

POLICY AND ADVOCACY COMMITTEE MEETING MINUTES January 16, 2009

Waterfront Hotel
Jack London Square
10 Washington Street
Oakland, CA 94607
9:30 a.m. – 3:30 p.m.

Members Present

Gordonna DiGiorgio, Chair, Public Member
Renee Lonner, LCSW Member
Karen Roye, Public Member
Dr. Ian Russ, Chair, MFT Member

Staff Present

Paul Riches, Executive Officer
Kim Madsen, Assistant Executive Officer
Tracy Rhine, Legislation Analyst
Kristy Schieldge, Legal Counsel

Members Absent

None

Guest List

On file

Gordonna DiGiorgio, Committee Chair, called the meeting to order at 9:30 a.m. Paul Riches called roll, and a quorum was established.

I. Introductions

Audience members introduced themselves.

II. Review and Approval of the October 10, 2008 Policy and Advocacy Committee Meeting Minutes

Ian Russ moved to accept the October 10, 2008 Policy and Advocacy Committee Meeting Minutes. Renee Lonner seconded. The Committee voted (4-0) to pass the motion.

III. Budget Update

Mr. Riches reported on the status of both the Board's budget and the funds received through the Mental Health Services Act (MHSA) for fiscal year 2008-2009. Mr. Riches indicated that both funds reflected balances at the present time, although it was anticipated that those balances would be significantly reduced by the end of the budget year due to initiatives that are in the works but not yet reflected in the budget estimates.

He reported that due to the hiring freeze associated with the state's budget problems, the Board had been unable to fill vacant staff positions which resulted in reduced expenditures in the areas of salaries, wages and benefits. Mr. Riches noted that Board staff has been working quite a bit of overtime to address some backlogs in operations, and progress has been made in reducing those

backlogs. He indicated that the numbers on the reports presented to the Board were a little high as a result of the department's accounting system being about a month behind, but that the Board was currently very comfortably within its budget.

Mr. Riches then provided information about the state's budget and how the deficit in the General Fund impacts the Board. He noted that the State Controller was meeting to determine priorities in state spending given the cash shortage the state is currently facing. Mr. Riches indicated that at the present time it is difficult to know what is going to happen, or how the Board will be impacted by the state's financial difficulties.

Karen Roye asked if the Board would be impacted by "bumping." She explained that "bumping" pertains to employees whose position may be cut due to funding shortages, and who then have the right to "bump" another employee in a similar classification because one employee has more seniority than the other. She asked if the Board would be impacted by this process. Mr. Riches spoke about mandatory reinstatement rights and how this works within the civil service process. He indicated that the lay-off process within state service is a very complex and difficult process. He indicated that the Board would not be subject to layoffs, in that the pertinent Governor's Order exempted special fund agencies, which includes the Board of Behavioral Sciences, from layoffs.

Ms. Roye then asked about the impact of the financial situation on the Board's contracts, specifically, would anything be slowed down or delayed by the state's current budget and financial difficulties. Mr. Riches indicated there were three areas in which the Board is most vulnerable: 1) potential exposure exists in areas of examinations, as this is a critical function of the Board and is very costly; 2) court reporters are considered personal service contractors, and will potentially be subject to the same registered warrant treatment as all other similar contractors; and 3) reimbursement of SMEs. However, at the present time nothing is certain.

Mr. Riches indicated that at the February Board Meeting recommendations would be presented regarding adaptations the Board will need to make to work through the financial situation.

Ian Russ encouraged the Committee to show support to Board staff for their ongoing efforts during the budget crisis. The Committee discussed briefly different ways in which they could do so.

Janlee Wong, National Association of Associate Social Workers (NASW), raised the issue of possible exemptions to the furlough policy based on the premise that any delays in processing of complaints or enforcement cases could result in an impact on public safety. He also spoke about how examination candidates could be impacted by the current financial situation if the examination contractor was unwilling to continue providing services and the candidates could not test within the timeframes required by law. Mr. Riches offered his assurance that candidates would be held harmless if testing had to be halted due to any inability to pay the test contractor.

Mr. Riches then discussed the issue of the Governor's Executive Order S-16-08, specifically with respect to furloughs and layoffs. He stated that the Board is excluded from the layoff order at the present time. However, the Board is included in the requirement that staff be furloughed two days per month. Subsequent to the Governor's order, the Department of Personnel Administration (DPA) issued an advice that state offices would be closed the first and third Fridays of every month for the length of the order (February 1, 2009 through June 30, 2010). Mr. Riches indicated this means, in practical terms, the loss of two work days per month and a 10% reduction in pay for staff. He added that at the February meeting recommendations would be presented about dealing with the situation, and hopefully there would be a better understanding of what the operational impact of the work reduction would be.

