fits. This discrepancy was anticipated, given that ASWB Masters applied knowledge statements and CSWE competencies were developed independently from one another.

Key Findings

Key Findings

The alignment study results reveal that all nine CSWE competencies are represented across the 109 applied knowledge statements, with meaningful concentration in assessment and intervention areas. Key findings include:

- Assessment and intervention knowledge are most frequently represented in the applied knowledge statements. Competency 7 (Assess Individuals, Families, Groups, Organizations, and Communities) and Competency 8 (Intervene with Individuals, Families, Groups, Organizations, and Communities) represent the largest proportion of matched applied knowledge statements. Together, these competencies account for more than half of the applied knowledge statements, reflecting their centrality in social work practice.

- Theoretical grounding is heavily emphasized in assessment. At the subcompetency level, Subcompetency 7.a (Apply theories of human behavior and person-in-environment, as well as other culturally responsive and interprofessional conceptual frameworks, when assessing clients and constituencies) emerged as the most frequently aligned element, underscoring the exam's emphasis on application of theoretical knowledge for assessment work.
- All subcompetencies are represented across the applied knowledge statements, except for Subcompetency 4.a (Apply research findings to inform and improve practice, policy, and programs). Although Subcompetency 4a received no direct matches, qualitative data suggests it functions as a secondary component in a handful of statements. This indicates the applied knowledge statements broadly mirror the full scope of CSWE competencies.
- SMEs prioritized Competency 1 (Ethical and Professional Behavior) as foundational to all practice, systematically mapping ethical content to this competency first, even when acknowledging overlaps with other competencies, and positioning it as the overarching frame. Their high agreement suggests that the social work profession has a shared understanding of where ethical obligations fit and their importance.
- SMEs demonstrated strong agreement on specific, explicit competency definitions (such as supervision or ADEI content) but struggled with overlapping or vague definitions, such as distinguishing engagement from assessment. This pattern reveals that definitional clarity drives consistent application.

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Appendix A. ASWB Masters Exam Applied Knowledge Statements

I. Values and Ethics

A. Ethical principles and responsibilities

1. Professional values and principles (e.g., competence, social justice, integrity, dignity and worth of the person)
2. Legal and ethical issues related to the practice of social work, including responsibility to clients/client systems, colleagues, the profession, and society
3. Principles and processes of obtaining informed consent
4. Legal and ethical issues regarding confidentiality, including limitations of confidentiality (e.g., HIPAA, PHI, privacy)
5. Identifying and resolving ethical dilemmas
6. Importance of professional development activities to improve practice and maintain current professional knowledge (e.g., in-service training, licensing requirements, reviews of literature, workshops, on-going supervision, consultation)
7. Social worker self-care principles
8. Burnout, secondary trauma, and compassion fatigue

B. Diversity and social justice

1. Anti-oppressive and anti-racist approaches
2. Social, racial, environmental, and economic justice principles
3. Social justice, truth and reconciliation, and restorative practices related to clients/client systems from historically oppressed and marginalized communities
4. Cultural impacts of exploitation across marginalized communities (e.g., financial, immigration status, trafficking, Missing and Murdered Indigenous Women)
5. Impact of culture, race, ethnicity, sexual orientation, gender, and intersectionality on behaviors, attitudes, and identity formation
6. Privilege and bias and their impact on client/client systems (e.g., implicit bias, microaggressions)
7. Power differential and racial privilege (e.g., internalized racial and ethnic inferiority and superiority)
8. Impact of globalization, immigration, and refugee or immigration status on clients/client systems and service delivery
9. Accessibility including language, physical, and cultural access (e.g., translation and interpretation, neurodiversity, American Sign Language)

C. Ethical service delivery

1. Professional boundaries in the social worker-client/client system relationship (e.g., power differences, influence, privilege, conflicts of interest, self-disclosure, dual relationships)
2. Protecting and enhancing client/client system self-determination (e.g., medication, medical treatment, counseling, placement, right to refuse services)
3. Legal and ethical issues related to death and dying
4. Legal and ethical issues regarding documentation (e.g., maintaining client records)
5. Responsible billing practices (e.g., managed care, insurance reimbursement, incident to billing)
6. Legal and ethical issues regarding mandatory reporting (e.g., abuse, threat of harm, impaired professionals, duty to warn)
7. Ethical issues in supervision and management
8. Legal and ethical issues regarding termination
9. Impact of governmental policies on service delivery (e.g., local, state, federal legislation and policy)
10. Ethical issues related to electronic practice

II. Assessment and Planning

A. Assessment concepts

1. Biopsychosocial assessment model and related components and factors
2. Impact of poverty on individuals, families, groups, organizations, and communities (e.g., social determinants of health)
3. Typical and atypical physical, cognitive, emotional, and sexual development throughout the lifespan
4. Indicators, dynamics, and impact of physical, sexual, and psychological abuse and neglect on individuals, families, groups, organizations, and communities
5. Characteristics of perpetrators of abuse, neglect, and exploitation
6. Indicators, dynamics, and impact of exploitation across the lifespan (e.g., financial, immigration status, trafficking)
7. Indicators of mental and emotional illness throughout the lifespan
8. Effects of physical and mental ability throughout the lifespan
9. Client/client system competence, self-determination, and self-monitoring (e.g., financial decisions, treatment decisions, emancipation, age of consent, permanency planning)
10. Co-occurring disorders and conditions

11. Racial, ethnic, cultural, and spiritual/faith development throughout the lifespan
12. The influence and impact of technology, including social media, on client/client-systems (personal and professional)
13. Defense mechanisms and their effects on behavior and relationships
14. Impact of aging on the individual and family systems
15. Impact of caregiving on families
16. Indicators and impact of addiction and substance use and abuse on individuals, families, groups, organizations, and communities
17. Factors influencing self- and body-image (e.g., culture, race, religion/spirituality, age, ability, trauma, gender, sexuality, size)
18. Indicators and impact of trauma, stressors, violence, and crises on individuals, families, groups, organizations, and communities (e.g., intergenerational, historical, and complex)
19. Dynamics of interpersonal relationships and relationship development (e.g., family, couples, groups, polyamory)
20. Family dynamics and functioning and the effects on individuals, families, groups, organizations, and communities
21. Impact of out-of-home placement (e.g., hospitalization, foster care, residential care, criminal justice system) on clients/client systems
22. Factors of out-of-home displacement (e.g., homelessness, immigration, and refugee status on clients/client systems)
23. Impact of urbanization, globalization, environmental hazards, and climate change on individuals, families, groups, organizations, and communities

