

BOARD MEETING MINUTES

1
2
3
4 Open sessions of this Board Meeting were webcasted. Records of the webcasts are
5 available on the following links:

6 November 4: https://youtu.be/L_s4l67vD_4
7 November 5 (part 1): <https://youtu.be/U9fiJGo0ERQ>
8 November 5 (part 2): <https://youtu.be/UqGTGB2S5Qc>

9

10

DATE

November 4, 2021

12

MEETING PLATFORM

WebEx Video and Phone Conference

14

TIME

9:00 a.m.

16

ATTENDEES**Members Present:**

18 Max Disposti, Chair, Public Member
19 Christina Wong, Vice Chair, LCSW Member
20 Crystal Anthony, LCSW Member
21 Deborah Brown, Public Member
22 Ross Erlich, Public Member
23 Susan Friedman, Public Member
24 Dr. Diana Herweck, LPCC Member
25 Justin Huft, LMFT Member
26 Christopher Jones, LEP Member
27 Kelly Ranasinghe, Public Member
28 John Sovec, LMFT Member
29 Wendy Strack, Public Member
30 Yvette Casares Willis, Public Member

31

Members Absent:

32 Deborah Brown, Public Member at 10:27 a.m.
33 Dr. Diana Herweck, LPCC Member from 12:28 p.m.-2:05 p.m.
34 Justin Huft, LMFT Member at 1:23 p.m.

35

Staff Present:

36 Steve Sodergren, Executive Officer
37 Marlon McManus, Assistant Executive Officer
38 Gena Beaver, Enforcement Manager
39 Christina Kitamura, Administrative Analyst

1 Sabina Knight, Legal Counsel
2
3 **Other Attendees:** Wim Van Rooyen, Administrative Law Judge
4 Kevin Bell, Deputy Attorney General
5 Petitioners listed in the agenda
6 Public participation via WebEx video conference/phone
7 conference
8
9

10 **OPEN SESSION**

11
12
13 **I. Call to Order and Establishment of Quorum**

14
15 Max Disposti, Chair of the Board of Behavioral Sciences (Board), called the
16 meeting to order at 9:02 a.m. Roll was called, and a quorum was established.
17

18 **II. Public Comments for Items Not on the Agenda**

19
20 Pang Cha: Requests that the Board extend the 6-year period to earn hours and
21 lower fees.
22

23 **III. Suggestions for Future Agenda Items**

24
25 Pang Cha: Extend the 6-year period to earn hours due to COVID.
26

27 **IV. Hosson Hooper, LMFT 79118, Petition for Early Termination of Probation**

28
29 The hearing was opened at 9:20 a.m. Hosson Hooper represented himself. Mr.
30 Bell presented the background of Mr. Hooper's probation.
31

32 Mr. Hosson was sworn in. He presented his request for early termination of
33 probation and information to support the request and was cross-examined by
34 Mr. Bell and Board members. The record was closed at 10:20 a.m.
35

36 **V. Dagoberto Gabriel Fuentes, LCSW 88009, Petition for Early Termination of Probation**

37
38
39 The hearing was opened at 10:32 a.m. Dagoberto Fuentes represented himself.
40 Mr. Bell presented the background of Mr. Fuentes' probation.
41

42 Mr. Fuentes was sworn in. He presented his request for early termination of
43 probation and information to support the request and was cross-examined by
44 Mr. Bell and Board members. The record was closed at 11:27 a.m.
45

1 **VI. Christopher William Bishop, AMFT 111755, Petition for Early Termination of**
2 **Probation**

3
4 The hearing was opened at 11:41 a.m. Christopher Bishop represented himself.
5 Mr. Bell presented the background of Mr. Bishop's probation.
6

7 Mr. Hosson was sworn in. He presented his request for early termination of
8 probation and information to support the request and was cross-examined by
9 Mr. Bell and Board members. The record was closed at 12:17 p.m.
10

11 **VII. Keli Maria Demertzis, AMFT 111595, Petition for Early Termination of**
12 **Probation**

13
14 The hearing was opened at 12:32 p.m. Keli Demertzis represented herself.
15 Mr. Bell presented the background of Ms. Demertzis' probation.
16

17 Mr. Demertzis was sworn in. She presented her request for early termination of
18 probation and information to support the request and was cross-examined by
19 Mr. Bell and Board members. The record was closed at 1:20 p.m.
20
21
22

23 **CLOSED SESSION**

24
25
26 **VIII. Pursuant to Section 11126(c)(3) of the Government Code, the Board Will**
27 **Meet in Closed Session for Discussion and to Take Action on Disciplinary**
28 **Matters.**