The Committee expressed the willingness to write a letter of displeasure or take steps, if or when appropriate, to convey their concerns about how the crisis was being addressed.

Mr. Riches then went on to report about the next budget year. He indicated that the Board has received approval for two budget change proposals to increase staffing and resources in the next fiscal year. One was to increase the line item for services provided by the Attorney General's office in pursuing the Board's disciplinary cases. The other approved proposal pertains to retroactive fingerprinting of licensees. The budget for next year included four new positions as well as additional money for the Attorney General's office, Office of Administrative Hearings, and funding required to implement the fingerprinting project. Two of the four positions are permanent; two positions are limited-term.

The last issue addressed by Mr. Riches was the proposed creation of the Board of Mental Health which would be composed of the Board of Behavioral Sciences, the Board of Psychology, and the Psychiatric Technician program currently housed at the Board of Vocational Nurse and Psychiatric Technicians. He discussed the various challenges to accomplishing such a task. The Boards themselves are currently physically located in three different locations. Additionally, the work done by the one of the professions included in this proposal differs significantly from the other included professions.

From a practical standpoint, what the merger would mean is that the three boards that currently exist would cease to exist, including board members and executive officers, and a new board comes into being. A new executive officer is selected and the board starts from scratch.

Ms. DiGiorgio asked if the proposed change was supposed to result in a cost savings. Mr. Riches indicated the change was supposed to achieve efficiency; however, the logistics involved in merging five distinctly different professions would definitely be challenging.

Discussion of the subject continued regarding the topic. Mr. Riches reported there was a stakeholder's meeting scheduled January 21, 2009 to discuss the matter, and indicated he had already been asked for and provided his assessment of the proposal. Dr. Russ added that earlier this month he participated in a telephone call with other boards and bureaus, coordinated by the Department of Consumer Affairs, at which time the participants were informed about the proposed merger, without discussion. Dr. Russ indicated that at that time they were afforded the opportunity to provide individual feedback to the department. Board members from the other boards expressed concern about the manner in which the proposal was raised without prior input from those entities impacted by the proposal.

Geri Esposito, California Society of Clinical Social Work (CSCSW), asked if the origin of the boards and bureaus was statutory, which Mr. Riches confirmed was the case. Ms. Esposito asked if then any change such as the proposal being discussed would require changes to existing statute, which again Mr. Riches confirmed. Ms. Esposito pointed out that then there was opportunity to use lobbyists or other avenues to express concerns and provide input.

Mr. Wong, NASW, asked if there had been any estimates of potential cost savings in merging the boards/bureaus as noted. Mr. Wong also asked about projected delays in critical functions such as enforcement, complaint processing and consumer protection. Mr. Riches indicated that no such numbers had been presented at this time. He noted that the material savings would essentially be from elimination of executive officer positions, and the salaries and benefits associated with those

positions. He also noted that there could be a minor savings with respect to incidental board costs. Overall, however, the proposed merger would not result in a savings to the state.

Dr. Russ stated his belief that the Board does a “stupendous” job, and outlined areas in which the Board has made accomplishments and taken steps to meet established goals. He expressed personal pride in being associated with the Board and its activities.

Mr. Riches noted that a practical consequence of the present discussion pertains to the need to adjust the Board and Committee meeting schedules to accommodate anticipated furlough days, which at the present time are the first and third Fridays of the month. He indicated that the meeting previously scheduled February 18-19, 2009 in San Luis Obispo was being moved to February 26-27, 2009 in Sacramento. He apologized for the late notice of this change, and indicated his understanding of what is involved in adjusting schedules to be able to attend the Board’s meetings. Mr. Riches noted the likelihood that the May Board meeting would have to be rescheduled as well, and indicated that information would be provided about any changes as soon as available.

The Committee adjourned for a short break.

IV. Discussion and Possible Action Regarding Proposed Statutory Changes Related to Supervision by Videoconference

r. Riches reported that last year the Board approved sponsoring legislation to allow video supervision of interns and associates on a limited basis (up to 30 hours of supervision). The provision was included in legislation last year that was vetoed due to the budget impasse. The legislation will be reintroduced this year. He indicated that recently requests have been received from several different sources to reconsider the proposal to increase the total number of supervision hours that will be allowed via two-way video conferencing. He stated that the matter was therefore being brought back to the Committee for additional discussion. Mr. Riches stated that the previously established limit was selected as a tentative first step in creating an opportunity for this type of supervision to occur, and had no particular foundation. He directed the Committee members to the information provided regarding this matter, which included the previously developed language amending current statute accordingly. Also provided was a copy of correspondence received from several mental health related agencies asking the Board to consider increasing the proposed 30 hour limitation. He stated that staff had found no issues with the proposal.