B. Assessment methods and techniques

1. Methods of assessing risk of harm to self and others
2. Methods, techniques, and instruments for assessing client/client system strengths, resources, needs, and challenges
3. Principles and techniques of interviewing (e.g., supporting, clarifying, confronting, validating, feedback, reflecting, language differences, use of interpreters)
4. Methods for obtaining sensitive and/or confidential information (e.g., substance use, sexual abuse)
5. Components and function of the mental status examination
6. Methods of involving clients/client systems in problem identification, problem solving, and intervention planning
7. Methods of incorporating information from records and evaluations (e.g., employment, medical, psychological, school)
8. Methods for assessing resilience and coping abilities

9. Indicators of and methods of assessing motivation, barriers, and readiness for change
10. Methods of assessing clients'/client systems' communication skills

C. Assessment practices

1. Use and side effects of common prescription, over-the-counter, and alternative medications
2. Assessing the availability of and determining appropriate community resources
3. Factors and processes used in goal planning, treatment planning, triage, and service plans
4. Cultural considerations in the creation of an intervention plan
5. Criteria used in the selection of intervention/treatment modalities (e.g., client/client system abilities, developmental level, culture, life stage)
6. Indicators of client/client system readiness for termination

III. Intervention and Practice

A. Practice Concepts

1. Principles and techniques for building and maintaining a helping relationship (e.g., acceptance, empathy, rapport)
2. Strengths-based and empowerment strategies and interventions
3. The social worker's role in the problem-solving process
4. Parenting capacities and skill building
5. Permanency planning (e.g., child welfare)
6. End of life practice (e.g., continuity of care, hospice, palliative care, stages of death and dying)
7. Community organizing, development, and mobilizing community participation
8. Interdisciplinary and intra-disciplinary team collaboration (e.g., co-therapy, care conference, IEP)
9. Policies, procedures, regulations, and legislation and their impact on social work practice and service delivery

B. Intervention methods and techniques

1. Contracting and goal-setting techniques (e.g., partializing, measurable objectives)
2. Methods and approaches for providing trauma-informed care for various types of trauma (e.g., complex, vicarious)
3. Approaches to and methods of advocacy for needed services and resources
4. Limit and boundary setting techniques

5. Verbal and nonverbal communication (e.g., body language, congruence, feedback)
6. Evidence-based practices (e.g., cognitive behavioral therapy, dialectical behavior therapy, mindfulness-based stress reduction, motivational interviewing, eye movement desensitization and reprocessing)
7. Principles of active listening and observation
8. Methods for engaging and motivating voluntary and involuntary clients/client systems
9. Harm reduction techniques
10. Methods of teaching coping and other self-care skills to clients
11. Techniques and methods for addiction intervention
12. Crisis intervention and treatment approaches
13. Anger management techniques
14. Stress management techniques
15. Emotional regulation techniques
16. Psychoeducation methods
17. Problem-solving models and approaches
18. Conflict resolution methods
19. Family therapy models, interventions, and approaches
20. Practice with clients experiencing loss, separation, and grief
21. Group work techniques and approaches (e.g., developing and managing group processes and cohesion)
22. Social change and social planning methods
23. Establishing service networks or community resources
24. Case management techniques (e.g., case recording, documentation, case presentation)
25. Discharge, aftercare, wrap-around services, and follow-up

C. Practice evaluation and research

1. Techniques for evaluating progress and effectiveness of intervention, treatment, and service plans
2. Methods, techniques, and instruments used to evaluate social work practice
3. Methods of evaluating agency programs (e.g., needs assessment, formative/summative assessment, cost-effectiveness, cost-benefit analysis, outcomes assessment)
4. Basic and applied research design and methods, data collection and analysis methods, and methods to assess reliability and validity in social work research (e.g., objective, subjective, qualitative, quantitative)

D. Supervision and administration

1. Methods for creating, implementing, and evaluating policies and procedures for safe, inclusive, and a healthy work environment
2. Methods for creating, implementing, and evaluating policies and procedures that minimize risk for individuals, families, groups, organizations, and communities
3. Supervision and consultation models and techniques (e.g., individual, peer, group, case recording)
4. Supervisee's role in supervision (e.g., identifying learning needs, self-assessment, prioritizing)
5. Transference and countertransference within supervisory relationships

Appendix B. CSWE Competency Descriptions

Competency 1: Demonstrate Ethical and Professional Behavior

Subcompetency 1.a: Make ethical decisions by applying the standards of the National Association of Social Workers Code of Ethics, relevant laws and regulations, models for ethical decision making, ethical conduct of research, and additional codes of ethics within the profession as appropriate to the context.

Subcompetency 1.b: Demonstrate professional behavior; appearance; and oral, written, and electronic communication.

Subcompetency 1.c: Use technology ethically and appropriately to facilitate practice outcomes.

Subcompetency 1.d: Use supervision and consultation to guide professional judgment and behavior.

Competency 2: Advance Human Rights and Social, Racial, Economic, and Environmental Justice

Subcompetency 2.a: Advocate for human rights at the individual, family, group, organizational, and community system levels.

Subcompetency 2.b: Engage in practices that advance human rights to promote social, racial, economic, and environmental justice.

Competency 3: Engage Anti-Racism, Diversity, Equity, and Inclusion (ADEI) in Practice

Subcompetency 3.a: Demonstrate anti-racist and anti-oppressive social work practice at the individual, family, group, organizational, community, research, and policy levels.

Subcompetency 3.b: Demonstrate cultural humility by applying critical reflection, self-awareness, and self-regulation to manage the influence of bias, power, privilege, and values in working with clients and constituencies, acknowledging them as experts of their own lived experiences.

Competency 4: Engage in Practice-Informed Research and Research-Informed Practice

Subcompetency 4.a: Apply research findings to inform and improve practice, policy, and programs.

Subcompetency 4.b: Identify ethical, culturally informed, anti-racist, and anti-oppressive strategies that address inherent biases for use in quantitative and qualitative research methods to advance the purposes of social work.

Competency 5: Engage in Policy Practice

Subcompetency 5.a: Use social justice, anti-racist, and anti-oppressive lenses to assess how social welfare policies affect the delivery of and access to social services.