29
30 The Board met in closed session at 1:23 p.m.
31

32 **IX. Recess Until 9:00 a.m., Friday, November 5, 2021**

33
34 The Board recessed following the conclusion of the Closed Session at 4:00 p.m.
35

1 **DATE** November 5, 2021
2
3 **MEETING PLATFORM** WebEx Video Conference and Phone Conference
4
5 **TIME** 9:00 a.m.
6
7 **ATTENDEES**
8 **Members Present:** Max Disposti, Chair, Public Member
9 Christina Wong, Vice Chair, LCSW Member
10 Deborah Brown, Public Member
11 Susan Friedman, Public Member
12 Dr. Diana Herweck, LPCC Member
13 Justin Huft, LMFT Member
14 Christopher Jones, LEP Member
15 Kelly Ranasinghe, Public Member
16 John Sovec, LMFT Member
17
18 **Members Absent:** Crystal Anthony, LCSW Member
19 Yvette Casares Willis, Public Member
20 Ross Erlich, Public Member
21 Wendy Strack, Public Member
22
23 **Staff Present:** Steve Sodergren, Executive Officer
24 Marlon McManus, Assistant Executive Officer
25 Rosanne Helms, Legislative Manager
26 Christy Berger, Regulatory Analyst
27 Christina Kitamura, Administrative Analyst
28 Sabina Knight, Legal Counsel
29
30 **Other Attendees:** Brianna Miller, DCA Office of Board and Bureau Services
31 Public participation via WebEx video conference/phone
32 conference
33

1
2 **OPEN SESSION**
3
4

5 **X. Call to Order, Establishment of Quorum, and Introductions**
6

7 Meeting called to order at 9:02 a.m. Roll was called, and a quorum was
8 established.
9

10 **XI. Consent Calendar**

- 11 **a. Possible Approval of the July 7, 2021 Board Meeting Minutes**
12 **b. Possible Approval of the September 9, 2021 Board Meeting Minutes**
13 **c. Possible Approval of the October 4, 2021 Board Meeting Minutes**
14

15 **Motion:** Approve the July 7, 2021 Board meeting minutes, September 9,
16 2021 Board meeting minutes, and October 4, 2021 Board meeting minutes.
17

18 Wong moved. Brown seconded.
19

20 Public Comment: None
21

22 Roll call vote:

Member	Yea	Nay	Abstain	Absent	Recusal
Crystal Anthony				x	
Deborah Brown	x				
Yvette Casares Willis				x	
Max Disposti	x				
Ross Erlich				x	
Susan Friedman	x				
Dr. Diana Herweck	x				
Justin Huft	x				
Christopher Jones	x				
Kelly Ranasinghe	x				
John Sovec			x		
Wendy Strack				x	
Christina Wong	x				

23 Motion carried: 8 yea, 0 nay, 1 abstention.
24

25
26 **XII. Board Chair Report**
27

28 **a. Introduction of New Board Member**

29 Justin Huft was introduced as the new LMFT member of the Board.
30

1 **b. Recognition of Board Member Service**

2 Marlon McManus was introduced as the new Assistant Executive Officer.

3
4 Deborah Brown and Christina Wong were recognized for their service to the
5 Board. Their terms will expire on November 28th.

6
7 **XIII. Department of Consumer Affairs Update**

8
9 Brianna Miller, Office of Board and Bureau Services provided the department
10 update.

11
12 State employees must show vaccination verification or be subjected to regular
13 testing. Board and committee members must verify vaccination or follow
14 testing protocols if they are to visit a DCA location or attend an in-person
15 meeting.

16
17 Current law allows remote meetings until January 31st. DCA is looking into
18 means by which hybrid meetings can take place.

19
20 Reminded board members to complete mandatory trainings in the Learning
21 Management System (LMS) training portal. The Sexual Harassment
22 Prevention Training is due for the 2021 year.

23
24 **XIV. Executive Officer Report**

25
26 **a. Budget Report**

27
28 2021/2022 Budget

29 The Board's budget for fiscal year (FY) 2021-22 is \$12,911,000.

30
31 Fund Condition

32 The Board's fund condition reflects a reserve of 6.4 months.

33
34 Board staff are awaiting fiscal year expenditure information from DCA's
35 accounting office.