Mr. Riches stated that it has become increasingly common to use technology to address shortage areas, and is explicitly part of the Mental Health Services Act in terms of bringing resources to communities that are underserved for many reasons, including geography and economy. He expressed the awareness that the issue will be at hand for quite a while, and should be further discussed by the Committee. He noted that in the audience was Chad Costello, representing some of the organizations that had asked for the matter to be revisited with an eye toward increasing the number of allowable hours. Mr. Riches asked that the matter be opened for further discussion.

Ms. DiGiorgio asked if it would behoove the Committee to increase the number of hours of supervision to be allowed via this method. Mr. Riches reiterated that there has been no policy reason identified that would preclude allowing video supervision or increasing the allowable hours of such supervision.

Dr. Russ reported having sought research that would speak to what would be lost within the supervision process if technology were to be used, and could find none. He found information from

other states about psychiatric treatment that is provided to rural areas via videoconferencing. He again stated that he could not find any evidence of more errors or any losses experienced by using technology in that manner. He speculated that the Board would find support for supervision by videoconference from most if not all of the agencies that comprise the MFT consortiums. He added that although there was not the same physical presence as having another person in the room, there is nonetheless a presence and the opportunity to interact and observe the other party's reactions and responses.

Mary Riemersma, California Association of Marriage and Family Therapists (CAMFT), stated that it was CAMFT that recommended that the Board consider offering some of the supervision in this manner. She reported feeling from the beginning of the discussion about this subject that the number of hours should be increased, and offered CAMFT's confidence and support in approving the increase suggested to the Board by the Mental Health Directors Association.

Ben Caldwell, American Association of Marriage and Family Therapy (AAMFT) California, added the agency's support for an increase of hours. He offered comments about different approaches the Board may want to take in determining what amount of videoconferencing would be appropriate.

Ms. Esposito expressed the belief that within the helping professions clinicians tend to feel a resistance to something like videoconferencing. She reported having attended several meetings on the state of videoconferencing in a medical context. She not only offered her support for allowing some if not all supervision through this method, she reported being unable to find any evidence-based reason why this change should not occur.

Mr. Wong commented that many people are not accustomed to using technology to share information or provide instruction or supervision, and therefore are not comfortable with the idea. The concept is that somehow if they cannot see or hear the person, they are then not speaking to a real person. He expressed support for Ms. Esposito's position on the subject, for Marriage and Family Therapists and Licensed Clinical Social Workers alike. Last, he stated that often, when the Board makes a change, some licensees look at the change from a "tell me what to do" perspective. He expressed the hope that the Board can find a way to initiate this change in a non-regulatory manner, and help to promote the idea of video supervision. Mr. Wong also touched on the issue of a supervisor's review of case notes as an important component to thorough supervision. He expressed concern that details be worked out as to how case notes would be provided to a supervisor engaged in video supervision, and noted unease with confidentiality and security issues surrounding the electronic transmission of case notes. Nonetheless, Mr. Wong summarized his comments by stating his support for the idea of unlimited supervision using videoconferencing technology.

Mr. Costello offered comments about the benefit of such supervision, and provided support for the concept on behalf of the agencies he represents.

Ms. Riemersma commented about the electronic transmission of case notes and files, and noted that it was probably a safer method of providing such documents to a supervisor than physically transporting those materials.

Dr. Russ broached the subject of supervision being provided by a California licensee who is not within the state at the time of video conference. Discussion then ensued about a supervisor who is licensed in California but no longer living in the state, and whether it would remain appropriate for the supervisor to provide those services from another state.

Kristy Schieldge, Staff Counsel, responded that it would depend on the types of restrictions or requirements imposed by the state in which the supervisor was living, but according to California law it would not appear to be a problem. She stated she was unaware of any federal law prohibiting such activity. Mr. Riches added that the supervisor would be subject to the state licensing authority in the state in which he or she was living. He and Ms. Schieldge both noted that allowing video conferencing would not change any of the current California requirements regarding necessary qualifications for the supervisor.

Discussion continued, with the general consensus among the Committee members being that most, if not all, related entities would have no concern with allowing videoconferencing as a method of providing supervision.

The issue was raised regarding the appropriateness of allowing all supervision to be performed via videoconferencing, and the Board members shared their experiences and perspectives regarding the subject.