Subcompetency 5.b: Apply critical thinking to analyze, formulate, and advocate for policies that advance human rights and social, racial, economic, and environmental justice.

Competency 6: Engage with Individuals, Families, Groups, Organizations, and Communities

Subcompetency 6.a: Apply knowledge of human behavior and person-in-environment, as well as interprofessional conceptual frameworks, to engage with clients and constituencies.

Subcompetency 6.b: Use empathy, reflection, and interpersonal skills to engage in culturally responsive practice with clients and constituencies.

Competency 7: Assess Individuals, Families, Groups, Organizations, and Communities

Subcompetency 7.a: Apply theories of human behavior and person-in-environment, as well as other culturally responsive and interprofessional conceptual frameworks, when assessing clients and constituencies.

Subcompetency 7.b: Demonstrate respect for client self-determination during the assessment process by collaborating with clients and constituencies in developing a mutually agreed-upon plan.

Competency 8: Intervene with Individuals, Families, Groups, Organizations, and Communities

Subcompetency 8.a: Engage with clients and constituencies to critically choose and implement culturally responsive, evidence-informed interventions to achieve client and constituency goals.

Subcompetency 8.b: Incorporate culturally responsive methods to negotiate, mediate, and advocate with and on behalf of clients and constituencies.

Competency 9: Evaluate Practice with Individuals, Families, Groups, Organizations, and Communities

Subcompetency 9.a: Select and use culturally responsive methods for evaluation of outcomes.

Subcompetency 9.b: Critically analyze outcomes and apply evaluation findings to improve effectiveness practice with individuals, families, groups, organizations, and communities.

From: ASWB
Sent: Thursday, March 19, 2026 2:30 PM
Subject: Social work regulatory research funding available



Association of Social Work Boards

Now accepting research proposals

The Association of Social Work Boards, as part of an ongoing commitment to expanding research in social work regulation, is accepting funding proposals from researchers focusing on the subjects of social work supervision and technology in social work.

[Download the RFP](#)

Proposals are due by 5 p.m. EDT, June 12, 2026.

All proposals will be reviewed and evaluated by the association's Regulatory Research Committee, made up of volunteers knowledgeable about social work regulation.

Prior grants were awarded in 2023, and included projects that explored equitable paths into social work licensure, the impact of policy changes on the social work workforce, and the impact of regulatory rules on client safety and social workers' earnings. [Learn more about the research funded in 2023.](#)

Supporting Social Work Standards



Association of Social Work Boards | 17126 Mountain Run Vista Ct. | Culpeper, VA 22701 US