36
37 **b. Licensing Report**

38 Licensing Population: 1st Quarter FY 2021-22

- 39 • 1,694 initial licenses were issued
40 • 126,877 licensees and registrants as of October 5, 2021 (< 3% gain)
41 from the previous quarter
42

1 Licensing Program Applications

- 2 • Large increase in Associate Marriage and Family Therapist (AMFT) and
3 Associate Professional Clinical Counselor (APCC) registration
4 applications
5 • Volumes increased by 19%

6
7 Licensing Program Processing Times

- 8 • Processing times increased.
9 • Licensed Marriage and Family Therapist (LMFT) examination application
10 processing timeframe has been reduced to 134 days.
11 • Staff is evaluating LMFT examination applications received in August.

12
13 Renewal Activity

14 Renewal activity increased by 15%.

15
16 Administration Applications

17 Application volumes increased by 11%.

18
19 **COVID-19 RESPONSE**

20 Waivers

21 Most of the waivers that were in place expired as of November 1st. DCA
22 has decided to extend the waiver on face-to-face supervision. However,
23 Board staff does not expect any more extensions for face-to-face
24 supervision once this waiver expires.

25
26 To address the concern regarding face-to-face training and supervision
27 requirements, Board staff has drafted language that would amend the
28 current law to allow associates to gain weekly supervision regardless of the
29 setting, with an initial in-person meeting required. If the Board decides to
30 pursue legislation to make the proposed law changes, the proposed
31 changes will not be in place before the expiration of the waiver. However,
32 Board staff will be seeking the earliest implementation date possible.

33
34 **c. Exam Report**

35
36 Exam Pass Rates 1st Quarter of FY 2021-22

37 4,654 examinations were administered, a 7% increase from the previous
38 quarter.

39
40 Examination Development

41 Eight exam development workshops were conducted from July 1st through
42 September 30th.

43
44 **d. Enforcement Report**

45 Enforcement data for the 1st quarter was presented.
46

1 Due to the current continuing education (CE) waiver, the CE audits are
2 currently suspended.

3
4 **e. Communication Report**

5
6 Social media data and Consumer Information Center data for the 1st quarter
7 were presented.

8
9 **f. Personnel Report**

10
11 **New Employees/Promotions**

12 Marlon McManus promoted to Assistant Executive Officer. He was
13 previously the Staff Services Manager (SSMI) for the Consumer Complaint
14 & Investigations Unit.

15
16 **Departures**

17 Cassandra Kearney - SSMI, Licensing Unit: Retirement effective
18 September 30th

19
20 Darlene York - Staff Services Analyst (SSA), lead LCSW evaluator:
21 Retirement effective December 8th.

22
23 Kelly France - LCSW evaluator: Accepted a position with the Department of
24 Fish and Game.

25
26 **Vacancies**

27 There are 9 vacancies:

- 28 • SSMI – Consumer Complaint & Investigations Unit
- 29 • SSMI – Licensing Unit
- 30 • Associate Governmental Program Analyst (AGPA) - Discipline &
31 Probation Unit
- 32 • SSA – Criminal Conviction Unit
- 33 • Management Services Technician (MST) – Licensing Unit (3 vacancies)
- 34 • MST – Registration, Examination & Cashiering Unit
- 35 • Office Technician – Administration Unit

36
37 **XV. Telehealth Committee Update**

38
39 The Telehealth Committee (Committee) met on October 1st. The following
40 topics were discussed:

- 41 • Potential telehealth coursework requirement,
- 42 • Clarifying the Board’s telehealth statutes for associates and trainees,
- 43 • Amendments regarding supervision via videoconferencing.

1 Some of the proposed amendments that were discussed moved forward to the
2 Policy and Advocacy Committee.

3
4 The next meeting date is to be announced.

5
6 **XVI. Licensing Committee Update**

7
8 The Licensing Committee (Committee) met on June 25th.

9
10 The Committee made a recommendation regarding the required 12-hour
11 California law and ethics course for renewing registrants with a failing law and
12 ethics exam score. The resulting proposal, which is to delete that requirement
13 and require a 3-hour California law and ethics course for all registrants each
14 renewal cycle, was approved by the Board as a legislative proposal at its
15 September 10th meeting.

16
17 The next meeting is November 19th.