Mr. Caldwell commented about the mechanics of including video conferencing in the statute and regulation pertaining to supervision. He asked if it would work to include the permission to supervise via videoconferencing as an addendum to the current definition of supervision. Mr. Riches noted that current statute refers to face-to-face supervision. If the Board is going the direction of allowing either face-to-face or videoconferencing, a revision of the existing statutory language in this area would be necessary. It would be important to clarify that it is only face-to-face or videoconferencing that is permissible for supervision. Mr. Riches reminded the Committee members that they were not charged with making the final decision in this matter. They would be making a recommendation to the full Board at its next meeting, with specific statutory language available at that time, as well as the opportunity for further discussion among all Board members.

Ms. Roye voiced concerns with allowing all of supervision to be allowed via videoconferencing. She spoke from a managerial standpoint and expressed the belief that some type of meeting or interview should be conducted face-to-face with the supervisee in order to establish some type of bond or connection with that individual. She stated that videoconferencing does not allow for that type of connection.

Comments were made by meeting participants, sharing varying perspectives on the subject and acknowledging an understanding of Ms. Roye's concerns. Mr. Riches clarified that the possibility for videoconferencing would be an option only in an exempt setting, not in a private practice setting. He also noted that the model for supervision vests an enormous amount of discretion to the supervisor and their professional judgment. Mr. Riches expressed a strong confidence that even if a supervisor was to be afforded the option of conducting all supervision via videoconferencing, not many clinicians would be satisfied in providing all supervision via this method.

Ms. Riemersma commented that all parties involved in the process (employer, supervisor and supervisee) take supervision very seriously. The Board needs to empower the involved parties to determine what works for them in this area, and develop a plan that works best for them in the particular setting or situation in which they are involved. Ms. Riemersma expressed that putting limitations on how much supervision can be provided via videoconferencing would impose unnecessary restrictions. She added that if issues arise around allowing videoconferencing, the issues can be discussed and the statute or regulations modified as determined necessary.

Dr. Russ suggested that additional input be invited from the community regarding any losses known to be experienced with the absence of the human factor involved in face-to-face interaction, and if those losses were offset by the benefits of using videoconferencing.

Renee Lonner moved to recommend to the Board to allow unlimited use of videoconferencing in supervision. Ian Russ seconded. The Committee voted (3-1) to approve the motion.

V. Discussion and Possible Action Regarding Amending Unprofessional Conduct Statutes and Regulations

Tracy Rhine reported that currently in statute the licensing acts set forth conduct that may result in the Board's suspension or revocation of a license. These are known as the unprofessional conduct statutes. There are also sections of regulation, pertaining to each type of license regulated by the Board that define what is considered to be unprofessional conduct. Staff's concern in reviewing the various sections is the confusion in having so many relevant sections of law and regulation, and the inconsistencies uncovered in the various sections. Language was brought forth to the Committee to take provisions that are in regulation and put them in statute. The action would not change what is considered to be unprofessional conduct, but rather incorporates everything into statute. Ms. Rhine indicated that the idea is to have only one place that staff, consumers and licensees alike must look when researching the Board's definition of unprofessional conduct. If the move is approved, the various statutes would be revised accordingly and the regulation subsequently repealed.

Ms. Rhine indicated there were two issues to present for the Committee's discussion. She reviewed the specific changes applicable to both the Licensed Educational Psychologist (LEP) and Licensed Clinical Social Work (LCSW) statutes. Ms. Rhine placed emphasis on differences in the current statutory and regulatory language pertaining to LCSW practice, specifically with respect to gross negligence, and to the requirement that LCSW licensees limit access to psychological tests or other assessment devices to persons with a professional interest who will safeguard their use. She suggested that the Committee may want to discuss the merits of incorporating existing regulatory language into statute.

Ms. Lonner raised the subject of a licensee being disciplined if they provide records in compliance with a subpoena or court order. Ms. Schieldge suggested amending the proposed language to include language that would cover the licensee if the documents were provided as required by law. Ms. Schieldge reiterated that the proposals currently before the Committee were not to change existing requirements, but rather to incorporate regulatory language pertaining to unprofessional conduct with similar statutory language.

Mr. Wong asked the Board to give the issue more consideration. He expressed concern with amending the statute in the manner suggested by counsel, thereby creating loopholes in the statute. He referred to the current acceptability of a licensee refusing to comply with a subpoena if the licensee feels complying would be harmful to the client. Mr. Wong expressed the position that broadening statute in the manner proposed might be detracting from licensees' professional judgment.

