

## MEMORANDUM

<b>DATE</b>	August 17, 2021
<b>TO</b>	Board of Psychology
<b>FROM</b>	Sarah Proteau Central Services Office Technician
<b>SUBJECT</b>	Agenda Item # 4 – Discussion and Possible Approval of the Board Meeting Minutes: May 21, 2021

**Background:**

Attached are the draft minutes of the May 21, 2021 Board Meeting.

**Action Requested:**

Review and approve the minutes of the May 21, 2021 Board Meeting.

1  
2 **TELECONFERENCE BOARD MEETING MINUTES**  
3  
4

5 NOTE: Pursuant to the provisions of Governor Gavin Newsom's Executive Order N-29-  
6 20, dated March 17, 2020, neither Board member locations nor a public meeting  
7 location were provided.

8 Friday, May 21, 2021

9 **Members Present**

10  
11 Seyron Foo, President  
12 Lea Tate, PsyD, Vice President  
13 Sheryll Casuga, PsyD  
14 Marisela Cervantes  
15 Mary Harb Sheets, PhD  
16 Julie Nystrom  
17 Stephen Phillips, JD, PsyD  
18 Ana Rescate  
19 Shacunda Rodgers, PhD  
20

21 **Members Absent**

22 None  
23

24 **Legal Counsel**

25 Will Maguire  
26 Heather Hoganson  
27

28 **Board Staff**

29 Antonette Sorricks, Executive Officer  
30 Jon Burke, Assistant Executive Officer  
31 Stephanie Cheung, Licensing Manager  
32 Jason Glasspiegel, Central Services Manager  
33 Sandra Monterrubio, Enforcement Program Manager  
34 Liezel McCockran, CE/Renewals Coordinator  
35 Cristina Rivera, Legislative and Regulatory Analyst  
36 Sarah Proteau, Central Services Office Technician  
37

38 **AGENDA**

39  
40 9:00 a.m. – 5:00 p.m. or until Completion of Business  
41

42 Unless noticed for a specific time, items may be heard at any time during the period of  
43 the Board meeting.

44

45 The Board welcomes and encourages public participation at its meetings. The public  
46 may take appropriate opportunities to comment on any issue before the Board at the  
47 time the item is heard.

48

49 **Agenda Item 1: Call to Order/Roll Call/Establishment of a Quorum**

50

51 Board President Foo called the meeting to order at 9:10 a.m., roll was taken, and  
52 quorum established.

53

54 **Agenda Item 2: President's Welcome**

55

56 President Foo read the Board's mission statement and provided a welcome to all  
57 participants. He stated that Agenda Items 8 and 9 would be moved up in the schedule  
58 and be discussed after Agenda Item 3 and then would continue after in numerical order.

59

60 Plans for future Board meetings were addressed with reference to August 27, 2021, to  
61 remain virtual and November to be in-person, dependent on several factors including  
62 the status of any Emergency Order in place at that time.

63

64 Mr. Foo also noted that reference materials would potentially look different in  
65 subsequent meetings, changes which were made in the effort to incorporate  
66 stakeholder feedback to provide a narrative and contextualize data.

67

68 There was no Board or public comment offered.

69

70 **Agenda Item 3: Public Comment for Items Not on the Agenda.**

71

72 There was no Board or public comment offered.

73

74 **Agenda Item 8: Budget Report**

75

76 Mr. Glasspiegel referenced page 43 of 76 in the hand carry materials and provided the  
77 Budget Report summary.

78

79 A discussion ensued between Ms. Nystrom, Mr. Glasspiegel, and Ms. Renee Milano of  
80 the Budget Office regarding contracts the Board of Psychology had with the Department  
81 of Justice and the Office of the Attorney General (OAH) which were included in the  
82 materials.

83

84 Ms. Nystrom asked for clarification on rate increases that had taking place with the  
85 Office of the Attorney General (OAG) and OAH. Ms. Milano confirmed there had been

86 rate increases and that the Budget Office is preparing an analysis to make sure that all  
87 related budgets could support the additional cost.

88  
89 Ms. Nystrom asked if any indication of further rate increases had been received to  
90 which Ms. Milano stated that she was unaware of any discussion of any new planned  
91 increase. It was asked that any potential rate increase by OAG would be communicated  
92 with DCA to allow appropriate planning and fiscal management.

93  
94 Mr. Foo asked a question in relation to Attachments C and D and what was driving the  
95 difference in revenue, if it was connected to the augmentation for Department of Justice  
96 (DOJ) and how the difference would affect the structural imbalance.

97  
98 A discussion ensued regarding differences in cost and revenue from the original  
99 projections and it was clarified that any differences are related to variable numbers  
100 related to enforcement activity and citations/fines.

101  
102 Mr. Glasspiegel confirmed that while it was helpful to have additional income as a small  
103 cushion, the difference would not affect the structural imbalance of the budget forecast  
104 in a meaningful and effective way.

105  
106 There was no public comment offered.

107  
108 **Agenda Item 9: Discussion and Possible Approval of Regulatory Fee Changes 16**  
109 **California Code of Regulations (CCR) Sections 1392: Psychologist Fees, 1392.1:**  
110 **Psychological Assistant Fees**

111  
112 Mr. Glasspiegel provided a summary of the discussion of a structural imbalance that  
113 had been provided at the February 2021 Board Meeting. This included background on  
114 the structural imbalance and he provided an update on the existing options that have  
115 been discussed. Page 19 of the combined meeting materials was referenced for a list of  
116 all fees that had not been increased to their statutory cap. Page 49 of 76 in the hand  
117 carry materials was referenced, which included historical information of all fees since  
118 the Board's inception.

119  
120 Mr. Glasspiegel noted a change to the language to add the word "conforming" to update  
121 the staff recommended motion to approve the proposed regulatory changes to 16 CCR  
122 Sections 1392 and 1392.1, direct the Executive Officer to take all steps necessary to  
123 initiate the rulemaking process, authorize the Executive Officer to make any technical or  
124 non-substantive changes to the rulemaking package as necessary, including any  
125 conforming changes with language previously approved by the Board, notice the  
126 proposed text for a 45-day comment period with the Office of Administrative Law, hold a  
127 hearing on the proposal, and, if no adverse comments are received during the 45-day  
128 comment period or hearing, adopt the proposed regulatory changes.

129

130 Mr. Foo referred to the hand carry item for Agenda Item 9, attachment b, which provided  
131 a fee history for the Board of Psychology and related fees which would potentially be  
132 impacted by a change. He noted that the application fee of \$40 had been set in 1979,  
133 the continuing education evaluation fee was set in 2013, the renewal fee was also set in  
134 1979. Mr. Foo then opened to questions from the Board.

135  
136 Ms. Nystrom asked if the independent company that performs the fee analysis will they  
137 also analyze for inefficiencies within the Board operations.

138  
139 Ms. Sorrick responded that separate to the fee audit, the Board has been working with  
140 DCA's Organizational Improvement Office (OIO) to evaluate all processes including  
141 online and paper licensing, renewal, and enforcement processes through the Board's  
142 strategic plan. Ms. Sorrick clarified that there is a separate process to analyze fees  
143 through a fee study completed in coordination with the DCA Budget Office.

144  
145 Mr. Matt Nishimine, DCA Budget Office, provided some clarity on fee studies which are  
146 done regularly. He stated that fee studies typically do not include efficiency studies, but  
147 he echoed the comments of Ms. Sorrick that he had been aware of the Board doing an  
148 independent study to evaluate efficiencies in processes.

149  
150 He then explained the process of a fee study and what would be included for example  
151 how the initial licensing process is analyzed as well as renewal fees.

152  
153 Mr. Foo asked Board members for a motion to approve regulatory changes as listed in  
154 the document.

155  
156 It was M(Harb Sheets)/S(Tate)/C to approve the regulatory changes to 16 California  
157 Code of Regulations section 1392 and 1392.1, to direct the Executive Officer to take all  
158 steps necessary to initiate the rulemaking process, authorize the Executive Officer to  
159 make any technical or non-substantive changes to the rulemaking package as  
160 necessary, including any conforming changes with language previously approved by the  
161 Board, notice the proposed text for a 45-day comment period with the Office of  
162 Administrative Law, hold a hearing on the proposal, and, if no adverse comments are  
163 received during the 45-day comment period or hearing, adopt the proposed regulatory  
164 changes

165  
166 The motion was verbally amended as suggested by Mr. Glasspiegel to include the  
167 language the word "conforming" and the amended motion was approved by Drs. Harb  
168 Sheets and Tate.

169  
170 There was no additional Board discussion and no public comment offered.

171  
172 Vote: 8 Ayes (Casuga, Foo, Harb Sheets, Nystrom, Phillips, Rescate, Rodgers, Tate), 0  
173 Noes

174

175 **Agenda Item 4: Discussion and Possible Approval of the Board Meeting Minutes:**  
176 **February 18-19, 2021**

177  
178 Mr. Foo introduced this item and asked the Board for any substantive edits to the  
179 February 18-19, 2021 Board Meeting Minutes.

180  
181 Dr. Phillips provided a short list of minor edits which were regarding Ms. Nystrom's  
182 recusal from voting on certain items due to her position with the State Senate. These  
183 edits were noted and updated in the minutes.

184  
185 Dr. Harb Sheets identified a minor error in punctuation which was noted and updated.