18
19 **XVII. Discussion and Possible Action Regarding Proposed Technical**
20 **Amendments to Business and Professions Code (BPC) §§4980.03,**
21 **4980.396, 4989.23, 4996.20, 4996.27, 4999.12, 4999.66, Health and Safety**
22 **Code §1374.72, Insurance Code §10144.5**

23
24 Board staff proposed three amendments to include in this year’s omnibus bill:

- 25
26 1. Amend BPC Sections 4980.396, 4989.23, 4996.27, 4999.66: Required
27 Suicide Risk Assessment Coursework or Experience - Correct Numbering
28 Error

29
30 Recommendation: Make the language in subdivision (c) a part of
31 subdivision (b), so that it is clear that the self-certifying under penalty of
32 perjury requirement is only applicable to existing licensees.

- 33
34 2. Amend BPC Sections 4980.03, 4996.20, and 4999.12 - Reference Error
35 regarding Requirements for Licensed Educational Psychologists (LEPs)
36 who Serve as Supervisors

37
38 Correct the errant reference in sections 4980.03, 4996.20, and 4999.12 to
39 correctly reference section 4989.14(a)(5).

- 40
41 3. Amend Health and Safety Code Section 1374.72 and Insurance Code
42 Section 10144.5 – Definition of a “Health Care Provider” in SB 855 (Chapter
43 151, Statutes of 2020)

44
45 SB 855 expanded California’s 1999 Mental Health Parity Act. SB 855
46 contains a definition of a “health care provider” in the Health and Safety

1 Code and the Insurance Code. Separate from its position, the Board had
2 decided to request that all of its associates be added to the definition of
3 “health care provider”, and that trainees either be removed or it be clarified
4 that they are under supervision of a licensed person.
5

6 Due to unusual circumstances of the 2020 legislative session, the author
7 was not able to make these amendments before session ended. The
8 author’s staff person suggested that the Board pursue them as part of the
9 Health Committee’s omnibus bill.

10
11 The Board requests an amendment to the definition of a “health care
12 provider” as follows to address its concerns:
13

- 14 • Delete professional clinical counselor trainees from the definition.
- 15
- 16 • Continue to include marriage and family therapist trainees in the
17 definition but clarify that they are performing activities and services as
18 part of their supervised course of study as set out in BPC §4980.42.
19

20 Discussion: None
21

22 **Motion:** Direct staff to make any discussed changes and any non-substantive
23 changes and pursue as a legislative proposal.
24

25 Disposti moved. Wong seconded.
26

27 Public Comment: None
28

29 Roll call vote:

Member	Yea	Nay	Abstain	Absent	Recusal
Crystal Anthony				x	
Deborah Brown	x				
Yvette Casares Willis				x	
Max Disposti	x				
Ross Erlich				x	
Susan Friedman	x				
Dr. Diana Herweck	x				
Justin Huft	x				
Christopher Jones	x				
Kelly Ranasinghe	x				
John Sovec	x				
Wendy Strack				x	
Christina Wong	x				

30 Motion carried: 9 yea, 0 nay.
31
32

1 **XVIII. Discussion and Possible Action Regarding Adding a Telehealth**
2 **Coursework Requirement (BPC §§4980.395, 4989.23.1, 4996.27.1, 4999.67)**
3

4 The Telehealth Committee directed staff to draft language requiring training or
5 coursework related to the provision of mental health services via telehealth,
6 using the recently added statute requiring coursework or applied experience in
7 suicide risk assessment and intervention as a model.
8

9 The draft language provides for the following:
10

- 11 • Requires applicants for licensure on or after July 1, 2023 to submit proof of
12 completion of 3 hours of training or coursework in the provision of mental
13 health services via telehealth, including law and ethics related to telehealth,
14 with their application.
15
- 16 • Requires licensees, upon their first license renewal, reactivation, or
17 reinstatement on or after July 1, 2023, to attest to having completed 3 hours
18 of training or coursework in the provision of mental health services via
19 telehealth, including law and ethics related to telehealth.
20
- 21 • Specifies that the training or coursework is a one-time requirement and may
22 be completed either as part of the qualifying degree program or by taking a
23 CE course.
24

25 Under the Board’s recently approved supervision regulations, a one-time 15-
26 hour training for new supervisors will be required and must cover specified
27 content.
28

29 Existing supervisors are not required to take the 15-hour course; however, they
30 must complete 6 hours of continuing professional development each renewal
31 cycle.
32

33 Discussion

34 Sovec: The Board is continually adding more required CE. Courses range
35 from \$75-\$150, and this requirement could cost another \$30-\$50. This adds a
36 huge financial burden.