Mr. Riches noted that when he was reviewing the matter at hand, he interpreted the language to refer to release of the test or assessment instrument itself. He wondered if the Committee members were interpreting the language to refer to release of results or release of the actual instrument.

Ms. Lonner responded by describing steps she has taken upon receipt of a subpoena for records that included secondary records or records that came from someone else. She indicated she might call that clinician and asked if he or she wanted their records released along with hers, or did they want an original subpoena or court order issued for the secondary records. She clarified that complying with a subpoena could involve release of both the testing or assessment instrument and the results of such test or assessment.

Dr. Russ clarified the sections under discussion pertained to the release of the actual instrument, and likened it to requirements and restrictions pertaining to licensing test questions. He expressed the position that the language as proposed was sufficient.

Mr. Wong asked if this then was an anti-piracy provision. Dr. Russ agreed with that interpretation. Mr. Riches qualified it more as a test-integrity provision.

Ms. Schieldge asked if the proposal is to substitute the regulation for the statutory section as currently written, specifically with respect to the gross negligence provision. She expressed concern that the statute continue to include language pertaining to incompetence. She asked if the "performance of clinical social work" is the same as "an act or omission that falls below the standard of conduct of the profession..." Is this essentially the same thing, or is "an act or omission" broader than "gross negligence in the performance of clinical social work." Mr. Riches clarified that the issue is that statutory language and regulatory language are phrased differently in this instance, and is one phrasing better than the other or are they meaningfully different at all. Ms. Schieldge expressed the position that "an act or omission" could possibly be broader.

Mr. Wong again raised concern about adding language so specific as to warrant the need for a lengthy explanation about what was meant. Committee members agreed that broader, more encompassing language would be better. Discussion was then held about the need to retain language about incompetence, and possible wording that could be used to ensure that the statute addressed both incompetence and gross negligence.

Karen Roye moved to direct staff to prepare revised statutory language concerning gross negligence and incompetence and bring the revised language back to the full Board. Ian Russ seconded. The Committee voted unanimously (4-0) to approve the motion.

Mr. Riches reminded the Committee of the need to also make a motion regarding the other LCSW-related provision, as well as the provisions pertaining to LEPs.

Renee Lonner moved to recommend to the Board to sponsor legislation incorporating existing pertinent regulation into statute. Karen Roye seconded. The Committee voted unanimously (4-0) to approve the motion.

The Committee adjourned for lunch at approximately 12:06 p.m. and reconvened at approximately 1:15 p.m.

VI. Discussion and Possible Action Regarding Draft Regulations Implementing Mandatory Continuing Education for Licensed Educational Psychologists

Ms. Rhine provided a brief history about the ongoing discussion concerning implementation of continuing education (CE) for LEPs. She noted that as of January 1, 2008, statute has mandated completion of 36 units of CE, but to date the Board has not passed regulations to implement the CE

requirement. The Policy and Advocacy Committee discussed the matter several times, and previously made recommendations to the Board regarding implementation of the statute. At its November 18, 2008 meeting, the Board directed staff to change the implementation provisions to allow for a staggered implementation of the CE requirements.

Language was presented to the Committee that provided specifics about the staggered implementation of this requirement. In summary, an LEP applying for license renewal between January 1, 2011 and December 31, 2011 would be required to complete at least eighteen (18) hours of CE prior to renewal of his or her license and, beginning January 1, 2012, requires that a licensee meet all CE requirements (the full 36 hours) for renewal of the license. Also included in the language is the provision that, for initial license renewal, an LEP has to complete only eighteen (18) hours of CE. This is consistent with the CE requirements for both MFTs and LCSWs.

The last provision in the proposal outlines specific coursework that the LEP must complete upon his or her first renewal after January 1, 2011. The matter has been discussed both by the Committee and the full Board, with the consensus being that the required coursework should be consistent with requirements pertaining to LCSWs and MFTs. Ms. Rhine noted the possibility that in order to complete all required coursework for initial license renewal, an LEP could face having to complete more than 40 hours of CE. She noted that given the various methods available for completion of the courses, many licensees will have already completed some of the required coursework. However, the potential exists for a licensee to have to complete more than forty (40) hours of CE for the first renewal after January 1, 2011.

Mr. Riches added that, in the Board's experience, most licensees have a significant portion of the required coursework addressed otherwise through education or other experience and can satisfy the requirement. Although candidates who have not met any of this requirement might need to complete over forty (40) hours of CE for their first renewal, this is no different from the expectations of MFTs or LCSWs with respect to continuing education.