186  
187 It was M(Phillips)/S(Harb Sheets)/C to adopt minutes as amended.

188  
189 There was no public comment offered.

190  
191 Vote: 8 Ayes (Casuga, Foo, Harb Sheets, Nystrom, Phillips, Rescate, Rodgers, Tate) 0  
192 Noes

193  
194 **Agenda Item 5: Discussion and Possible Approval of the Board Meeting Minutes:**  
195 **April 2, 2021**

196  
197 Dr. Phillips provided a short list of minor edits regarding Ms. Nystrom's recusal from  
198 voting on certain items due to her position with the State Senate. These edits were  
199 notated and updated in the minutes.

200  
201 It was M(Phillips)/S(Nystrom)/C to adopt minutes as amended.

202  
203 There was no public comment offered.

204  
205 Vote: 8 Ayes (Casuga, Foo, Harb Sheets, Nystrom, Phillips, Rescate, Rodgers, Tate) 0  
206 Noes

207  
208 **Agenda Item 6: Executive Officer's Report**

209  
210 Personnel Update  
211 Statistical Reports – Future Reporting Plan for Enforcement, Licensing, and  
212 Central Services

213  
214 Ms. Sorrick provided an update for both Agenda Item 6 (a) and 6 (b).

215  
216 There were no updates to personnel and Ms. Sorrick re-stated the notification given by  
217 Mr. Foo in his welcome comments that meeting documents will look somewhat different  
218 going forward. She indicated that board staff would be working with each unit to verify  
219 what information would be best included for clarity and context for Committee meetings.

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a) 2020 Department of Consumer Affairs (DCA) Annual Report

Ms. Sorrick gave the definition and requirement description on this report which is meant to update the Legislature annually between Sunset Review periods which typically happen every four years.

d) COVID-19 Update

Ms. Sorrick provided an update on active waivers related to COVID-19. Three Board waivers were approved and in place and Ms. Sorrick will continue to provide a weekly update so long as the waivers are in place. She stated that executive staff, board staff and Counsel will work with DCA as any information is received related to a lifting of the Governor’s emergency order. She emphasized that any changes to a declared emergency or reopening of the state would affect any existing waivers.

Ms. Sorrick provided historical context in reference to the beginning of the COVID-19 pandemic when the Board submitted several waiver requests. She stated that the Board will continue working with DCA as the situation continues to evolve and explained the process of how waivers work.

Dr. Phillips expressed understanding and empathy for the concerns of stakeholders regarding the difficulty licensees have experienced with planning around short-term waivers. He stated his agreement with feedback he had received and stated his assurance that the Board would continue to do all that was in the Board’s power to try to address the situation.

Mr. Maguire, DCA Legal Counsel, provided context regarding Board of Psychology issued waivers. He explained that the reason the Board had been able to issue waivers on its own accord was because it had specific statutory authority which would expire when the state of emergency ended.

There was no public comment offered.

**Agenda Item 7: DCA Update**

Ms. Cruz-Jones, DCA Board and Bureau Relations, provided an update regarding mask guidelines which were still in effect. She indicated that DCA will communicate updated guidance to boards and bureaus as it is received from the Center for Disease Control (CDC).

Ms. Cruz-Jones offered clarification on remote meetings and stated that if/when the order is lifted, DCA will provide all options for Boards and Bureaus to transition safely to plan for in-person meetings. She stated that the DCA COVID-19 website could be visited for information.

265  
266 Ms. Cruz-Jones also referenced mandatory training for all staff and Board members.  
267

268 A discussion ensued between Mr. Foo and Ms. Cruz-Jones regarding the limited notice  
269 provided for the waiver extensions and length of extensions. Mr. Foo expressed his  
270 understanding that while navigating a global pandemic was difficult, the information  
271 provided by various health services had made clear that the COVID-19 pandemic would  
272 not be a short-term situation. He asked for clarification as to the level of communication  
273 that existed between DCA and the Business Consumer Services and Housing Agency's  
274 effort to understand how decisions were made regarding waiver extensions.  
275

276 Ms. Cruz-Jones stated that she would speak with DCA Executive Office and provide  
277 Ms. Sorrick answers to questions related to communication with the Business  
278 Consumer Services and Housing Agency for the Board members.  
279

280 There was no public comment offered.  
281

282 Mr. Foo expressed appreciation to Ms. Cruz-Jones and to board and bureau relations  
283 for the close contact and assistance that has been provided during this difficult time.  
284

285 **Agenda Item 10: Licensing Report**  
286

287 Ms. Cheung provided an update on the licensing report and clarified that the data  
288 provided in the report had previously been requested by the Board regarding the  
289 Licensing Unit's application workload. She echoed previous comments made that  
290 indicated staff would seek guidance from the Committee regarding the statistical content  
291 of the report and Licensing Unit workflow at the License Committee meeting on July 16,  
292 2021.  
293

294 She referenced Attachment A which indicated there were a higher number of licensees  
295 and approved applicants as well as more registrations issued since the last Licensing  
296 Report. There were less inactive and delinquent Psychologist licenses as well as a  
297 higher number of approved exam candidates for the EPPP.  
298

299 Ms. Cheung indicated that there was not a significant increase in the number of  
300 applications received in compared to previous years with exception to a slight increase  
301 in January.  
302

303 Additionally, the ongoing efforts to manage the budget and structural deficit by the  
304 Board was referenced by Ms. Cheung, who recognized the hard work of the Licensing  
305 Unit's staff of four full-time analysts to manage the entire workload of the Unit.  
306

307 Ms. Cheung expressed empathy with applicants and appreciation of their patience in an  
308 anxious time and provided some improvements that had been put into place to assist  
309 with communication. These include an automatic response to email queries that provide



310 the estimated response time as well as some frequently asked questions that may be  
311 helpful while waiting for a response from staff.

312  
313 Ms. Cheung indicated that applicants could always find processing timeframes on the  
314 Board's website and social media platforms which were updated monthly.

315  
316 Mr. Foo referenced attachments d and e that contained a year by year comparison of  
317 various items which had not been previously presented to the Board to review and  
318 expressed appreciation for the update.

319  
320 Public Comment

321  
322 Colleen Kennedy, member of the public, commented on the CPLEE application process  
323 and asked and if it could be automated instead of a paper process.

324  
325 Ms. Cheung responded that the staff was consistently looking at process improvement  
326 options, and ways to limit paper use and increase convenience and efficiency. She  
327 indicated that an electronic option for applications to take certain exams were being  
328 explored.

329  
330 Mr. Foo requested that the Board receive an update regarding when the Licensing Unit  
331 can go "paper lite" before the end of the calendar year.

332  
333 This was confirmed by Ms. Cheung and the request was added to the Licensing  
334 Committee Meeting for July 2021 by Dr. Harb Sheets, Licensing Committee Chair.

335  
336 There was no additional Board or public comment offered

337  
338 **Agenda Item 11: Continuing Education and Renewals Report**

339  
340 Mr. Glasspiegel referenced page 31 of 250 in the meeting materials. He congratulated  
341 all five licensed Board Members for passing their Continuing Education Audits and  
342 provided the update for this report for informational purposes only.

343  
344 No action was required by the Board.

345  
346 Mr. Foo referred to attachment d and e which were year by year comparisons for trends  
347 or changes in the data that had previously been requested by the Board. These had  
348 been asked for in the effort to observe any trends or patterns in the statistical data.

349  
350 There was no Board or public comment offered.

351  
352 **Agenda Item 12: Enforcement Report**

353

354 Ms. Monterrubio referenced materials in the hand carry items and provided an update to  
355 the staff vacancies and statistics related to enforcement.

356  
357 Ms. Nystrom asked for any possible trends related to enforcement and the pandemic.  
358

359 Ms. Monterrubio agreed to research this information request and report back to the  
360 Board at the next Board meeting.

361  
362 Dr. Harb Sheets noted that the data showed fewer examples of gross negligence and  
363 asked for a report in August. Ms. Monterrubio stated that a report would be provided at  
364 that meeting.

365  
366 There was no public comment offered.  
367

368 **Agenda Item 13: Enforcement Committee Report and Consideration of and**  
369 **Possible Action on Committee Recommendations**

- 370 a) Child Custody Stakeholder Meeting-Implementation Plan Update  
371 1. Statutory Discussion Regarding Proposed Exception to Psychotherapist-  
372 Patient Privilege for Board Investigations  
373

374 Dr. Phillips, Committee chair, provided an update and historical background on this  
375 item. He stated that this information has been provided to stakeholders  
376

377 Mr. Burke read the portion of the memo related to the role of psychologists in child  
378 custody and visitation proceedings and provided historical context. This was included in  
379 the hand carry items and titled "Current Law". Five items had been identified in 2018 as  
380 under the jurisdiction of the Board of Psychology of which four have been implemented.  
381 The focus of this discussion was the fifth item: the intent to review and consider  
382 statutory language related to documentation considered in a child custody complaint  
383 investigation.  
384

385 Dr. Phillips provided background information and context for this item and stated the  
386 Enforcement Committee and staff recommendation that the Board approve the  
387 proposed language to amend Business and Professions Code (BPC) section 2918.  
388

389 It was M(Casuga)/S(Tate)/C to adopt the Enforcement Committee and staff  
390 recommendation to approve the proposed language to amend Business and  
391 Professions Code (BPC) section 2918.  
392

393 Board Discussion  
394

395 Ms. Nystrom stated that the Medical Board had previously implemented language to  
396 allow them to work with courts on similar issues and queried whether legislation has  
397 ever been considered or enacted for the Board of Psychology.  
398

399 Dr. Phillips stated that to his knowledge there has never been legislation in this context  
400 for the Board of Psychology and believed that the Medical Board may be the only one  
401 that has an exception for purposes of investigation. Dr. Phillips stated that apparently it  
402 had been a successful exception in that it has increased the ability for the Medical  
403 Board to get records when they needed them.