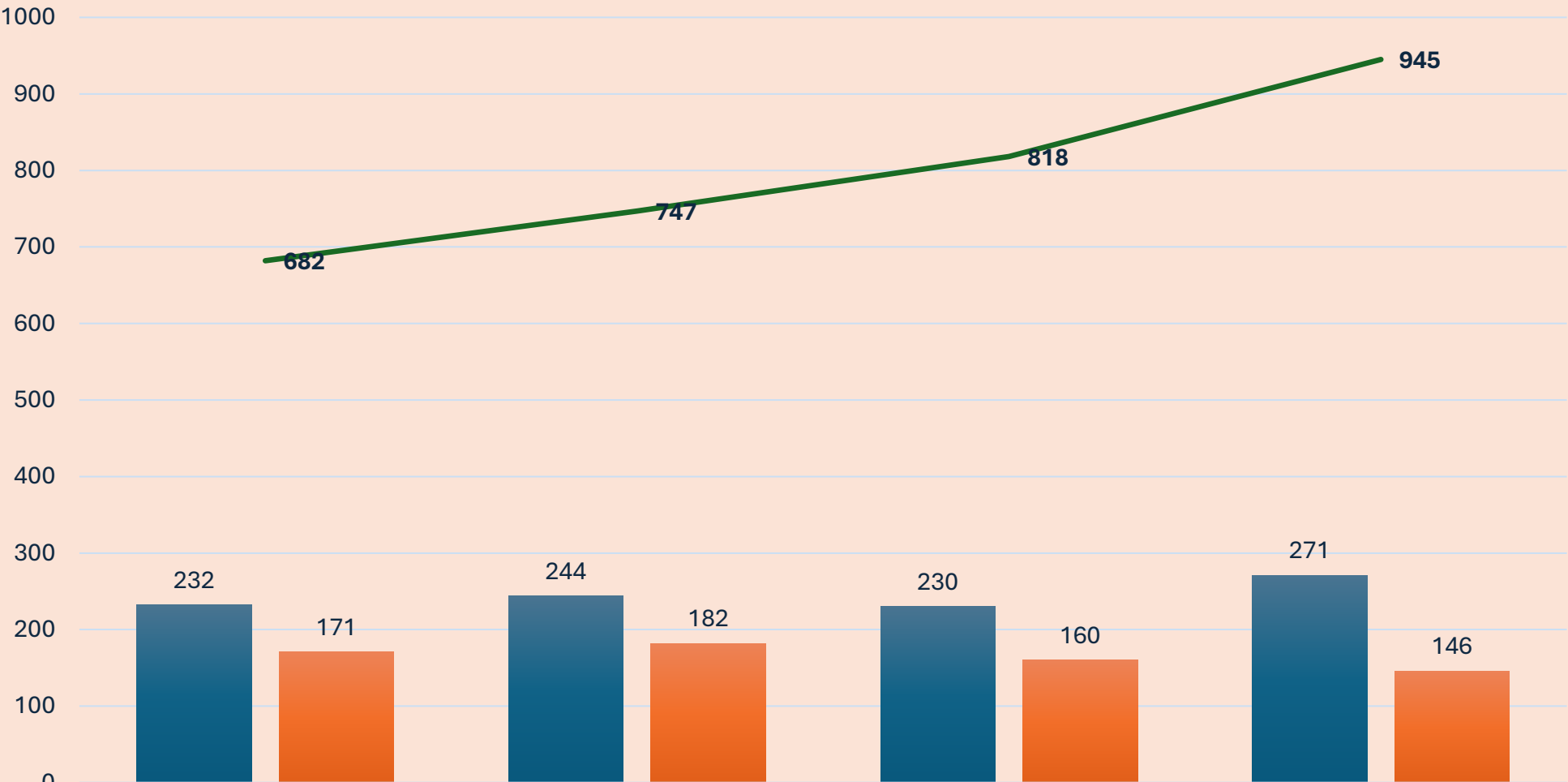


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FY 26 Q2 Enforcement Report

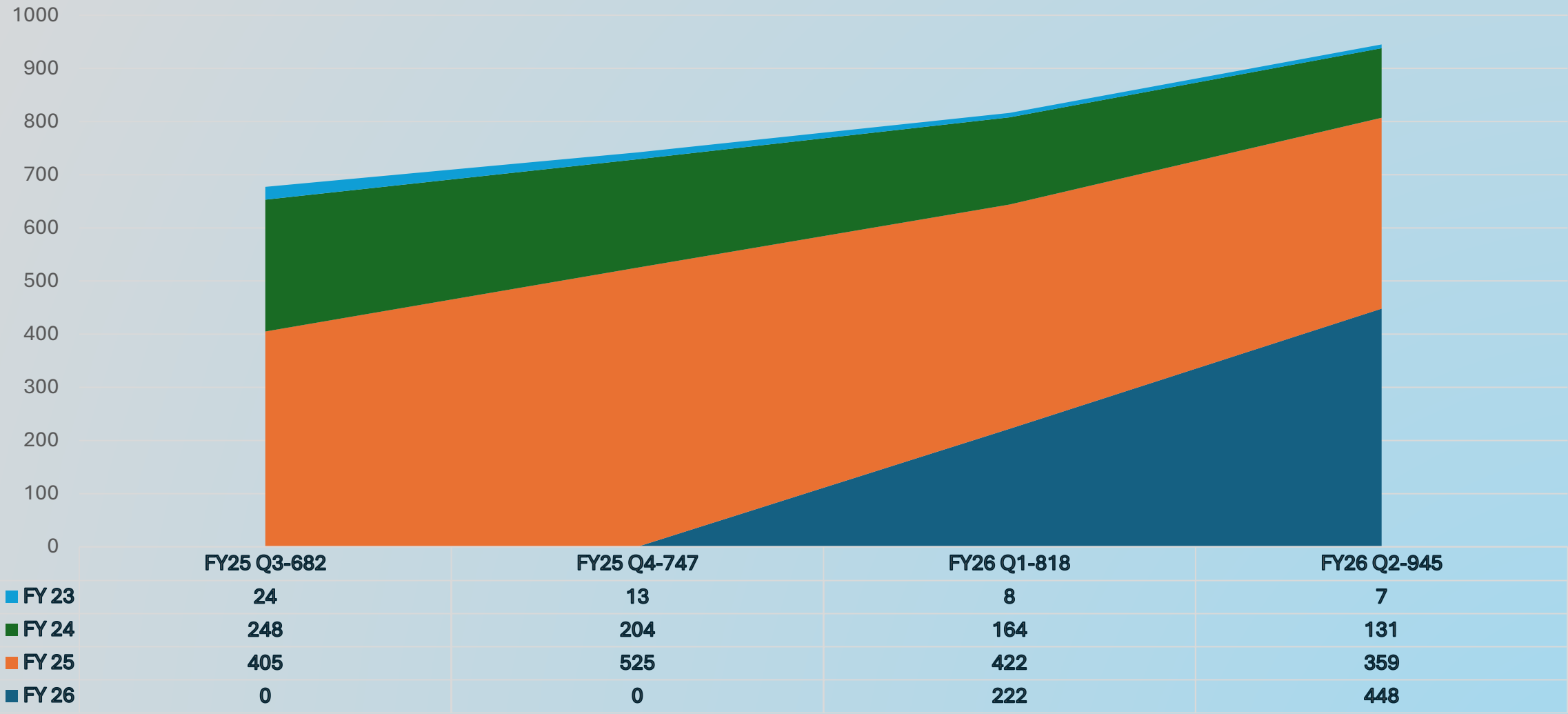
(December 1, 2025- February 28, 2026)