Ms. Rhine indicated there were no issues regarding the proposed changes, but stated she has been working with Ms. Schieldge and had noted technical changes that are required. Ms. Schieldge specified those changes, which included removing reference to statute from section 1887.1(c)(1). Also, currently proposed language in section 1887.2(b) appears to refer to all licensees. Ms. Schieldge suggested adding language that specifies it is Licensed Educational Psychologists who are referenced in this section, i.e. "Beginning January 1, 2011 and through December 31, 2011 Licensed Educational Psychologists shall complete at least eighteen (18) hours of continuing education prior to his or her license renewal."

Mr. Wong asked for clarification regarding how it was determined that more than 40 hours of CE would be necessary to complete all required coursework. Mr. Riches explained that licenses renew at the end of the birth month, and that the length of the initial renewal period is contingent upon when the licensee first applied for initial licensure. As such, some licensees might have an initial license period that is shorter than other licensees. The first renewal period is seldom a full two years; the first full two-year renewal period occurs after the initial renewal of the license.

Mr. Wong then asked if the requirement would be applicable to existing licensees. Mr. Riches responded affirmatively, and clarified that it was a requirement of existing LEPs only. He added that in many instances the licensee is allowed to demonstrate compliance with the requirement via prior training. It can depend upon how the requirement is phrased. Mr. Wong then asked about the extent of the support from the LEP community for this proposal. Mr. Riches responded that that the LEP profession has been very supportive. Mr. Wong also expressed concern about the financial

impact on licensees who might have to complete more than forty hours of CE for one renewal. Mr. Riches again stated that the requirement did not subject LEPs to any CE obligations that are different from the requirements of MFTs and LCSWs.

Ian Russ moved that the Committee recommend to the Board that the rulemaking process be initiated consistent with the proposed changes. Karen Roye seconded. The Committee voted unanimously (4-0) to approve the motion.

VII. Discussion and Possible Action of Requiring Minimum Hours of Experience Treating Families for Marriage and Family Therapist Licensure

Mr. Riches reported that the Committee began discussion of this issue at its meeting in October 2008. The discussion was about how the Board was going to address the issue of doing marital/conjoint family therapy as a unit and staff concerns that the structure of experience requirements for MFTs was becoming unmanageable. Mr. Riches noted that during the course of the MFT Education Committee deliberations it was brought up that a person can become licensed as an MFT without having done family therapy or therapy with more than one person in the room.

Based on the discussion in October, staff prepared a discussion draft of changes to MFT experience requirements. The document was provided to the Board in an effort to stimulate discussion and address issues raised previously regarding MFT experience requirements. Mr. Riches reviewed with the Board the proposed changes outlined in the memo. He then opened the matter for discussion.

Mr. Wong raised concern about allowing the double counting of hours spent providing family therapy. He asked, "What is a family member?"

Ms. Riemersma offered thoughts and suggestions about the various proposals outlined for the Board. She expressed confusion and concern about what is family therapy. She noted the philosophy that if you have one person in the room you are doing family therapy and, likewise, when you have more than one person in the room you still are doing family therapy. In working with a child you are, by nature of what you are doing, working with family issues. She expressed uncertainty that it can be broken down by the number of people who are in the room. She stated that she likes the idea of incentive, but at the same time has concerns about incentives when it is only the MFT profession because then it appears there is something wrong with the MFT profession that they have to be induced to obtain hours.

Mr. Wong offered another viewpoint which is that MFTs get a special benefit of being able to double count hours when LCSWs do not. Ms. Riemersma agreed that regardless which side you're on, it does appear to be disparate treatment.

Ms. Riemersma then commented on the proposal to combine the number of hours of experience gained providing telephone crisis counseling and telemedicine. She expressed support for the idea of increasing the number of hours of experience earned in this area under supervision to 375, or the total of the current number of hours allowed for both areas. Those hours could be earned via either telephone crisis counseling or telemedicine.

Ms. Riemersma was supportive of the proposal to allow candidates to collect hours for client centered advocacy. With respect to eliminating hours of experience earned by attending workshops, trainings and conferences, she encouraged the Board to leave this provision as is currently in statute. She expressed the position that allowing candidates to earn hours in this

manner also serves to give them some experience in earning hours of continuing education as will be required once they become fully licensed. Ms. Riemersma recommended that the Board consider instead eliminating the hours required to be earned in psychotherapy, which she reported had been originally required as desired by a former legislator. She noted that the profession is sometimes criticized for allowing the earning of hours of experience via personal psychotherapy.

Ms. Riemersma offered thoughts on the remaining issues. She concluded by reiterating the suggestion that, if any hours needed to be eliminated, make it the hours of experience earned through personal psychotherapy.