404

405 Ms. Rescate added some context of another situation related to dual custody of minors  
406 that would be affected by this change in language.

407

408 Public Comment

409

410 Dr. Jo Linder-Crow, CEO, California Psychological Association (CPA) stated that  
411 CPA had provided feedback on a similar item earlier. She stated the position of CPA  
412 which was that Family Code section 3025.5 already provides licensing boards with the  
413 ability to access records through the court. Dr. Linder-Crow stated that CPA has serious  
414 concerns that these changes could erode the psychotherapist/patient relationship by  
415 impacting confidentiality, that there is already a process in place, and concern about  
416 areas of potential harm to consumers.

417

418 Dr. Phillips provided context that confidential information would be redacted for privacy  
419 and this change would be in the effort to the access to records in very specific situations  
420 that have been shown to present a problem for the Board in enforcement proceedings.  
421 He emphasized the Committee had determined that this change would be a necessary  
422 measure and he expressed that he did not expect the risk to the consumer to be  
423 substantial as there would still be a court involved to make sure the Board is kept within  
424 its limits of appropriate patient information.

425

426 Kathleen Russell, Executive Director of the Center for Judicial Excellence, stated  
427 support for the proposed change and added that it has nothing to do with the reports to  
428 the court but rather with the underlying documentation that was critical to the completion  
429 of investigations. She added that this was a consumer safety issue. Ms. Russell  
430 emphasized that this change would go a step beyond Family Code section 3025.5  
431 which only deals with the custody evaluation report itself.

432

433 Colin Sueyres, Director of Government Affairs, California Psychological Association  
434 (CPA) requested that if the Board were to move forward with this change that there be  
435 work groups convened between the Board of Psychology and CPA as well as the  
436 relevant contacts of the Medical Board of California to establish what parameters to be  
437 discussed on this item.

438

439 He also requested that if this were to be legislation that's introduced, it would be held  
440 until the next year of session to allow for at least six months to truly work with the Board  
441 of Psychology to craft language that protects both the provider and the patient in a  
442 suitable manner.

443

444 There was no further public comment offered.

445

446 Ms. Nystrom stated that it had been determined that she would recuse herself from  
447 voting on items once they enter the legislative process and become a piece of  
448 legislation. In the interim, it was established that she would be involved with the  
449 discussion and vote up to the point that it is in the legislative process.

450

451 She expressed agreement with Mr. Sueyres regarding the importance of a continuous  
452 dialogue and supported the idea of work groups to make sure that all interested parties  
453 felt that their voices were heard.

454

455 A discussion ensued between Mr. Foo and Ms. Sorrick regarding engagement with  
456 interested parties and where the proposed legislation was in the process.

457

458 Ms. Sorrick stated that there are a variety of options as to how to seek the change but  
459 given the current staffing resources and limitations in the legislature with the COVID  
460 limitations on bills per legislator, this amendment would not likely be made until  
461 February of 2023 and an author would be sought at that time.

462

463 Further discussion ensued between Mr. Foo and Board Members regarding  
464 experiences with patient privilege.

465

466 Dr. Phillips provided insight that during his initial intake meeting with a new patient he  
467 discusses that the relationship is confidential but also the myriad of exceptions to the  
468 psychotherapist-patient privilege. This discussion is covered both verbally and in writing.

469

470 Dr. Harb Sheets echoed Dr. Phillips' statement that exceptions to privilege and  
471 mandated reporting is discussed when going over informed consent.

472

473 Dr. Tate expressed support for the previous members comments and touched on  
474 informed consent. She stated that she had not had any bad experiences with this issue  
475 in her practice.

476

477 Dr. Casuga expressed her experience related to reports and enforcement issues for  
478 assessments. She opined that the change would be valuable for children in  
479 assessments and treatment.

480

481 Mr. Foo stated his appreciation for the collaborative effort that he has seen in the  
482 process, both in past and what he anticipates going forward.

483

484 There was no further Board or public comment offered.

485

486 Vote: 7 Ayes (Casuga, Foo, Harb Sheets, Phillips, Rescate, Rodgers, Tate) 1 Noes  
487 (Nystrom)

488

- 489 b) Regulatory Update, Review, and Consideration of Additional Changes  
490 1. 16 CCR 1380.6 – Display of License Number  
491 2. 16 CCR 1393 – Requirements for Psychologists on Probation  
492 3. 16 CCR 1396 – Competence  
493 4. 16 CCR 1396.1 – Interpersonal Relations  
494 5. 16 CCR 1396.2 – Misrepresentation  
495 6. 16 CCR 1396.3 – Test Security  
496 7. 16 CCR 1396.4 – Professional Identification  
497 8. 16 CCR 1396.5 – Consumer Information  
498 9. 16 CCR 1397 – Advertising  
499 10. 16 CCR 1397.1 – Child Abuse Reporting requirements  
500 11. 16 CCR 1397.2 – Other Actions Constituting Unprofessional Conduct  
501 12. 16 CCR 1397.30 – Citation  
502 13. 16 CCR 1397.36 – Requirements for Professional Corporations  
503 14. 16 CCR 1397.37 – Shares: Ownership and Transfer  
504 15. 16 CCR 1397.39 – Corporate Activities  
505 16. 16 CCR 1397.40 – Trusts  
506 17. 16 CCR 1397.50 – Citations and Fines  
507 18. 16 CCR 1397.51 – Amount of Fines  
508 19. 16 CCR 1397.52 – Compliance with Orders of Abatement  
509 20. 16 CCR 1397.53 – Citations for Unlicensed Practice  
510 21. 16 CCR 1397.54 – Contest of Citations  
511 22. 16 CCR 1397.55 – Disconnection of Telephone Service  
512

513 Ms. Monterrubio provided an informational update to Agenda Items 13 (b) and 13 (c).  
514

515 She stated that the Enforcement Committee and board staff had begun a  
516 comprehensive review of all enforcement related sections of the California Code of  
517 Regulations and the Business and Professions Code.  
518

519 Ms. Monterrubio stated that the Committee and staff had completed their review of the  
520 regulatory sections and would continue working on the review of the statutory sections  
521 at the next Enforcement Committee. This was provided as information only and no  
522 action was required.  
523

524 There was no Board or public comment offered.  
525

- 526 c) Statutory Update, Review, and Consideration of Additional Changes  
527 1. Business and Professions Code (BPC) section 2902 – Definitions  
528 2. BPC section 2903 – Licensure requirement; Practice of psychology;  
529 Psychotherapy  
530 3. BPC section 2903.1 – Biofeedback instruments  
531 4. BPC section 2908 – Exemption of other professions  
532 5. BPC section 2912 – Temporary practice by licensees of other state or  
533 foreign country

- 534 6. BPC section 2934.1 – Posting of license status on Web site  
535 7. BPC section 2936 – Consumer and professional education in matters  
536 relevant to ethical practice; Standards of ethical conduct; Notice  
537 8. BPC section 2960 – Grounds for action subdivisions (a)-(r) & (o)  
538 9. BPC section 2960.05 – Limitations period for filing accusation against  
539 licensee  
540 10. BPC section 2960.1 – Sexual contact with patient; Revocation  
541 11. BPC section 2960.2 – Licensee’s physical, emotional and mental  
542 condition evaluated  
543 12. BPC section 2960.5 – Mental illness or chemical dependency  
544 13. BPC section 2960.6 – Actions by other states  
545 14. BPC section 2961 – Scope of action  
546 15. BPC section 2962 – Petition for reinstatement or modification of penalty  
547 16. BPC section 2963 – Matters deemed conviction  
548 17. BPC section 2964 – Report of license revocation or restoration  
549 18. BPC section 2964.3 – Persons required to register as sex offender  
550 19. BPC section 2964.5 – Conditions of probation or suspension  
551 20. BPC section 2964.6 – Payment of probationary costs  
552 21. BPC section 2965 – Conduct of proceedings  
553 22. BPC section 2966 – Suspension during incarceration for felony  
554 conviction; Determination of substantial relationship of felony to functions  
555 of psychologist; Discipline or denial of license  
556 23. BPC section 2969 – Penalties for failure to provide medical records;  
557 Failure to comply with court order; Multiple acts  
558 24. BPC section 2970 – Violation of chapter as misdemeanor  
559 25. BPC section 2971 – Injunctions  
560 26. BPC section 2985 – Renewal of suspended licenses; Reinstatement of  
561 revoked licenses  
562 27. BPC section 2986 – Effect of failure to renew within prescribed time  
563 28. BPC section 2995 – Psychological corporation  
564 29. BPC section 2996 – Violation of unprofessional conduct  
565 30. BPC section 2996.1 – Conduct of practice  
566 31. BPC section 2996.2 – Accrual of income to shareholder while disqualified  
567 prohibited  
568 32. BPC section 2997 – Shareholders, directors and officers to be licensees  
569 33. BPC section 2998 – Name, 2999 – Regulation by committee  
570

571 **Agenda Item 14: Association of State and Provincial Psychology Boards (ASPPB)**  
572 **Update**  
573

574 Mr. Foo introduced this item and provided context that the mid-year meeting for ASPPB  
575 had been held virtually which gave more members the opportunity to attend. He opened  
576 the floor for Board comment.  
577

578 A discussion ensued between Board Members. Drs. Phillips and Tate expressed  
579 appreciation for being able to attend the mid-year ASPPB meeting. Dr. Tate expressed  
580 surprise at how ahead of the curve California is and was very proud to be a  
581 representative of this State.