Complaints: Received, Resolved & Pending



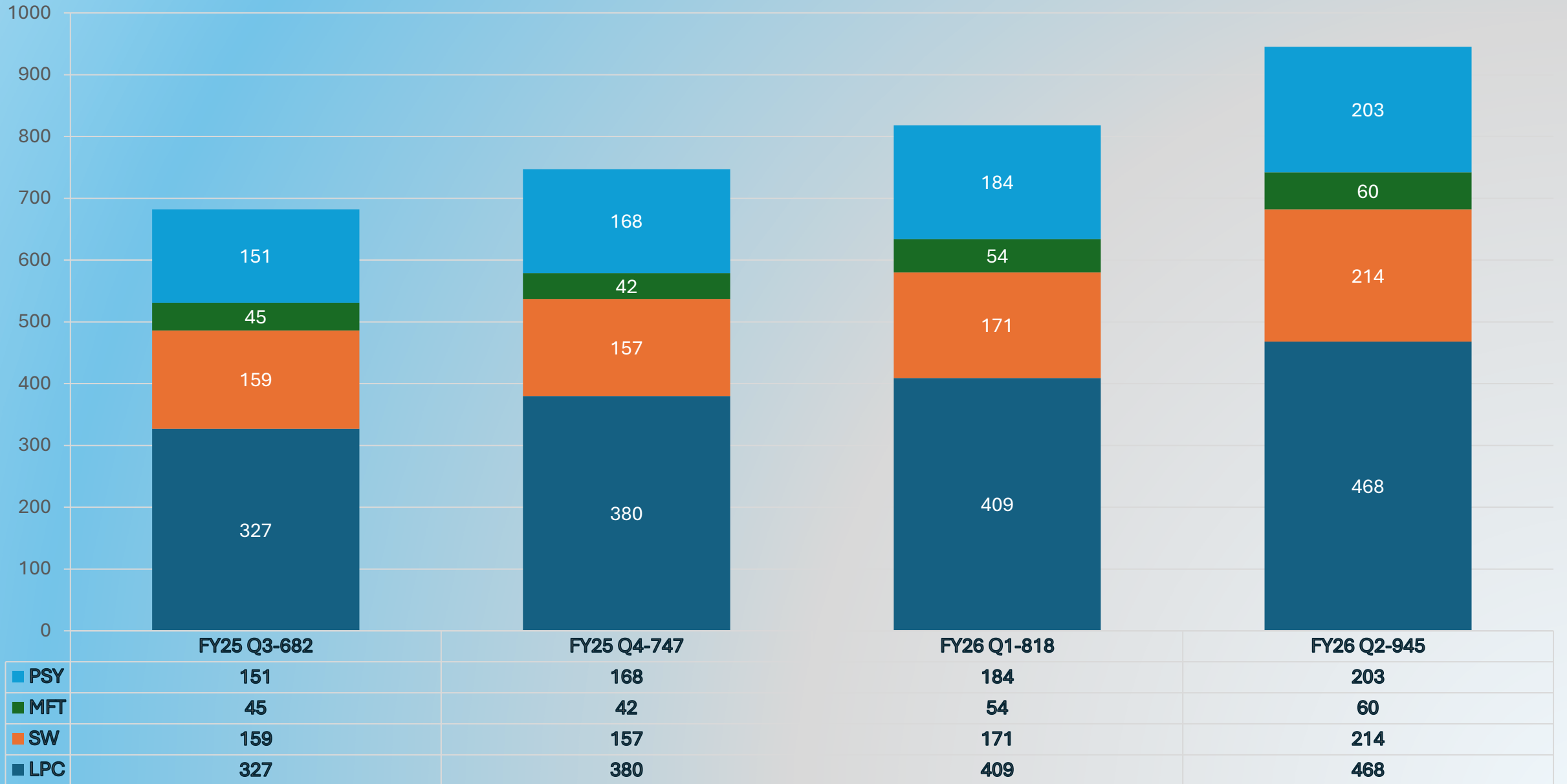
New Complaints Received	232	244	230	271
Complaints Resolved	171	182	160	146
Total Pending Complaints	682	747	818	945