37 Jones: Understands the issue regarding the financial burden. The explosion of
38 telehealth and the fact that it is not going away and will probably expand was
39 the philosophy in making this recommendation. This is a one-time requirement.
40 Three hours is not much when licensees must take 36 hours anyway.
41

42 Wong: Education need is coming from the survey recently conducted.
43 Perhaps there is a way to help ease the financial burden.
44

1 Ranasinghe: Agrees with Sovec. However, supportive of this because of the
2 ethics requirement.

3
4 Disposti: Licensees are coming forward with many questions about telehealth.
5 In terms of public protection, this is a new environment and we need to make
6 sure that everyone is on the same page. Concerned more about consumer
7 protection, however, is not disregarding the burden of additional requirements.

8
9 Jones: It's not an additional cost when licensees are required to complete 36
10 hours of CE – it's part of the normal cost. Telehealth has been here for a long
11 time, but not to the extent that it is now. The Board needs to ensure public
12 safety.

13
14 Herweck: Agreed with Jones. Most of the MFT and counseling education
15 programs may be able to quickly implement this in the coursework. Most of the
16 new applicants won't need to pay anything additional because it is in their
17 coursework.

18
19 Wong: According to Ben Caldwell, courses are available at no cost. Also
20 noted that there is a delayed implementation date.

21
22 **Motion:** Direct staff to make any discussed changes and any non-substantive
23 changes to the proposed language and pursue as a legislative proposal.

24
25 Ranasinghe moved. Wong seconded.

26
27 **Public Comment:**

28 Jennifer Alley, California Association of Marriage and Family Therapists
29 (CAMFT): 1. Concerned for those who took the completed the coursework or
30 CE prior to the effective date for this law. Will the course count towards the
31 requirement? 2. CAMFT prefers that the language allows for school or CE.

32
33 Rosanne Helms: Responded to J. Alley's question/comment: 1. Confirmed that
34 this is the intent. 2. Anyone taking the course before the law takes effect must
35 show documentation.

36
37 Curt Widhalm: 1. This is needed. An informal poll of his students showed
38 50%-75% of their therapists are not following telehealth laws as written. 2.
39 Agrees that this does not add costs to licensees; however, it adds an increase
40 of cost to associates.

41
42 Rebecca Gonzales, National Association of Social Workers California Chapter
43 (NASW-CA): There is an added cost to new registrants whose schools did not
44 included the course.

1 Darlene Davis: By the time legislation is passed, everyone will have been
2 trained or “saturated” in telehealth. Believes that ethics training courses now
3 include telehealth. Some agencies are providing this training to their teams.
4

5 Mario Espitia, NASW-CA: Requests that the text of the language indicates that
6 the 3-hour requirement will be part of the 36-hour CE requirement for licensees.
7

8 Roll call vote:

Member	Yea	Nay	Abstain	Absent	Recusal
Crystal Anthony	x			x	
Deborah Brown	x				
Yvette Casares Willis				x	
Max Disposti	x				
Ross Erlich				x	
Susan Friedman	x				
Dr. Diana Herweck	x				
Justin Huft	x				
Christopher Jones	x				
Kelly Ranasinghe	x				
John Sovec	x				
Wendy Strack				x	
Christina Wong	x				

9
10 Motion carried: 9 yea, 0 nay.

11
12 **XIX. Discussion and Possible Action on Amendments to Clarify Telehealth**
13 **Laws for Associates and Trainees (BPC §§2290.5, 4996.23.2, 4999.46.3)**

14
15 Associates and Telehealth

16 AMFTs and trainees are both explicitly permitted to perform services via
17 telehealth, per BPC §4980.43.3(i).

18
19 The Licensed Clinical Social Workers (LCSW) and Licensed Professional
20 Clinical Counselors (LPCC) practice acts are silent about the matter. However,
21 associate clinical social workers (ASWs) and APCCs are permitted to perform
22 services via telehealth per BPC §2290.5, which defines a health care provider.
23 However, it is not explicitly stated.

24
25 BPC §2290.5 defines a “health care provider” as anyone licensed under
26 Division 2 of the BPC. BPC §23.8 states that when “licensees” are referred to
27 in the BPC, the term also includes registrants (associates). Therefore, ASWs
28 and APCCs are permitted to perform services via telehealth.

29
30 The Board pursued an amendment in this year’s omnibus bill (SB 801) to
31 include ASWs and APCCs in the definition of health care providers who may

1 provide services via telehealth in BPC §2290.5. This law will be effective
2 January 1, 2022.