582  
583 Dr. Harb Sheets stated her surprise at how many states required graduation from an  
584 APA accredited graduate program. She also spoke of her concern with a lack of  
585 cohesiveness between the different jurisdictions.

586  
587 Dr. Casuga expressed concerns on the possible infringement on jurisdictional power  
588 and echoed the comments of Dr. Harb Sheets.

589  
590 Dr. Rodgers supported the previous comments and stated there were opportunities to  
591 join volunteer task forces within ASPPB which would potentially provide openings for  
592 the Board to be involved in conversations. She expressed her appreciation at the  
593 opportunity to lead a mindfulness exercise during the meeting.

594  
595 Dr. Phillips echoed Dr. Rodgers and brought up, for context, the government travel  
596 limitations that have generally been in place.

597  
598 Ms. Sorrick stated that the ASPPB annual meeting in the fall will also be virtual and  
599 there will be opportunity to attend.

600  
601 Dr. Casuga clarified that the volunteer task forces that were mentioned by Dr. Rodgers  
602 generally did not require travel but meet virtually. She said this would provide more  
603 opportunity to have a seat at the table for future discussions.

604  
605 Mr. Foo clarified that the information reported above was related to the discussions had  
606 at the ASPPB mid-year meeting and that the Board of Psychology doesn't have any  
607 changes in relation to what ASPPB discussed but merely was providing a report on the  
608 experience. He stated that if any items were to be agendaized for any future Board  
609 meeting and if there was an item to be discussed further, it would be done in a  
610 collaborative manner to allow for the participation of stakeholders.

611  
612 There was no public comment offered.

613  
614 **Agenda Item 15: Legislative and Regulatory Affairs**

615  
616 a) Board-Sponsored Legislation for the 2021 Legislative Session: Review and  
617 Possible Action

618 i. SB 401 (Pan) Psychology: unprofessional conduct: disciplinary action:  
619 sexual acts

620  
621 Dr. Phillips introduced this item and expressed appreciation to the California  
622 Psychological Association for their work with the Board on SB 401 (Pan).

623  
624 Ms. Rivera provided a brief information-only update for this agenda item. No action was  
625 required

626  
627 There was no Board or public comment offered.

628  
629 ii. Pathways to Licensure Statutory Revisions – Amendments to sections 27,  
630 2909, 2909.5, 2910, 2911, 2913, 2914, 2915, 2915.5, 2915.7, 2942, 2944,  
631 2946, and 2960 of the Business and Professions Code, and section 1010  
632 of the Evidence Code.

633  
634 Dr. Phillips introduced this item and Ms. Rivera provided an update that the Board was  
635 waiting to be included in the bill. No action was required.

636  
637 There was no Board or public comment offered.

638  
639 iii. Sunset Provisions – Amendments to section 2912, and Addition of  
640 Sections Related to Reinstatement to Active after Voluntary Surrender,  
641 Licensure Committee Delegated Authority, and Authority to Issue Waivers.

642  
643 Dr. Phillips introduced this item and Ms. Rivera provided an update. No action was  
644 required.

645  
646 Ms. Sorrick stated that the committee was reviewing statutory amendments and  
647 considering the Board for inclusion in SB 801 and that Agenda Items 2 and 3 were both  
648 in a “wait and see” status.

649  
650 There was no Board or public comment offered.

651  
652 b. Review and Consideration of Bills for an Active Position  
653 i. AB 885 (Quirk) Bagley-Keene Open Meeting Act: teleconferencing

654  
655 Dr. Phillips introduced this item and Ms. Rivera provided the update on the bill regarding  
656 accessibility to public meetings. It was staff’s recommendation to watch the bill and that  
657 staff will work with Dr. Rodgers to draft a letter of concern regarding the requirement  
658 that the meeting be both audibly and visually observable to the public.

659  
660 Staff’s concerns were stated by Ms. Rivera as follows: Technology may not allow for  
661 blurred backgrounds, there are health and safety of Board members and their family,  
662 and finally, there is considerable research on ZOOM fatigue and the impact of virtual  
663 meetings on mental health from cameras in meetings.

664  
665 Dr. Phillips asked if the option of a hybrid meeting of part teleconference and part in-  
666 person would be possible.

667



668 A discussion ensued about the possible implementation of a hybrid meeting. Concern  
669 was expressed by multiple Board Members about the difficulty of scheduling both  
670 videographer and WebEx. Ms. Rivera confirmed the mandatory requirement of video for  
671 in-person meetings.

672  
673 It was determined that Ms. Rivera would seek clarification from the authors office for  
674 Counsel regarding the intent of the bill and clarification as to why video would be  
675 required for remote participants.

676  
677 Mr. Maguire and Ms. Sorrick suggested additional changes to the language in  
678 Government Code section 11123 (b)(1)(B) and 11123 (b)(1)(C) to clarify “designated  
679 primary meeting location” and to adjust the section to address concerns for video, cost,  
680 and accessibility.

681  
682 Dr. Phillips confirmed with Ms. Rivera that the bill should be on watch status and does  
683 not require a motion and vote.

684  
685 There was no public comment offered.

686  
687 Mr. Maguire stated that counsel would work with staff on which specific points to ask the  
688 author for clarity.

689  
690 Ms. Sorrick stated that staff would work with counsel to make sure all concerns of Board  
691 Members are addressed.

692  
693 c. Review of Bills with Active Positions Taken by the Board

694 1. AB 32 (Aguiar-Curry) Telehealth

695  
696 Dr. Phillips introduced and Ms. Rivera provided an update on this item regarding  
697 telehealth related to Medi-Cal. Ms. Rivera stated the Committee’s recommendation on  
698 March 19, 2021 to support AB 32 (Aguiar-Curry) and was adopted by the Board on April  
699 2, 2021.

700  
701 Ms. Rivera stated AB 32 (Aguiar-Curry) had passed out of Appropriations on a 16-0  
702 vote and would be moving to floor.

703  
704 This update was provided as information only, with no action required.

705  
706 There was no Board or public comment offered.

707  
708 2. AB 107 (Salas) Department of Consumer Affairs: boards: temporary  
709 licenses: military spouses

710  
711 Dr. Phillips introduced and Ms. Rivera provided an update on this item regarding the  
712 issuing of temporary authorization to active duty military spouses. She stated that staff

713 had spoken with the author's office and sponsor who was willing to assist staff to make  
714 necessary modifications to BPC 2946 to include the Board under the exemption.

715  
716 Ms. Rivera provided the Committee's recommendation on March 19, 2021 to Support if  
717 Amended on AB 107 (Salas). This recommendation was adopted by the Board on April  
718 2, 2021. The bill passed out of the Appropriations Committee and Ms. Rivera stated  
719 staff's understanding that the author's office intends to include the Board on the  
720 amendments they submit when the bill gets to the Senate Business, Professions and  
721 Economic Committee.

722  
723 This update was provided as information only, with no action required.

724  
725 There was no Board or public comment offered.

726  
727 3.SB 731 (Durazo) Criminal records: relief

728  
729 Dr. Phillips introduced and Ms. Rivera provided an update on this item regarding the  
730 ability of the Board to receive conviction information for applicants under specific  
731 circumstances.

732  
733 Ms. Rivera stated that this bill would have a large impact on the Board's licensing and  
734 enforcement programs and would hinder the Board's ability protect consumers.

735  
736 Ms. Rivera provided the Committee's recommendation on March 19, 2021 to oppose  
737 SB 731 (Durazo). This recommendation was adopted by the Board on April 2, 2021.

738  
739 Ms. Rivera stated SB 731 (Durazo) passed out of Appropriations with a 5 - 2 vote.

740  
741 This update was provided as information only, with no action required.

742  
743 There was no Board or public comment offered.

744  
745 4.SB 772 (Ochoa Bogh) Professions and vocations: citations: minor violations

746  
747 Dr. Phillips introduced and Ms. Rivera provided an update on this item.

748  
749 She stated the Committee had agreed with the staff recommendation for an Oppose  
750 Unless Amended position on SB 772 (Ochoa Bogh). This recommendation was adopted  
751 by the Board on April 2, 2021.

752  
753 Ms. Rivera stated SB 772 (Ochoa Bogh) would be a two-year bill.

754  
755 This update was provided as information only, with no action required.

756  
757 There was no Board or public comment offered.

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d. Review of Watch Bills

Dr. Phillips stated that the Board would review Agenda Items 15 (d) 5, 11, and 14.