Pending Complaints by Fiscal Year

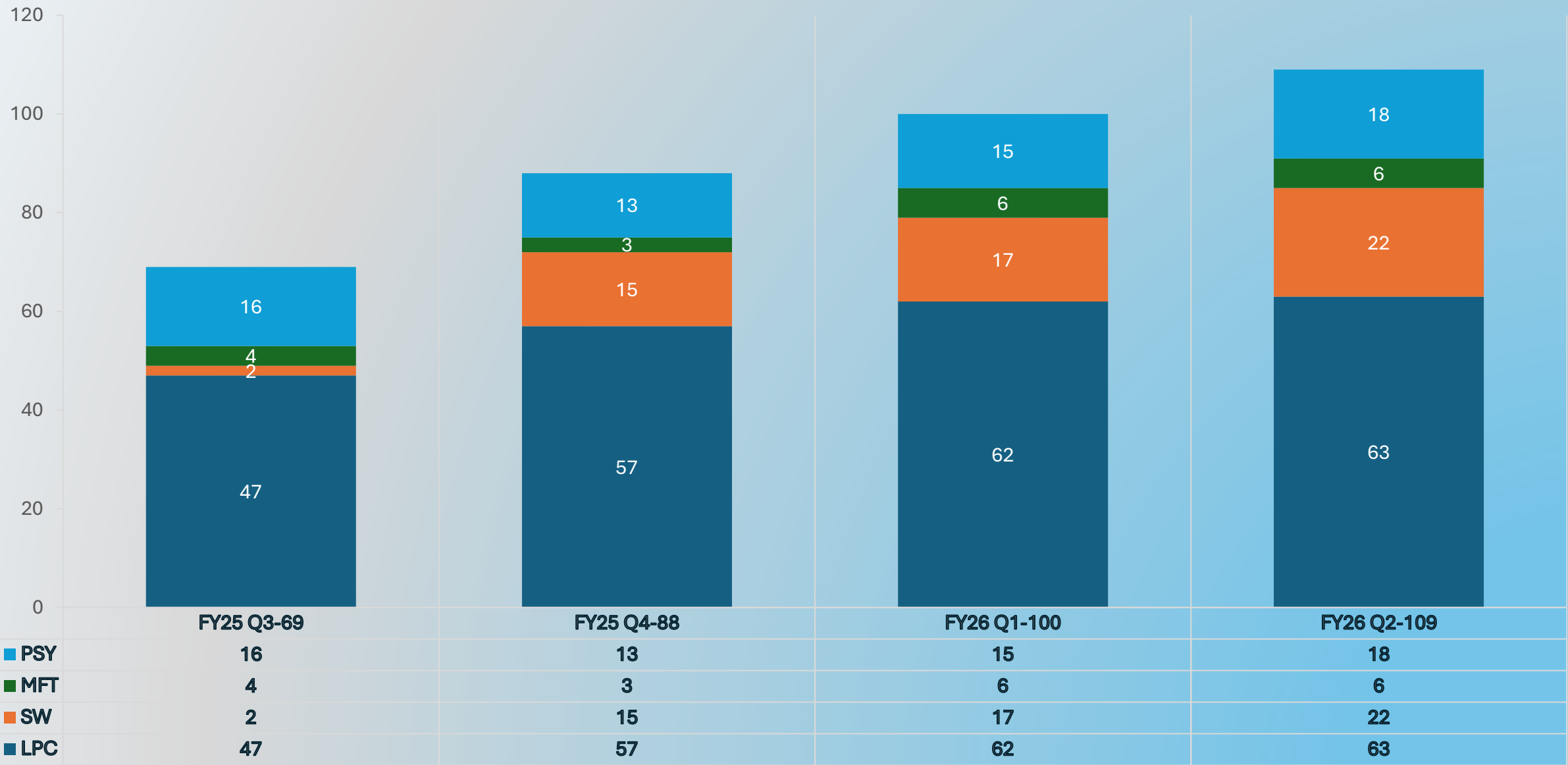


FY 26 FY 25 FY 24 FY 23

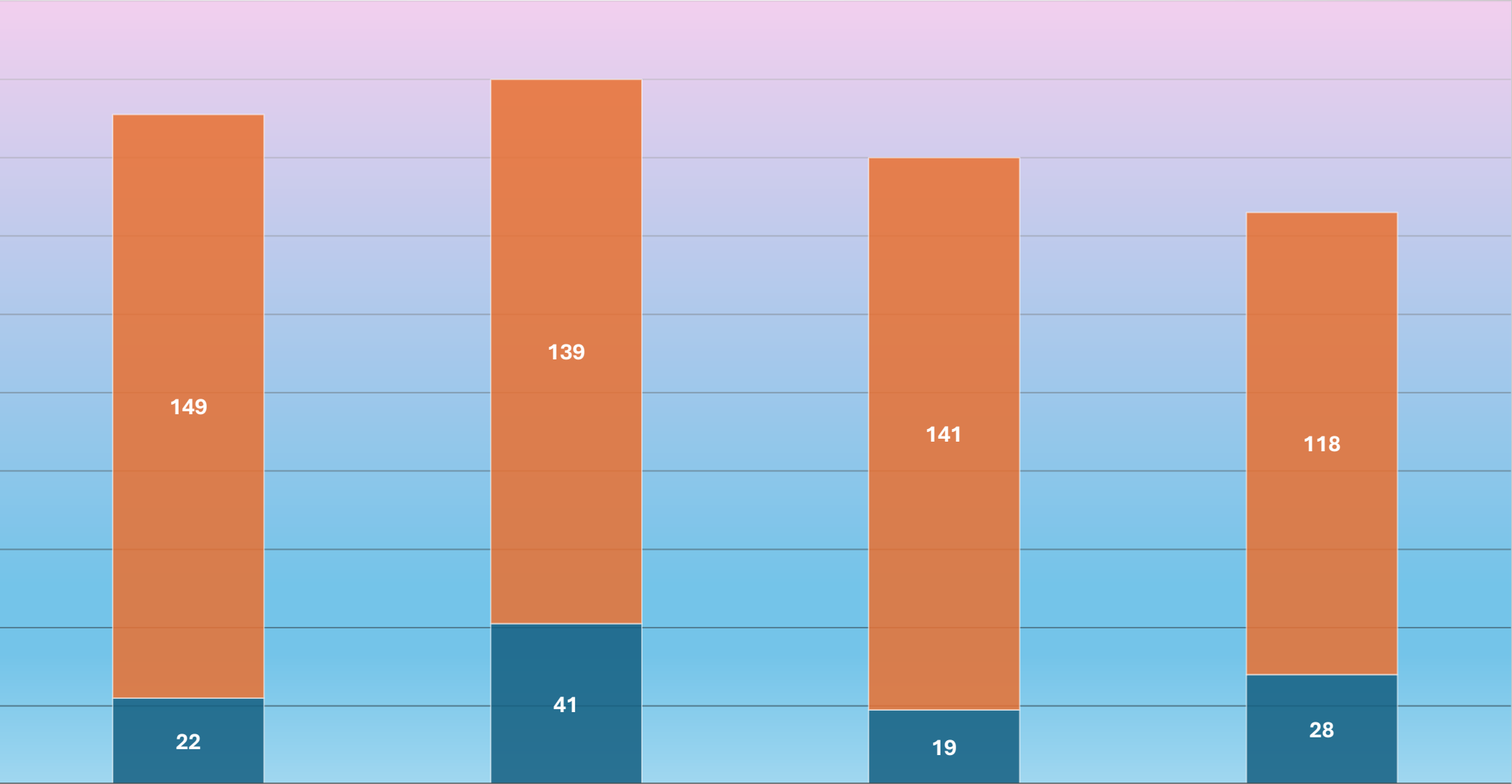
PENDING COMPLAINTS BY BOARD



PRIORITY 1 COMPLAINTS (IMMINENT PHYSICAL HARM AND SEXUAL MISCONDUCT)