3
4 The law already establishes that all the Board’s associates may provide
5 services via telehealth, and the Board is already taking steps to clarify this in
6 the law. Board staff proposes to amend BPC §§4996.23.2(k) and 4999.46.3(j)
7 to correspond with the already existing clarification in §4980.43.3(i) of LMFT
8 law that associates may perform services via telehealth.
9

10 Trainees and Telehealth

11 The law does not specifically address whether social work interns and
12 professional clinical counselor trainees (PCC trainees) may provide services via
13 telehealth
14

15 These trainees are presumably not included in the definition of a “licensee” in
16 BPC §23.8 because they are not registered with the Board and are not
17 regulated by the Board.
18

19 MFT trainees are already included as providers who can perform services via
20 telehealth, because it is explicitly stated in BPC §§2290.5 and 4980.43.3(i).
21 However, the law is silent on this for social work interns and PCC trainees.
22 Social work interns and PCC trainees are not permitted to count pre-degree
23 hours; however, MFT trainees are permitted, and therefore, it should be noted
24 that their supervision requirements are less stringent.
25

26 Staff proposed the following amendments:

- 27 • Amend BPC §2290.5 to specify that professional clinical counselor trainees
28 may provide services via telehealth.
29
- 30 • Amend BPC §4999.46.3(j) (LPCC law) to correspond with the already
31 existing clarification in §4980.43.3(i) of LMFT law that trainees may perform
32 services via telehealth.
33

34 NASW-CA has expressed a preference that a similar clarification for social
35 work interns are not made because social work schools already have their own
36 policies.
37

38 Discussion: None
39

40 **Motion:** Direct staff to make any discussed amendments and any non-
41 substantive amendments and pursue as a legislative proposal.
42

43 Disposti moved. Herweck seconded.
44

1 Public Comment:
 2 R. Gonzales, NASW-CA: Confirmed that NASW-CA has expressed a
 3 preference to be kept out of this because of social work national accreditation.
 4

5 Roll call vote:

Member	Yea	Nay	Abstain	Absent	Recusal
Crystal Anthony				x	
Deborah Brown	x				
Yvette Casares Willis				x	
Max Disposti	x				
Ross Erlich				x	
Susan Friedman	x				
Dr. Diana Herweck	x				
Justin Huft	x				
Christopher Jones	x				
Kelly Ranasinghe	x				
John Sovec	x				
Wendy Strack				x	
Christina Wong	x				

6
 7 Motion carried: 9 yea, 0 nay.

8
 9 **XX. Discussion and Possible Action on Amendments Regarding Supervision**
 10 **via Videoconferencing (BPC §§4980.43.2, 4996.23.1, 4999.46.2)**

11
 12 Current law only permits associates working in an exempt setting to obtain
 13 supervision via videoconferencing. The Board recently pursued an amendment
 14 via AB 690, the setting definition bill, that changes the law to instead permit
 15 supervisees working in an exempt setting to obtain supervision via
 16 videoconferencing.

17
 18 Board staff is proposing language to clarify that trainees in exempt settings can
 19 also receive supervision via teleconference.

20
 21 The Telehealth Committee (Committee) considered two options:

- 22 1. Option One: 50% In-Person Supervision Required
 23 2. Option Two: Supervision via Videoconference Allowed with First Meeting
 24 In-Person
 25

26 The Committee decided to move forward with Option Two. The proposed
 27 language does the following:

- 28 • Clarifies that face-to-face direct supervisor contact means either in-person
 29 or via two-way, real time videoconferencing.
 30

- 1 • Requires that a supervisor must conduct an initial in-person meeting with a
2 supervisee within 60 days of the commencement of any supervision with a
3 new supervisee.
4
5 • Requires that during the initial in-person meeting, the supervisor must
6 assess the appropriateness of allowing the supervisee to gain experience
7 hours via telehealth and the appropriateness of the supervisee to receive
8 supervision via videoconferencing. The results of the assessment must be
9 documented.
10
11 • Includes a sunset date for the initial-in person meeting requirement of
12 January 1, 2025. Unless the sunset date is deleted or extended, non-
13 exempt settings will once again be required to have in-person supervision.
14

15 Questions to be considered:

- 16 • Where should the supervisee be located while telehealth therapy is taking
17 place?
18
19 • Should an associate temporarily or permanently located in another state or
20 country be able to practice with clients located in California? (Assuming they
21 are registered in California and have a California-licensed supervisor, who
22 they are seeing via videoconference.)
23
24 • Should a trainee temporarily or permanently located in another state or
25 country be allowed to practice with clients located in California? (Assuming
26 they have permission from their school and have a California-licensed
27 supervisor, who they are seeing via videoconference (if an MFT trainee)).
28
29 • Should an associate or trainee located in another state or country be
30 permitted to count experience hours for practice with clients who are located
31 in that other state or country, if they follow the rules of the other jurisdiction
32 and have supervision by a California-licensed supervisor who meets the
33 Board's supervision requirements?
34