1. AB 29 (Cooper) State bodies: meetings
2. AB 54 (Kiley) COVID-19 emergency order violation: license revocation
3. AB 225 (Gray) Department of Consumer Affairs: boards: veterans: military spouses: licenses
4. AB 339 (Lee) State and local government: open meetings
5. AB 562 (Low) Frontline COVID-19 Provider Mental Health Resiliency Act of 2021: health care providers: mental health services

Ms. Rivera provided a review of this item regarding the establishment of a mental health resiliency program to provide mental health services to licensed health care providers who have provided health care services to COVID-19 patients.

She stated the Board had agreed with the Committee recommendation to watch AB 562 (Low) on April 2, 2021 and the bill passed out of the Appropriations Committee on a 16-0 vote.

This update was provided as information only, with no action required.

Dr. Phillips opined that Board of Psychology licensees be included as part of the bill, which was echoed by Mr. Maguire.

Ms. Rivera confirmed that the details were still being defined and that she could communicate with the author's office to discuss.

There was no public comment offered.

6. AB 646 (Low) Department of Consumer Affairs: boards: expunged convictions
7. AB 657 (Bonta) State civil service system: personal services contracts: professionals
8. AB 810 (Flora) Healing arts: reports: claims against licensees
9. AB 830 (Flora) Department of Consumer Affairs: director: powers and duties
10. AB 1026 (Smith) Business licenses: veterans.
11. AB 1236 (Ting) Healing arts: licensees: data collection

Dr. Phillips introduced this item and Ms. Rivera provided an update.

Ms. Rivera provided a review of this item regarding possible requirement of data collection of healing arts licensees.

803  
804 She stated that on March 19, 2021, the Committee had agreed with the staff  
805 recommendation for an Oppose Unless Amended position on AB 1236 (Ting). This  
806 recommendation was adopted by the Board on April 2, 2021.

807  
808 Ms. Rivera clarified that while staff supported the voluntary collection of information, the  
809 requirement that programs compile and submit a report of the data would be cost  
810 prohibitive to the Board which is currently in need of a fee increase.

811  
812 This update was provided as information only, with no action required.

813  
814 There was no Board or public comment offered.

- 815  
816 12. AB 1386 (Cunningham) License fees: military partners and spouses  
817 13. SB 102 (Melendez) COVID-19 emergency order violation: license  
818 revocation  
819 14. SB 221 (Wiener) Health care coverage: timely access to care

820  
821 Dr. Phillips introduced this item and Ms. Rivera provided an update.

822  
823 Ms. Rivera provided a review of this item regarding access to care. She provided the  
824 staff recommendation that the Board watch SB 221 (Weiner).

825  
826 Board comment

827  
828 Dr. Casuga opined that the Board watch this bill and Dr. Phillips expressed appreciation  
829 for Dr. Casuga's comment.

830  
831 There was no public comment offered.

- 832  
833 15. SB 224 (Portantino) Pupil instruction: mental health education

834  
835 e) Legislative Items for Future Meeting. The Board May Discuss Other Items of  
836 Legislation in Sufficient Detail to Determine Whether Such Items Should be  
837 on a Future Board Meeting Agenda and/or Whether to Hold a Special Meeting  
838 of the Board to Discuss Such Items Pursuant to Government Code section  
839 11125.4

840  
841 Dr. Phillips introduced this item.

842  
843 No Board or public comment was offered.

844  
845 **Agenda Item 16: Regulatory Update, Review, and Consideration of Additional**  
846 **Changes**

847

848 Mr. Glasspiegel provided update on Agenda Items 16(a) –16(g).

849

850 No Board or public comment was offered.

851

852 a) 16 California Code of Regulations (CCR) 1396.8 – Standards of Practice for  
853 Telehealth

854 b) 16 CCR sections 1391.1, 1391.2, 1391.5, 1391.6, 1391.8, 1391.10, 1391.11,  
855 1391.12, 1392.1 – Psychological Assistants

856 c) 16 CCR sections 1381.9, 1381.10, 1392 – Retired License, Renewal of  
857 Expired License, Psychologist Fees

858 d) 16 CCR sections 1381.9, 1397.60, 1397.61, 1397.62, 1397.67 – Continuing  
859 Professional Development

860 e) 16 CCR sections 1391.13, and 1391.14 – Inactive Psychological Assistant  
861 Registration and Reactivating a Psychological Assistant Registration

862 f) 16 CCR sections 1392 and 1392.1 – Psychologist Fees and Psychological  
863 Assistant Fees

864 g) 16 CCR 1395.2 – Disciplinary Guidelines and Uniform Standards Related to  
865 Substance-Abusing Licensees

866

867 **Agenda Item 17: Recommendations for Agenda Items for Future Board Meetings**

868

869 Mr. Foo introduced this item and asked for recommendations.

870

871 Dr. Casuga asked the Telepsychology Committee to research issues related to  
872 Telehealth regarding teletherapy and tele-assessment to clarify some questions as to  
873 what treatment modalities can be provided via phone.

874

875 Dr. Phillips stated that this request had not been placed on the agenda for the  
876 Telepsychology Committee because the topic may relate more to a “standard of care”  
877 issue, but that he would investigate the appropriateness of where the issue could be  
878 addressed.

879

880 Mr. Foo requested that Ms. Sorrick provide an update on the Health Care Professionals  
881 Educational Fund at a future Board meeting.

882

883 No public comment was offered.

884

885 **CLOSED SESSION**

886

887 President Foo went to closed session at 1:56 p.m.

888

889 18. The Board Will Meet in Closed Session Pursuant to Government Code Section  
890 11126, subdivision (c)(3) to Discuss Disciplinary Matters Including Proposed  
891 Decisions, Stipulations, Petitions for Reinstatement or Modification of Penalty,  
892 Petitions for Reconsideration, and Remands.

893

894 **ADJOURNMENT**

895

896 **The Board adjourned at 3:17 p.m.**

## MEMORANDUM

<b>DATE</b>	August 18, 2021
<b>TO</b>	Board of Psychology
<b>FROM</b>	Jason Glasspiegel Central Services Manager
<b>SUBJECT</b>	Agenda Item #7 - Budget Report

### **Background:**

In the Governor's 2020-21 Budget, after the current year augmentation for the Attorney General, the Board has an appropriation of \$6,162,000. This number is expected to increase to roughly \$6,357,000.

Of importance, Attachment C shows the Board with 14.1 months in reserve this fiscal year. This number is currently below the threshold 24 months in reserve which would require a fee reduction, but above the preferred three to six months. As illustrated in Attachment C, the Board's months in reserve will be in the negative by Fiscal Year 2023-2024. The regulatory changes to increase the Board's fees to the statutory limit (combined with the CPLEE fee Increase), as well as repayment of our general fund loan is anticipated to provide the Board an additional \$2,074,000 in revenue, prolonging the Board's insolvency to Fiscal Year 2024-2025.

The Board's current plan to end its structural imbalance and eventual insolvency is as follows:

1. Contract and bid for fee study: July – December 2021 (draft contract is currently in review by DCA. This process takes between 3-6 months)
2. Fee study to start no earlier than January 1, 2022, or upon execution of the contract
3. Fee Study to be completed by the end of Q3 2022
4. Board to review fee study recommendations November 2022
5. If decided by the Board, legislation introduced January 2023
6. Legislation effective January 2024
7. Section 100 regulatory change to move fees to the new statutory minimum submitted January 2024, can be made affective July 1, 2024 (beginning of Fiscal Year 2024-2025)

### **Action Requested:**

This item is informational purposes only. No action is required.

Attachment A: Budget Report: FY 20-21 through Fiscal Month 12 with AG Augmentation

Attachment B: Discretionary vs. Non-Discretionary Expenses

Attachment C: Fund Condition

Attachment D: Expenditure and Revenue Comparison

Department of Consumer Affairs

Expenditure Projection Report

Board of Psychology

Reporting Structure(s): 11112100 Support

Fiscal Month: 12

Fiscal Year: 2020 - 2021

Run Date: 08/12/2021

**PERSONAL SERVICES**

Fiscal Code	PY FM13	Budget	YTD	Projections to Year End	Balance
5100 PERMANENT POSITIONS	\$1,579,462	\$1,397,000	\$1,534,989	\$1,534,989	-\$137,989
5100 TEMPORARY POSITIONS	\$122,469	\$47,000	\$10,489	\$11,443	\$35,557
5105-5108 PER DIEM, OVERTIME, & LUMP SUM	\$17,252	\$22,000	\$48,024	\$48,024	-\$26,024
5150 STAFF BENEFITS	\$1,013,213	\$980,000	\$938,218	\$938,797	\$41,203
5170 SALARY SAVINGS	\$65	\$0	\$0	\$0	\$0
<b>PERSONAL SERVICES</b>	<b>\$2,732,461</b>	<b>\$2,446,000</b>	<b>\$2,531,719</b>	<b>\$2,533,252</b>	<b>-\$87,252</b>