Resolved Complaints by Quarter



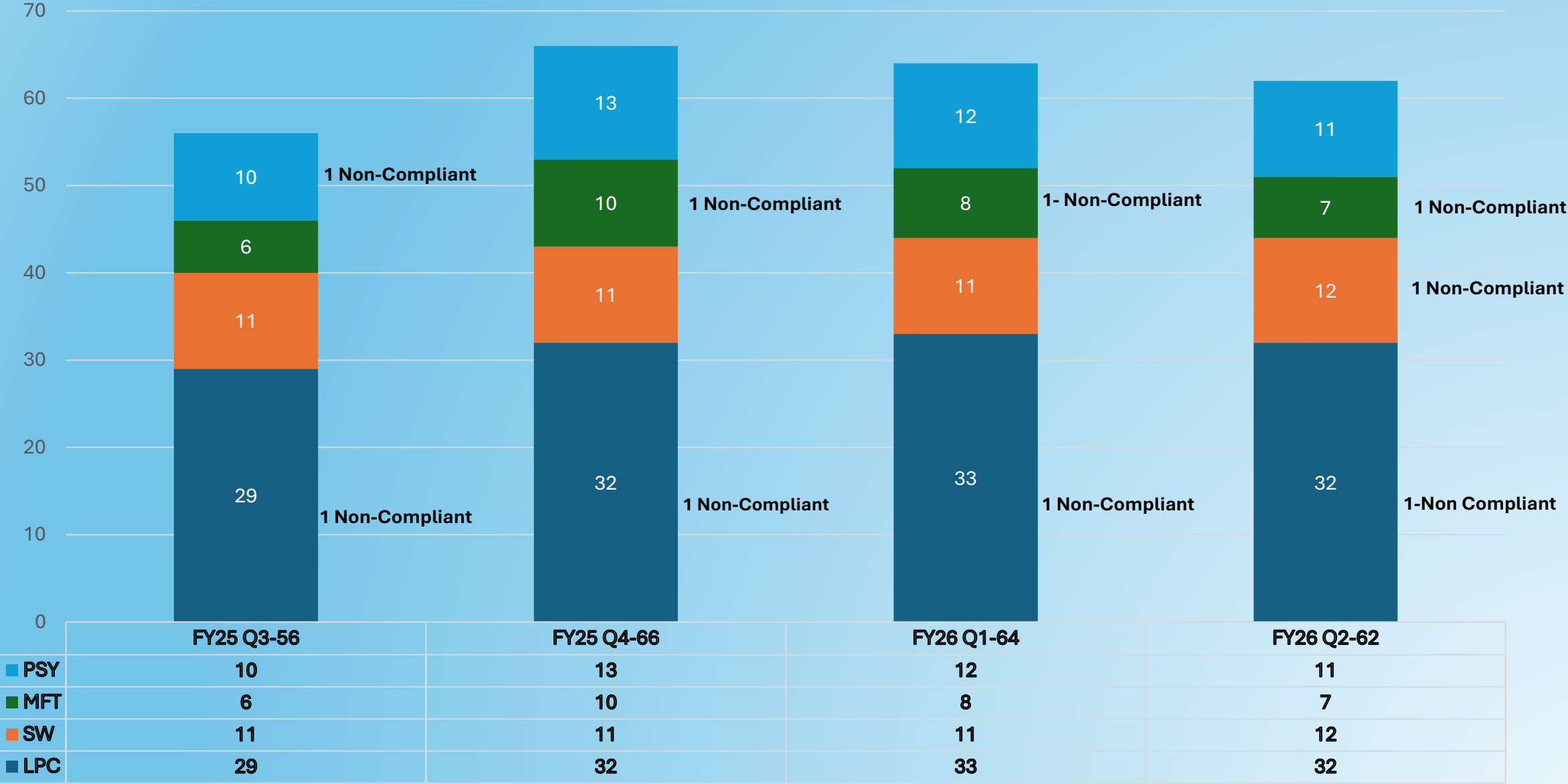
By Dismissal
By Disciplinary Order

FY25 Q3-171	FY25 Q4-180	FY26 Q1-160	FY26 Q2-146
149	139	141	118
22	41	19	28

Contested Complaints Heard at SOAH



Under Compliance



COMPLAINT NO. 2024-00305

IN THE MATTER OF

SANDRA JONES

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§
§
§
§
§

**BEFORE THE TEXAS BEHAVIORAL
HEALTH EXECUTIVE COUNCIL**

**THE TEXAS STATE BOARD
OF SOCIAL WORKER
EXAMINERS**

AGREED ORDER

Pursuant to the authority under §507.305 of the Texas Occupations Code, §2001.056 of the Government Code, and 22 Texas Administrative Code §884.12(e), the Executive Director for the Texas Behavioral Health Executive Council ("Council") hereby approves, ratifies, and enters this Agreed Order with the following Findings of Fact, Conclusions of Law, and Order of the Council, which have been approved and accepted by Sandra Jones ("Respondent") and which constitutes a full settlement and compromise of the complaint currently pending against Respondent before the Council in the above-referenced and numbered matter.

FINDINGS OF FACT

1. Respondent is licensed as a clinical social worker (#06621) in the State of Texas and is, therefore, subject to the jurisdiction of the Council.
2. Respondent failed to provide records to a client after numerous written requests were made.

CONCLUSIONS OF LAW

1. Respondent voluntarily received a license from the Council and, therefore, is bound by the provisions of Chapters 505 and 507 of the Texas Occupations Code and the Rules of the Council, 22 Texas Administrative Code Parts 34 and 41.
2. Violation of the Council's Rules is unprofessional conduct and constitutes grounds for the imposition of sanctions under §§505.451, 507.301, and 507.351 of the Texas Occupations Code.
3. Based on the above Findings of Fact, the Council finds that Respondent violated Council Rules Rule 781.311(c) and Texas Health and Safety Code §§611.045(a), (b), and (c) and 611.008(a)(1) and (2).

ORDER

IT IS HEREBY ORDERED, ADJUDGED, AND DECREED THAT:

1. Respondent's license is hereby REPRIMANDED.
2. Respondent is assessed and shall pay, within thirty (30) days of the date this order is ratified, an administrative penalty in the total amount of \$500.00; of which \$400.00 represents administrative costs and \$100.00 represents administrative penalty. Respondent must submit payment to the Council in the form of a money order or cashier's check.

WARNING

RESPONDENT'S FAILURE TO COMPLY WITH ONE OR MORE TERMS OF THIS ORDER MAY CONSTITUTE A VIOLATION OF 22 TEXAS ADMINISTRATIVE CODE §884.55 REQUIRING FURTHER DISCIPLINARY ACTION.

WAIVERS

On the underlying investigative file, Respondent has waived his or her right to an informal settlement conference, a formal hearing before an Administrative Law Judge at the State Office of Administrative Hearings (SOAH), and judicial review pursuant to Texas Government Code Chapter 2001, in exchange for the conditions set out in this Agreed Order.

THE RESPONDENT, BY SIGNING THIS ORDER, AGREES TO ITS TERMS, ACKNOWLEDGES UNDERSTANDING OF THE FORMAL NOTICES, FINDINGS OF FACT, AND CONCLUSIONS OF LAW SET FORTH HEREIN AND COVENANTS TO SATISFACTORILY COMPLY WITH THE MANDATES OF THIS ORDER IN A TIMELY MANNER. RESPONDENT FURTHER ACKNOWLEDGES AND AGREES THAT HE OR SHE HAS AGREED TO THIS ORDER UPON THE ADVICE AND CONSENT OF COUNSEL, OR THAT HE OR SHE HAS HAD THE OPPORTUNITY TO HAVE THIS ORDER REVIEWED BY COUNSEL OF HIS OR HER CHOICE.

FOR THE RESPONDENT:

FOR THE STAFF OF THE COUNCIL:


Sandra Jones
Clinical Social Worker


Brian Clark
Texas Bar No. 24099457

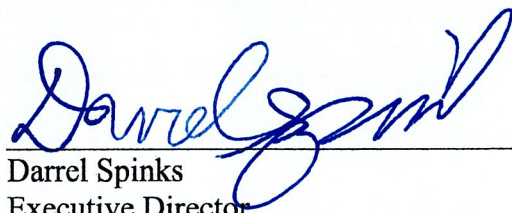
License #06621

Staff Attorney
Texas Behavioral Health Executive Council
1801 Congress Ave., Suite 7.300
Austin, Texas 78701

DATE SIGNED: 02/02/2026

DATE SIGNED: 2/3/26

APPROVED, RATIFIED, AND ENTERED THIS 5th DAY OF February, 2026.

A handwritten signature in blue ink, appearing to read "Darrel Spinks", is written over a horizontal line.

Darrel Spinks
Executive Director
Texas Behavioral Health Executive Council

COMPLAINT NO. 2024-00355

IN THE MATTER OF

KENNETH BJORK II

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§

**BEFORE THE TEXAS BEHAVIORAL
HEALTH EXECUTIVE COUNCIL**

**THE TEXAS STATE BOARD
OF SOCIAL WORKER
EXAMINERS**

AGREED ORDER

Pursuant to the authority under §507.305 of the Texas Occupations Code, §2001.056 of the Government Code, and 22 Texas Administrative Code §884.12(e), the Executive Director for the Texas Behavioral Health Executive Council ("Council") hereby approves, ratifies, and enters this Agreed Order with the following Findings of Fact, Conclusions of Law, and Order of the Council, which have been approved and accepted by Kenneth Bjork II ("Respondent") and which constitutes a full settlement and compromise of the complaint currently pending against Respondent before the Council in the above-referenced and numbered matter.