35 Ranasinghe: In favor of option two.

36 Public Comment:

38 J. Alley, CAMFT: Supports the legislative proposal moving forward with
39 urgency.
40

41 Ben Caldwell: Urges the Board to vote yes and urges the Board to reconsider
42 the need for an in-person meeting. It is not required for clinical care via
43 telehealth and shouldn't be required for supervision. If the Board decides to
44 move forward with in-person meeting requirement, he asks that the Board

1 include language allowing exceptions to that requirement, consistent with the
2 Americans with Disabilities Act.

3
4 C. Caldwell spoke on behalf of Tony Ramirez, psychologist for research
5 focused on clinical supervision: “Online supervision allows trainees and
6 associates to be matched with supervisors who are specialists in specific areas
7 of clinical work, but live in geographically distant areas. If an initial in-person
8 meeting is required, then this kind of sorting by specialization will *[inaudible]*
9 significantly restricting opportunities for specialized clinical training without
10 apparent benefit.”

11
12 R. Gonzales, NASW-CA: 1. Agrees with Caldwell regarding exceptions to the
13 requirement/ADA. 2. The initial in-person meeting requirement in all settings is
14 concerning because that may cause a disruption since it is a change in the
15 requirements (for those in exempt settings).

16
17 Del Royer: Supports option two.

18
19 Rayna: Disclosed that she is legally blind and is grateful for the waiver allowing
20 video supervision. Due to the waiver, she was able to find employment. Video
21 supervision removes barriers to supervised experience.

22
23 Multiple public comments were received expressing the following: Urge the
24 Board to vote yes to propose legislation to make telehealth supervision
25 available across all work settings, including private practice, and to remove the
26 initial in-person meeting requirement.

27
28 Discussion:

29 Helms: Explained that the Committee decided on the initial in-person meeting
30 to address the public protection concern, to determine if the supervisee is
31 appropriate for telehealth. The Committee felt that an in-person meeting would
32 allow a better assessment. Without the in-person requirement, it is possible
33 that people registered in California may practice from out-of-state, and perhaps
34 not being as familiar with California. The thought is that the requirement keeps
35 them practicing in the state. Meanwhile, the Committee can continue to work
36 on setting parameters and laws that the Committee is not ready to set until
37 further discussions take place.

38
39 Ranasinghe: Supports moving forward without the initial in-person meeting.

40
41 Huft: It is not clear how in-person meetings benefits the consumers, trainees,
42 associates, or supervisors, unless it is believed that mental health professionals
43 can make better judgments by physically seeing someone.

44
45 Wong: There is a very big difference when the supervisor sees the associate in
46 person versus supervision via telehealth.

1 Public Comment:

2 Leah Brew, LPCC, counselor educator and supervisor: There are big
3 differences in meeting with people in person. They are preparing to be
4 licensed to both in-person and online; and their “in-person energy” and
5 presentation must be appropriate and represents professionalism that is
6 necessary to do effective work. Supports a waiver to individuals who have
7 disabilities.

8
9 Sarah Smith: Requests that the exempt settings remain independent from this.
10 There are many barriers already, particularly for low income and communities
11 of color to access clinicians.

12
13 Miranda Furie: This is a discriminatory law towards individuals with disabilities.

14
15 Several more comments were received urging the Board to vote yes to propose
16 legislation to make telehealth supervision available across all work settings,
17 including private practice, and to remove the initial in-person meeting
18 requirement.

19
20 J. Alley, CAMFT: CAMFT does not have a strong position either way about the
21 requirement for the initial in-person meeting. CAMFT defers to the Board on
22 making that determination.

23
24 Jennifer Avalos: This creates accessibility issues to the disability population
25 and creates issues for the military population and their ability to practice.

26
27 B. Caldwell: The in-person meeting requirement does not meaningfully support
28 public safety. Employers, schools, and supervisors can continue to set
29 requirements and limitations as they see fit on the use of video supervision.

30
31 Discussion:

32 Wong: Reminded everyone that the Board’s purview is public protection.

33
34 Sovec: Agrees with Wong regarding the importance of meeting in person,
35 however, that may not always be possible. Pointed out that there is a sunset
36 date on this legislation, meaning that the Board can revisit afterwards and
37 address concerns that may appear and rewrite the language.