**OPERATING EXPENSES & EQUIPMENT**

Fiscal Code	PY FM13	Budget	YTD	Projections to Year End	Balance
5301 GENERAL EXPENSE	\$56,779	\$110,000	\$32,157	\$55,779	\$54,221
5302 PRINTING	\$57,303	\$53,000	\$25,483	\$47,120	\$5,880
5304 COMMUNICATIONS	\$3,994	\$44,000	\$3,665	\$3,973	\$40,027
5306 POSTAGE	\$1,428	\$27,000	\$2,058	\$2,058	\$24,942
5308 INSURANCE	\$55	\$0	\$355	\$355	-\$355
53202-204 IN STATE TRAVEL	\$41,044	\$22,000	\$3,302	\$3,302	\$18,698
5322 TRAINING	\$24,321	\$17,000	\$1,000	\$1,000	\$16,000
5324 FACILITIES	\$311,456	\$146,000	\$219,129	\$227,859	-\$81,859
53402-53403 C/P SERVICES (INTERNAL)	\$1,161,586	\$1,548,000	\$1,226,929	\$1,326,621	\$221,379
53404-53405 C/P SERVICES (EXTERNAL)	\$454,257	\$418,000	\$276,263	\$377,551	\$40,449
5342 DEPARTMENT PRORATA	\$881,588	\$1,403,000	\$1,386,521	\$1,386,521	\$16,479
5342 DEPARTMENTAL SERVICES	\$40,827	\$54,000	\$72,549	\$72,549	-\$18,549
5344 CONSOLIDATED DATA CENTERS	\$12,435	\$11,000	\$19,772	\$19,772	-\$8,772
5346 INFORMATION TECHNOLOGY	\$2,225	\$43,000	\$1,496	\$2,050	\$40,950
5362-5368 EQUIPMENT	\$25,283	\$15,000	\$10,226	\$10,226	\$4,774
5390 OTHER ITEMS OF EXPENSE	-\$218,674	\$0	\$0	\$3,620	-\$3,620
54 SPECIAL ITEMS OF EXPENSE	\$8,071	\$0	\$3,463	\$0	\$0
<b>OPERATING EXPENSES &amp; EQUIPMENT</b>	<b>\$2,863,977</b>	<b>\$3,911,000</b>	<b>\$3,284,367</b>	<b>\$3,540,356</b>	<b>\$370,644</b>

<b>OVERALL TOTALS</b>	<b>\$5,596,438</b>	<b>\$6,357,000</b>	<b>\$5,816,087</b>	<b>\$6,073,608</b>	<b>\$283,392</b>
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4.46%



<b>Board of Psychology Budget Items</b>	
<b>Non-Discretionary Budget</b>	
Personal Services <i>Permanent Staff, Per Diem, Benefits</i>	\$ 2,505,728
Operating Expenses <i>Facilities, Departmental Services, Department Prorata, Credit Card Processing, Examinations, Enforcement</i>	\$ 3,387,045
<b>Discretionary Budget</b>	
Personal Services <i>Temporary Help, Overtime, Final Pay</i>	\$ 27,524
Operating Expenses <i>General Operating Expenses, Equipment, Travel, Maintenance Contracts, Printing, Postage, Communications, IT, Training, Consolidated Data</i>	\$ 153,311
<b>Total Budget</b>	<b>\$ 6,073,608</b>

## 0310 - Psychology

### Fund Condition Analysis

#### 2021-22 Budget Act with CY FM 12 Projections

(Dollars in Thousands)

	PY 2019-20	CY 2020-21	BY 2021-22	BY+1 2022-23	BY+2 2023-24
<b>BEGINNING BALANCE</b>	\$ 7,856	\$11,396	\$8,709	\$5,691	\$2,391
Prior Year Adjustment	-\$77	\$0	\$0	\$0	\$0
Adjusted Beginning Balance	\$7,779	\$11,396	\$8,709	\$5,691	\$2,391
<b>REVENUES, TRANSFERS AND OTHER ADJUSTMENTS</b>					
Revenues					
4121200 - Delinquent fees	\$50	\$77	\$49	\$49	\$49
4127400 - Renewal fees	\$3,602	\$3,790	\$3,459	\$3,459	\$3,459
4129200 - Other regulatory fees	\$192	\$178	\$199	\$199	\$199
4129400 - Other regulatory licenses and permits	\$569	\$574	\$604	\$604	\$604
4150500 - Interest from interfund loans	\$1,066	\$0	\$0	\$0	\$0
4163000 - Income from surplus money investments	\$233	\$47	\$107	\$35	\$0
4171400 - Escheat of unclaimed checks and warrants	\$3	\$2	\$1	\$1	\$1
4172500 - Miscellaneous revenues	\$0	\$0	\$1	\$1	\$1
4173500 - Settlements and Judgements - Other	\$0	\$4	\$0	\$0	\$0
Totals, Revenues	\$5,715	\$4,672	\$4,420	\$4,348	\$4,313
Transfers from Other Funds					
GF Loan Repayment Per Item 1450-011-0310 BA of 2002	\$1,200	\$0	\$0	\$0	\$0
GF Loan Repayment Per Item 1110-011-0310 BA of 2008	\$2,500	\$0	\$0	\$0	\$0
GF Loan Repayment Per Item 1110-011-0310 BA of 2020	\$0	\$0	\$0	\$0	\$900
Transfers to Other Funds					
GF Loan Per Item 1111-011-0310 BA of 2020	\$0	-\$900	\$0	\$0	\$0
<b>TOTALS, REVENUES, TRANSFERS AND OTHER ADJUSTMENTS</b>	\$9,415	\$3,772	\$4,420	\$4,348	\$5,213
<b>TOTAL RESOURCES</b>	\$17,194	\$15,168	\$13,129	\$10,039	\$7,604
<b>EXPENDITURES AND EXPENDITURE ADJUSTMENTS</b>					
Expenditures:					
1111 Program Expenditures (State Operations)	\$5,396	\$6,074	\$6,995	\$7,205	\$7,421
8880 Financial Information System for California (State Operations)	-\$1	\$0	\$0	\$0	\$0
9892 Supplemental Pension Payments (State Operations)	\$94	\$94	\$94	\$94	\$94
9900 Statewide Pro Rata	\$309	\$291	\$349	\$349	\$349
<b>TOTALS, EXPENDITURES AND EXPENDITURE ADJUSTMENTS</b>	\$5,798	\$6,459	\$7,438	\$7,648	\$7,864
<b>FUND BALANCE</b>					
Reserve for economic uncertainties	\$11,396	\$8,709	\$5,691	\$2,391	-\$260
Months in Reserve	21.2	14.1	8.9	3.6	-0.4

#### NOTES:

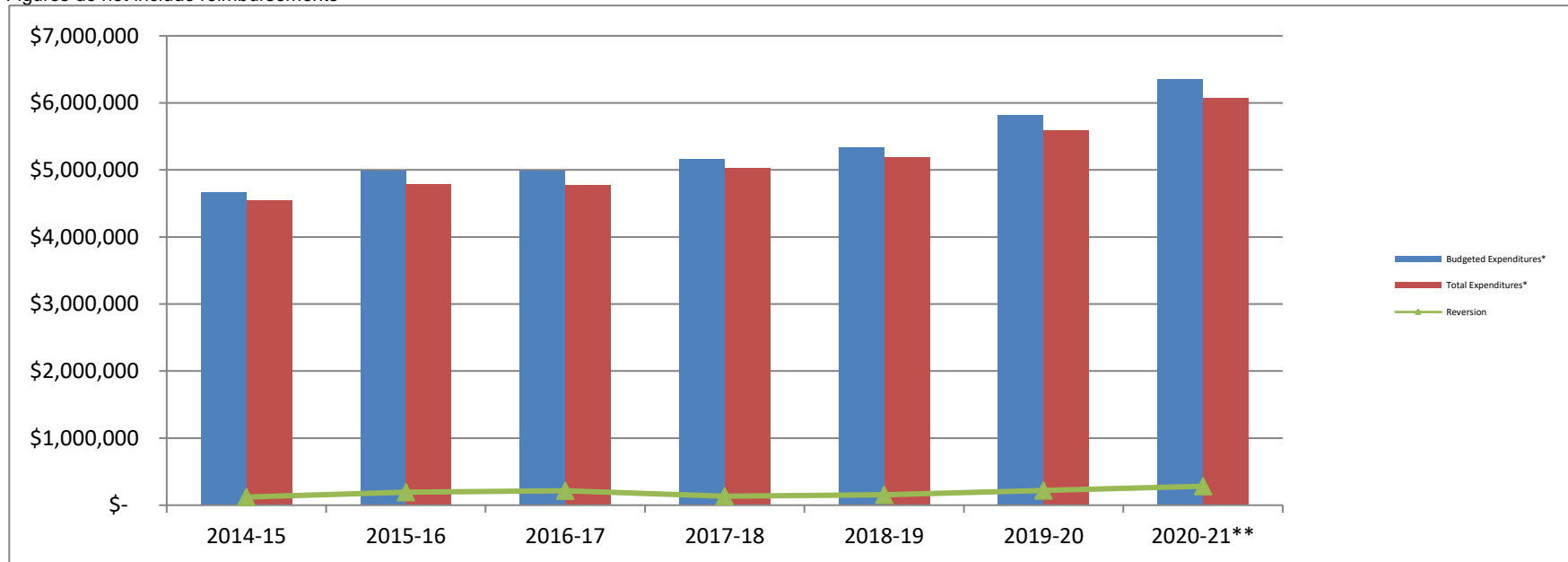
Assumes workload and revenue projections are realized in BY +1 and ongoing.

Expenditure growth projected at 3% beginning BY +1.

CY revenues and expenditures are FM 11 projections.