Mr. Caldwell stated he supported the idea of double counting the first 150 hours providing family therapy. He definitely agreed that MFTs should see couples and families together. He stated that the proposal is a step in the right direction. With respect to defining what constitutes a family member when seeing two or more people at once, he noted that this is an issue that is faced by all AAMFT accredited programs, because those programs count relation hours differently from individual hours. Every AAMFT accredited program has some type of working definition of what constitutes a family member. Mr. Caldwell offered the language used by Alliant University for the Board's use in solving this problem.

Mr. Caldwell questioned the need for eliminating the hours of experience gained for attending workshops, trainings and conferences. He stated the position that it is good for the profession for people to engage in continuing education throughout their time as interns. He also questioned the need to change the statute pertaining to the supervision ratio for post-graduate experience. He expressed an uncertainty about the supervision ratio in other states, but was concerned that if those ratios are the same as in California, changing California's requirement could result in difficulty for individuals from California attempting to be licensed in another state. He expressed the intent to contact other states to obtain information about this topic.

Mr. Caldwell was confused about the proposal to require two hours of group supervision to be credited for one hour of supervisor contact and asked for clarification. He stated his initial understanding of the proposal is that two hours of experience would be credited for one hour of individual supervision. Mr. Riches clarified that it is the opposite. Currently, for the purpose of satisfying the supervision requirement, group supervision essentially is discounted. However, for the purpose of total experience required, it is not discounted whatsoever. Mr. Riches then provided a description or breakdown of the current requirement. Mr. Caldwell then clarified his new understanding of the proposal, which is that for experience purposes, two hours of group supervision would count as one hour of supervisor contact. Mr. Riches confirmed that is what is in the discussion draft. For satisfying the supervisor contact experience category, a two-hour group session would qualify for one hour of supervisor contact.

Discussion continued regarding the proposed changes. Mr. Riches indicated that it was understood that the existing process and requirements are complex. If the Board is moving toward trying to simplify things, the proposed changes are areas staff has identified as possible avenues to take toward meeting that goal. He then continued to explain the existing supervision ratio, and the disparities currently in place between the MFT and LCSW professions with respect to supervision ratios.

Mr. Caldwell noted that if the changes were made as proposed it could result in a dramatic reduction in the apparent number of supervision hours that MFT interns earn in an effort to become licensed. Mr. Riches concurred, but expressed the need to keep in mind that the trainee requirements have not been altered in the proposed changes. He indicated that most candidates

gain in the neighborhood of 600–700 hours as a trainee, and reminded meeting participants that the proposal regarding the supervision ratio pertained to post-graduate experience.

Dr. Russ asked if it was good for the profession to reduce the number of hours of supervision during training. Ms. Riemersma responded it was good and bad. It is good because supervision is a valuable learning experience, with more being better than less. On the other hand, consideration needs to be given to the employability of the profession, and an employer required to give more supervision is less inclined to hire an MFT and more inclined to hire an LCSW, when hiring someone to do the same job, because the costs are less. It is increasingly difficult to find supervisors, and to make supervision work. For many reasons, it is often a very difficult thing, and the more hours a person is able to see clients in a week means that much more supervision.

Ms. Riemersma again indicated she like the idea of the proposal, but was having trouble figuring out how the proposal will work.

Ms. Esposito commented that the profession is changing. With respect to the MFT profession, the placements for experience have changed greatly. She expressed that it makes more sense to be more consonant with the requirements of ASWs. The placements and workloads are more similar in public agencies that previously. There is a need to take a look at the evolution of the profession.

Mr. Wong reiterated the position that the discussion really was about what is marriage and family therapy and what is clinical social work. It was his understanding that the agencies voicing the complaints that in part resulted in the days discussion looked at the two professions as not being different. Mr. Riches clarified that what was being said is that the two professions perform comparable services, not that there is no difference. He asserted that the changes being seen in the professions were much more significant for MFTs than for LCSWs. If that is the case, why shouldn't the rules impacting the two professions be the same? He indicated that the question remains, are the professions the same? If they are not considered to be the same, then he encouraged the Board to be careful about making the requirements the same. He expressed the belief that it was a fundamental question the MFT profession needed to ask of itself.

Ms. Roye asked about the possibility of developing a briefing document to help demystify the process. Mr. Riches indicated there are many documents available intended to do that, but with limited success. He noted that the documents presented to the Committee, most significantly the experience calculators, provide a good overview of the differences in terms of category complexity.