FINDINGS OF FACT

1. Respondent is licensed as a clinical social worker (#34289) in the State of Texas and is, therefore, subject to the jurisdiction of the Council.
2. From about July of 2022 to about October of 2023, Respondent conducted the practice of social work without an active license.

CONCLUSIONS OF LAW

1. Respondent voluntarily received a license from the Council and, therefore, is bound by the provisions of Chapters 505 and 507 of the Texas Occupations Code and the Rules of the Council, 22 Texas Administrative Code Parts 34 and 41.
2. Violation of the Council's Rules is unprofessional conduct and constitutes grounds for the imposition of sanctions under §§505.451, 507.301, and 507.351 of the Texas Occupations Code.
3. Based on the above Findings of Fact, the Council finds that Respondent violated Council Rules 882.23(a).

ORDER

IT IS HEREBY ORDERED, ADJUDGED, AND DECREED THAT:

1. Respondent's license is hereby REPRIMANDED.
2. Respondent is assessed and shall pay, within one hundred and eighty (180) days of the date this order is ratified, an administrative penalty in the total amount of \$500; of which \$400.00 represents administrative costs and \$100.00 represents administrative penalty.

WARNING

RESPONDENT'S FAILURE TO COMPLY WITH ONE OR MORE TERMS OF THIS ORDER MAY CONSTITUTE A VIOLATION OF 22 TEXAS ADMINISTRATIVE CODE §884.55 REQUIRING FURTHER DISCIPLINARY ACTION.

WAIVERS

On the underlying investigative file, Respondent has waived his or her right to an informal settlement conference, a formal hearing before an Administrative Law Judge at the State Office of Administrative Hearings (SOAH), and judicial review pursuant to Texas Government Code Chapter 2001, in exchange for the conditions set out in this Agreed Order.

THE RESPONDENT, BY SIGNING THIS ORDER, AGREES TO ITS TERMS, ACKNOWLEDGES UNDERSTANDING OF THE FORMAL NOTICES, FINDINGS OF FACT, AND CONCLUSIONS OF LAW SET FORTH HEREIN AND COVENANTS TO SATISFACTORILY COMPLY WITH THE MANDATES OF THIS ORDER IN A TIMELY MANNER. RESPONDENT FURTHER ACKNOWLEDGES AND AGREES THAT HE OR SHE HAS AGREED TO THIS ORDER UPON THE ADVICE AND CONSENT OF COUNSEL, OR THAT HE OR SHE HAS HAD THE OPPORTUNITY TO HAVE THIS ORDER REVIEWED BY COUNSEL OF HIS OR HER CHOICE.

FOR THE RESPONDENT:

Kenneth S. Bjork II
Kenneth Bjork
Clinical Social Worker
License #34289

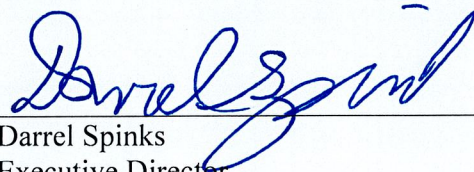
DATE SIGNED: 2/9/26

FOR THE STAFF OF THE COUNCIL:


Brian Clark
Texas Bar No. 24099457
Staff Attorney
Texas Behavioral Health Executive Council
1801 Congress Ave., Suite 7.300
Austin, Texas 78701

DATE SIGNED: 2/9/26

APPROVED, RATIFIED, AND ENTERED THIS 11th DAY OF February, 2026.

A handwritten signature in blue ink, appearing to read "Darrel Spinks", written over a horizontal line.

Darrel Spinks
Executive Director
Texas Behavioral Health Executive Council

Rule: 781.313. Competency and the Required Basis for Professional Judgments.

Action: Proposed New Rule

Comment: The proposed new rule provides clearer requirements for licensees to be considered competent to provide a particular service or a professional judgment.

§781.313. Competency and the Required Basis for Professional Judgments.

- (a) Licensees may only provide services for which they have the education, skills, and training to perform competently.
 - (1) Competency includes the ability to provide services that takes into account characteristics of the distinct population of the individual receiving services, including age, gender, ethnicity, national origin, disability, language, and socioeconomic status.
- (b) Licensees must maintain current knowledge of scientific and professional information that ensures competency in every area in which they provide services.
- (c) Licensees may only provide services in an unfamiliar area or involving new techniques after first undertaking appropriate study, training, supervision, or consultation from a professional competent to provide such services to ensure the competence of their work and to protect clients or other affected individuals from the potential for harm.
- (d) In emerging areas in which generally recognized standards for preparatory training do not exist, licensees must take reasonable steps to ensure the competence of their work and to protect clients or other affected individuals from the potential for harm.
- (e) Licensees who lack the competency to provide particular services to a specific individual must withdraw and refer the individual to an appropriate service provider.
- (f) Licensees must rely on scientifically and professionally derived knowledge when making professional judgments.
 - (1) Professional judgments must be supported by information and techniques sufficient to provide appropriate substantiation for such findings.
 - (2) Licensees may only administer, score, interpret or use assessment techniques or tests if they are familiar with the reliability,

validation and related standardization or outcome studies of, and proper applications and use of, the techniques they use.

- (3) Licensees who administer, score, interpret or utilize assessment techniques, tests or instruments must do so in a manner and for purposes for which there are professional or scientific bases.
- (4) Licensees may not base decisions or recommendations on data or test results that are outdated for the current purpose, or on tests and measures that are obsolete or not useful for the current purpose.
- (5) Licensees must meet any education, training, or licensure requirements established by a test publisher for the purchase or use of its test materials. Council staff may presume that a licensee meets any such requirements if a test publisher or other authorized vendor, sells test materials to a licensee. Any false or misleading representation by a licensee regarding the individual's qualifications will negate this presumption.
- (g) Licensees may not evaluate any individual's mental, emotional, or behavioral condition unless the licensee either personally interviews the individual or discloses with the evaluation that the licensee has not personally interviewed the individual.
- (h) Licensees must base all professional judgments and services on an assessment, evaluation, or diagnosis of the individual client.
- (i) In emergencies, when licensees are asked to provide services to individuals for whom appropriate mental health services are not available and for which the licensee has not obtained the necessary competence, licensees may provide such services until the emergency has abated or to the extent necessary to ensure that services are not denied. If ongoing services are provided, licensees must comply with subsection (c) of this section as soon as practicable or refer the patient to an appropriate service provider.