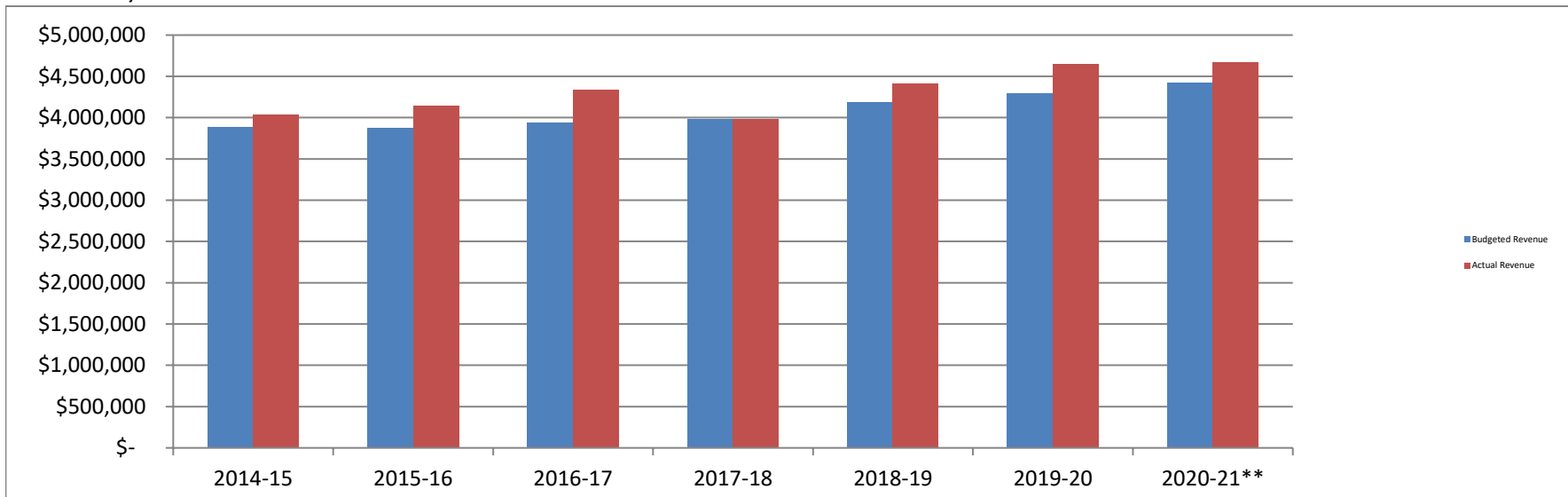
Psychology Expenditure Comparison (Budgeted vs. Actual)							
	2014-15	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21**
Budgeted Expenditures*	\$4,669,000	\$4,984,000	\$4,989,000	\$5,158,000	\$ 5,341,000	\$ 5,817,000	\$ 6,357,000
Total Expenditures*	\$4,548,000	\$4,792,000	\$4,773,000	\$5,024,000	\$ 5,185,000	\$ 5,596,000	\$ 6,074,000
Reversion	\$ 121,000	\$ 192,000	\$ 216,000	\$ 134,000	\$ 156,000	\$ 221,000	\$ 283,000

\*Figures do not include reimbursements



Psychology Revenue Comparison (Projected vs. Actual)							
	2014-15	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21**
Budgeted Revenue	\$3,887,000	\$3,872,000	\$3,941,000	\$3,980,000	\$ 4,185,000	\$ 4,298,000	\$ 4,420,000
Actual Revenue	\$4,034,000	\$4,150,000	\$4,337,000	\$3,980,000	\$ 4,412,000	\$ 4,649,000	\$ 4,672,000
Difference	\$ 147,000	\$ 278,000	\$ 396,000	\$ -	\$ 227,000	\$ 351,000	\$ 252,000

\*\*2020-21 Projected



**From:** [bopmail@DCA](mailto:bopmail@DCA)  
**To:** [Burke, Jonathan@DCA](mailto:Burke,Jonathan@DCA); [Glasspiegel, Jason@DCA](mailto:Glasspiegel,Jason@DCA); [Rivera, Cristina@DCA](mailto:Rivera,Cristina@DCA)  
**Subject:** FW: Feedback re: PSYPACT  
**Date:** Thursday, August 19, 2021 1:04:04 PM

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**From:** Geri W [REDACTED]  
**Sent:** Thursday, August 19, 2021 1:00 PM  
**To:** bopmail@DCA <bopmail@dca.ca.gov>  
**Subject:** Feedback re: PSYPACT

[EXTERNAL]: [REDACTED]

**CAUTION:** THIS EMAIL ORIGINATED OUTSIDE THE DEPARTMENT OF CONSUMER AFFAIRS!  
**DO NOT:** click links or open attachments unless you know the content is safe.  
**NEVER:** provide credentials on websites via a clicked link in an Email.

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Greetings,

I am a licensed psychologist in CA, and I understand that the Board will be discussing PSYPACT at its 8/27 meeting. I would like to express my support for CA joining Psypact, for these reasons:

1. It will help clients to have continuity of care via telehealth as they move to a new location, which is itself a stressful life transition, and hence not a time when starting over with a new therapist is ideal.
2. Many couples reside in different states for work reasons, or due to long distance relationships, and it is hard to find therapists who are licensed in both states for these couples.
3. It is not practical for therapists to obtain new licenses or temporary permits every time a client moves to a new state.

Hence, in this increased epoch of career mobility and telehealth access, it seems like the right choice to move in the direction of more universal standards and reciprocity for psych care. Please support CA joining PSYPACT.

Many thanks,  
Geri Weitzman PhD

On Mon, Aug 16, 2021 at 5:15 PM Psychology Board <[00000013d0ed399d-dmarc-request@subscribe.dcalists.ca.gov](mailto:00000013d0ed399d-dmarc-request@subscribe.dcalists.ca.gov)> wrote:

Good Afternoon,

The Board of Psychology will be holding its quarterly Board Meeting via WebEx on August 27, 2021. At this meeting, the Board will discuss the Psychology Interjurisdictional Compact (PSYPACT). To view the agenda, click here:

[https://www.psychology.ca.gov/about\\_us/meetings/agendas/20210827.shtml](https://www.psychology.ca.gov/about_us/meetings/agendas/20210827.shtml).

Thank you,

The Board of Psychology

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**To:** [Burke, Jonathan@DCA](mailto:Burke_Jonathan@DCA); [Glasspiegel, Jason@DCA](mailto:Glasspiegel_Jason@DCA); [Rivera, Cristina@DCA](mailto:Rivera_Cristina@DCA)  
**Subject:** FW: Please Oppose PSYPACT's Recommendations that Licensed Psychologists from WASC-Accredited Schools Be Prohibited from Delivering Tele-Health Services  
**Date:** Wednesday, August 18, 2021 8:27:31 AM

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-----Original Message-----

From: Ariane Eroy <[ariane\\_ahimsa@yahoo.com](mailto:ariane_ahimsa@yahoo.com)>  
Sent: Tuesday, August 17, 2021 7:14 PM  
To: [bopmail@DCA](mailto:bopmail@DCA) <[bopmail@dca.ca.gov](mailto:bopmail@dca.ca.gov)>  
Subject: Please Oppose PSYPACT's Recommendations that Licensed Psychologists from WASC-Accredited Schools Be Prohibited from Delivering Tele-Health Services

[EXTERNAL]: [ariane\\_ahimsa@yahoo.com](mailto:ariane_ahimsa@yahoo.com)

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.....  
Dear California Board of Psychology,

I am a clinical psychologist who attended The California Institute of Integral Studies (CIIS). My academic research resulted in a 3-volume, qualitative dissertation on prisoner re-entry.

Like many people who attended both APA-accredited or merely WASC accredited graduate schools, I have worked hard not merely to hone my skills through experiential, largely unpaid practicums and predoctoral placements, but sacrificed years of my earning power and my very best energies to make important contributions to the health of the larger society. All psychologists, in fact, contribute through their original, academic research, not merely through their hard work helping often difficult-to-treat, vulnerable clients.

My first 25 years working as a clinician were spent in under-resourced, community mental health settings. My predoctoral internships were at Laguna Honda Hospital, and City College of San Francisco. For 17 years alone, I worked as a staff therapist at Richmond Area Multi-Services (RAMS), where I served primarily indigent, ethnically diverse, and severely mentally ill clients, many of whom had a serious trauma history.

For decades, RAMS has not merely offered outpatient mental health services for both adults and children, but also has served as a nationally-renowned educational center, training both practicum students as well as pre- and post-doctoral students in the delivery of culturally competent, psychodynamically-oriented psychological services. Every week, I participated in and contributed to such training endeavors, with the aim both to deepen and to diversify the perspectives being shared.

My orientation is both informed by object relations and transpersonal psychology. Attending an alternative graduate school such as CIIS broadened my thinking in preparation for my work in multi-cultural settings— where both staff and immigrants were often people of color. (When I attended CIIS, it was known as an institution that fostered a love of Asian culture, spirituality, and ways of knowing, while RAMS has long specialized in serving the Asian-American population of San Francisco.)

In 2018, I began working solely as a private-practice psychologist. I accept multiple insurance plans, but as of now principally devote most of my time-slots to individuals covered by MediCare (since the US Government permitted funding of Telehealth Services). In this way, I have been able to continue and expand my work with the vulnerable and isolated elderly, as well as those disabled by chronic, painful illnesses or paralyzing accidents. I believe my years of education and training have prepared me for delivering such services.

As a seasoned psychologist, I thus cannot help but question why the California Board of Psychology would be seriously considering instituting PSYPACT's recommendation that successful, licensed, and diversely-trained, psychologists be prevented from delivering tele-health sessions at this time.