Ms. Roye expressed the need to have a clearer understanding of the impact of the proposed changes on the educational process - what impact the changes would have on the quality of the supervision.

Ms. Riemersma commented she did not believe the changes would result in any adverse impact on the quality of the supervision provided. A change in the number of hours would not impact that quality. Ms. Riemersma stated that although marriage and family therapy and clinical social work are two separate professions, in many settings the candidates for licensure are asked to do the same or very similar jobs, and the same supervisors are supervising candidates for both professions. Therefore, paralleling the supervision requirements for both professions more closely will result in the supervisor being able to focus more closely on the supervision and less on the rules.

Mr. Riches added that the proposed change regarding supervision would simplify the process and possibly shorten the path to licensure.

Ms. Schiedge explained there would be less group hours required to qualify for the supervisor ratio.

Mr. Riches stated a candidate would still be required to complete 3,000 hours of supervised experience.

Discussion continued among Committee and audience members.

Ms. Esposito provided a brief history of the supervision hours required of associate social workers. She indicated that at one time the supervision prepared the candidate for more than agency work, but rather prepared them to work in settings from clinical family services agencies where therapy was provided to private practice. She expressed concern about viewing the hours of experience required of social workers as being due to the candidates not having to provide psychotherapy. She reiterated that was not the history of the clinical social work license; rather, it was a more broad-based field of practice.

Discussion then continued about the history of the two professions. Participants discussed why the requirements were different for the MFT and LCSW professions, the consensus being that it was due to the professions having evolved differently. The members also discussed how the professions were growing to be more similar, and the steps that might be taken to adjust to that evolution while respecting the history and traditions and differences in each profession.

Mr. Riches referred the Committee members back to the discussion draft and asked for guidance as to what the members wanted to discuss at the next meeting. Dr. Russ recommended that discussion continue about double counting the first 150 hours providing family therapy. He also agreed with combining the hours of telephone crisis counseling and telemedicine, for a total of 375 hours. He supported allowing candidates to collect hours for client-centered advocacy. He suggested dropping the issue of workshops, etc. Lastly, Dr. Russ recommended continuing the move to make the supervision ratio requirements for the MFT and LCSW professions more in line with each other. The group agreed with pursuing the requirement that two hours of group supervision be credited for one hour of supervisor contact, and allowing hours of experience to be gained in any category as a trainee. The group also agreed it was important to continue requiring candidates to participate in personal psychotherapy.

Mr. Riches stated the group would be presented with another draft for discussion at its April meeting.

VIII. Legislative Update

Ms. Rhine provided an update regarding various board-sponsored legislation.

She reported that SB 33 (Correa) is the reintroduced legislation pertaining to MFT Educational Requirements. A similar bill introduced during the last legislative session was vetoed.

Additionally, two Omnibus bills sponsored by many of the Department of Consumer Affairs licensing boards. One bill is the reintroduction of a similar bill that was vetoed in the previous legislative session (SB 1779). The second bill includes provisions concerning issues discussed by the Board at its previous meeting. She noted that a question had been raised by an audience member about one provision in the second omnibus bill, specifically the issue pertaining to ASW employment in a private practice.

Ms. Esposito asked for the rationale behind this provision. Mr. Riches explained that this again had to do with requests from supervisors. The current law for MFT interns states that if they need to obtain a second intern registration, they are no longer allowed to work in a private practice setting.

Ms. Riemersma provided a history of the restriction. She explained that at one time people could work in private practice in perpetuity without ever becoming licensed, and private practice was intended for fully licensed individuals. In the early days, the only reason a person would register as an intern is to work in private practice. The requirement about subsequent registrations was put in place to limit the length of time an unlicensed individual could work in private practice.

Ms. Esposito then expressed her disagreement with putting such a requirement for ASWs into law at the present time. She explained that frequently there are people who due to various life or geographical circumstances have a registration that expired after its six-year life and are required to re-register in order to complete hours of experience. She is concerned that imposing the restriction resulting from this change could limit a candidate's ability to gain experience in today's environment. Mr. Wong voiced agreement with Ms. Esposito, and revisited the issue of differences in the MFT and LCSW professions. Dr. Russ added his perspective on this issue. Mr. Riches added that it was a fairly small group of people who would be impacted by this change.

IX. Rulemaking Update

Ms. Rhine noted that the information provided to the Board gave an update regarding pending regulatory proposals, and was provided for the Board's review.

No public comments were made.

X. Suggestions for Future Agenda Items

No suggestions were made.

XI. Public Comment for Items Not on the Agenda

No public comments were made.

The meeting was adjourned at approximately 2:30 p.m.