38
39 A brief discussion took place about removing the effective date of January 1,
40 2023 as it could be problematic if this becomes urgency legislation.

41
42 **Motion:** Direct staff to make any discussed changes and any non-substantive
43 changes and pursue as a legislative proposal that is urgency, if possible. The
44 discussed changes are to strike “on and after January 1, 2023” and “initial in-
45 person” in BPC §§4980.43.2(d), 4996.23.1(d), and 4999.46.2(d).

1 Ranasinghe moved. Herweck seconded.

2

3 Public Comment:

4 Miranda Furie: Hopes that the Board and other agencies continue to advocate
5 around the gap issue.

6 Chris Jones: Emphasized that the in-person meeting is important.

7

8 Roll call vote:

Member	Yea	Nay	Abstain	Absent	Recusal
Crystal Anthony				x	
Deborah Brown	x				
Yvette Casares Willis				x	
Max Disposti	x				
Ross Erlich				x	
Susan Friedman	x				
Dr. Diana Herweck	x				
Justin Huft	x				
Christopher Jones		x			
Kelly Ranasinghe	x				
John Sovec	x				
Wendy Strack				x	
Christina Wong		x			

9

10 Motion carried: 7 yea, 2 nays.

11

12 **XXI. Update on Board-Sponsored and Monitored Legislation**

13

14 **Board-Sponsored Legislation**

15

16 AB 690 Practice Setting Definitions

17 Status: Signed by the Governor

18

19 SB 801 Board Sunset Bill/LMFT Scope of Practice/Omnibus Bill

20 Status: Signed by the Governor

21

22 **Board-Supported Legislation**

23

24 AB 462 Licensed Professional Clinical Counselor Act

25 Status: Signed by the Governor

26

27 **Board-Monitored Legislation**

28

29 SB 14 Pupil Health: School Employee and Pupil Training: Excused Absences:

30 Youth Mental and Behavioral Health

1 Status: Signed by the Governor

2
3 **XXII. Update on Board Rulemaking Proposals**

4
5 Supervision-Related Requirements

6 Status: Approved. Effective date January 1, 2022.

7
8 Continuing Education and Additional Training Requirements

9 Status: At the Office of Administrative Law and set to be noticed to the public
10 on November 12th.

11
12 Enforcement Process

13 Status: Pending

14
15 This regulation package was placed on hold due to the passage of AB 2138.
16 AB 2138 was approved in December 2020, so this proposal is able to move
17 forward again. Staff will be re-evaluating the previously proposed language
18 and determining if additional amendments are needed. The proposal will be
19 brought to the Board for review.

20
21 Examination Waiting Periods, Professional Corporations, Accrediting Agencies
22 and Equivalent Degrees

23 Status: Preparation for initial review process.

24
25 This proposal was approved by the Board at its November 2019 meeting and
26 has been delayed due to competing workload priorities.

27
28 **XXIII. Discussion and Possible Action on the 2022-2026 Strategic Plan**

29 Steve Sodergren presented the draft version of the Strategic Plan.

30
31 **Motion:** Adopt the Strategic Plan, and direct staff to make any discussed
32 changes and any non-substantive changes and include the introduction from
33 the Board chair.

34
35
36 Wong moved. Brown seconded.

37
38 Public Comment: None

39

1

Roll call vote:

Member	Yea	Nay	Abstain	Absent	Recusal
Crystal Anthony				X	
Deborah Brown	X				
Yvette Casares Willis				X	
Max Disposti	X				
Ross Erlich				X	
Susan Friedman	X				
Dr. Diana Herweck	X				
Justin Huft	X				
Christopher Jones	X				
Kelly Ranasinghe	X				
John Sovec	X				
Wendy Strack				X	
Christina Wong	X				

2

3

Motion carried: 9 yea, 0 nay.

4

5

XXIV. Public Comment for Items Not on the Agenda

6

7

None

8

9

XXV. Suggestions for Future Agenda Item

10

11

Disposti: Election of Board vice chair.

12

13

Ranasinghe: Exploration of a needs-based waiver for catastrophic incidents regarding licensees.

14

15

16

Friedman: Wants to hear from consumers who have been doing telehealth about how they feel telehealth has worked for them.

17

18

19

J. Alley, CAMFT: 1. Discussion regarding a possible exemption for medical leaves and military service as part of the 6-year rule. 2. Discussion about life coaches working in professional corporations.

20

21

22

23

XXVI. Adjournment

24

25

The Board adjourned at 2:53 p.m.