This would impede the California Board of Psychology's aim to meet the Public's need for psychotherapy services. The need for such services is likely to continue to rise over the years ahead, considering the many crises Humanity faces. As such, traditional and alternative graduate schools of psychology that educate diverse kinds of psychologists are playing an essential role in helping address the needs of vulnerable Californians during the Quarantine and into the future.

In addition, I do not believe there could have been as of yet any serious, longitudinal studies focussed on differentiating the quality of tele-services delivered by graduates of different graduate schools. Because of PSYPACT's political agenda, I am now forced to ask if the California Board of Psychology has compiled statistics with regards to the Public's complaints against psychologists that are organized by educational institution, although statistics have long existed concerning ethics complaints as regards therapist gender. Complaints can be initiated by any client, even the most mentally ill, however, such statistics might prove that a psychologists' graduate school may not be definitive in determining their competency in delivering tele-health services.

Telehealth is an important modality of services, and should be made available to an important subset of the clinical population (although may not be appropriate or sufficient for those with severe personality-disorders or psychotic symptoms). The modality may in fact prove to be an increasingly important service moving forward, considering its convenience, its cost-effectiveness, and its accessibility.

In the past year, moreover, one out of six Americans have entered therapy for the very first time. Perhaps that is not at all surprising: Our society faces serious challenges now and for the unforeseeable future in areas that touch everything from Americans' sense of identity to a highly unstable economy; from this last year's sudden, massive loss of jobs in response to a health crisis to the US population's shifting values and ethnic make-up; from increased awareness about political corruption to increasingly frequent protests against abuses in power, wealth and privilege; from concerns about violence to the collapse of ecosystems upon which we all rely. In the past 17 months, many more Americans have struggled with serious threats to their health, while the Quarantine has led to the permanent closure of many businesses, culturally important institutions, and schools—including many universities. We can predict that such sudden, wide ranging and existential challenges will continue to pose—and to exacerbate—all kinds of health problems over the years ahead. Thus, it is critical that the California Board of Psychology protect the Public and not concede to the recommendations of special interest groups arguing to curtail the Public's overall access to psychologists—all of whom faced numerous, rigorous, and costly hurdles before becoming licensed.

In sum, I do not believe that PSYPACT can prove that those who were educated at alternative graduate institutions are any less prepared to deliver services using the telehealth modality. Moreover, I do not believe their recommendation serves the Public's good. Both physical and mental health problems will prove to be an increasingly costly burden for all Californians, all Americans, and all people— if left unaddressed.

Sincerely yours,  
Ariane Eroy, Ph. D.  
PSY #26336



**From:** [bopmail@DCA](mailto:bopmail@DCA)  
**To:** [Burke, Jonathan@DCA](mailto:Burke,Jonathan@DCA); [Glasspiegel, Jason@DCA](mailto:Glasspiegel,Jason@DCA); [Rivera, Cristina@DCA](mailto:Rivera,Cristina@DCA)  
**Subject:** FW: Please support PSYPACT  
**Date:** Wednesday, August 18, 2021 8:27:09 AM

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**From:** Barbara Grelling, PhD [REDACTED]  
**Sent:** Tuesday, August 17, 2021 7:55 PM  
**To:** bopmail@DCA <bopmail@dca.ca.gov>  
**Subject:** Please support PSYPACT

[EXTERNAL]: [REDACTED]

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Dear members of the CA Board of Psychology,

I am writing to express my strong support for the adoption of the PSYPACT inter-jurisdictional compact in California. I am a CA licensed psychologist who has been in practice here for almost two decades. .

I am deeply concerned as my understanding is that the board is expected to vote against pursuing this compact, a decision that does not seem to fit with the board's mandate to protect consumers in our state. Instead, it puts the interests of the tiny minority of psychologists who could not participate above the interests of those many consumers who use our services.

I work with several college-age clients who have been frustrated when told that I cannot see them through teletherapy across state lines. A few of my clients have started therapy with me in California after leaving college for mental health reasons. When they were doing better and returning to school out of state, they were wanting to continue in therapy with the same therapist that they were comfortable with and felt confident could support them in avoiding relapse. Instead, they were told they would need to start over with a therapist that they had never met before and often the process of finding an available therapist meant a delay in care.

I urge you to vote to pursue this legislation and begin the process of having CA join the 26 other PSYPACT states. This move is long overdue and honestly seems inevitable as the expansion of telehealth and the increasingly mobile population requires. Please help CA psychologists and the clients who depend on us move into the 21st century. Please vote to urge adoption of the PSYPACT legislation.

Thank you,

Barbara Grelling PhD  
PSY15830

**From:** [bopmail@DCA](mailto:bopmail@DCA)  
**To:** [Rivera, Cristina@DCA](mailto:Rivera,Cristina@DCA)  
**Cc:** [Glasspiegel, Jason@DCA](mailto:Glasspiegel,Jason@DCA); [Cheung, Stephanie@DCA](mailto:Cheung,Stephanie@DCA); [Burke, Jonathan@DCA](mailto:Burke,Jonathan@DCA)  
**Subject:** FW: Psychology Interjurisdictional Compact (PSYPACT)  
**Date:** Tuesday, August 17, 2021 2:41:28 PM  
**Importance:** High

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**From:** [REDACTED]  
**Sent:** Tuesday, August 17, 2021 2:23 PM  
**To:** bopmail@DCA <bopmail@dca.ca.gov>  
**Subject:** Psychology Interjurisdictional Compact (PSYPACT)  
**Importance:** High

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**The California Board of Psychology**  
**Meeting: Friday, August 27, 2021**  
**Reference: Psychology Interjurisdictional Compact**  
**(PSYPACT)**  
**Subject: Submission of written comments**

Greetings,

With all due respect, I am presenting to you the letter below, of my authorship, for your attention, consideration, and action in reference to the ASPPB/PSYPACT, in hopes that you will address the unfortunate discrimination that is systemically occurring within the PSYPACT program:

**SENT VIA FAX**

11 August 2021

Taja S. Slaughter, MPA  
*Director of Credentialing*

[REDACTED]



Dear Madam or Sir:

I am in receipt of your e-mail communication dated 23 March 2021, in which you inform me that the ASPPB Mobility Committee has placed my ASPPB e.Passport application under PSYPACT in *Denied* status.

I have patiently waited the ninety (90) days you gave me to submit an appeal, as I do not wish this document to be construed as such. Again, this is not an appeal to your decision, but an appeal to the common sense and sense of justice of the ASPPB authorities. My kind request to you is that you present this document to the proper ASPPB authorities.

The intent of this communication is to point out, most respectfully, that the ASPPB Mobility Committee, by applying its current requirement criteria, is *actively and blatantly discriminating* against *bona fide* graduates of doctoral programs accredited in the United States and Canada, while concurrently offering foreign graduates the opportunity of proving such requirement criteria equivalency, regardless of their provenance or quality of educational systems.

Had my degree-granting program been from an international institution, I would have had the recourse to have its equivalency established, but not so for a degree from a USA institution.

I have already submitted to you, with my application, a letter from the authorities at my *Alma Mater* indicating that my CSPP-SF doctoral program of studies was equivalent at the time of graduation (1976) to a program from an institution accredited by APA. This request was to satisfy the requirements for my ASPPB e.Passport application under PSYPACT. Part of my endeavors also included informing you of my current application

for licensure as psychologist in the State of Pennsylvania (in process), in addition to being licensed as Psychologist in California and registered as such in Ontario, Canada.

However, although I have a proven and positive history of over forty-five (45) years of doctoral-level engagement in my profession as a Clinical Psychologist, credentialed by the California Board of Psychology and the College of Psychologists of Ontario, as well as by the NRHSP and CRHSP, my application was deemed as *not qualifying* for approval by your Program.

Graduate students in psychology have to endure a myriad of requirements prior to graduation, only to have to prove, by successfully passing the EPPP, that their academic education was indeed a solid one based on nationally recognized standards. This all not being enough, the satisfactory completion of multiple requirements and the passing of a Laws and Ethics Examination and an Oral Exam in the State or Province for which licensure or registration is sought, is also generally required.

Nevertheless, this denial of an opportunity for professional growth feels like having been branded with a *Scarlet Letter* that I cannot ever escape regardless of my efforts. If I had not passed any of my independently qualifying exams, even the EPPP or Board/College exams, I could have remedied the situation and be made whole again. Not in my case. By believing in a dream, I received a sentence for life from you. Fair?

This situation is unjust and discriminates against all the hard-working faculty and students who believed in an idea and are now barred for life for following a dream, even though they have amply proven their worth as psychologists by all other accepted measurable standards.

Having chosen CSPP-SF as the place I wanted to receive my doctoral degree from, because I believed—and still do—in the ideals espoused by the institution, has branded me for life, and there is *nothing* I can do.

I feel and I am *actively* discriminated against by your program requirements. This is, in my view, an elitist and discriminatory position that is not consonant with my human rights and my rights as a professional psychologist who has fulfilled all legal and professional requirements. I believe that a challenge is in order, but it has to come from within the ASPPB.

I have now done my part by positing to you a minority perspective you may have not considered. I trust that you will receive this document and its contents with good will, and with an open mind to consider the need to make changes. That is my hope.

My plea to you, in the name of all alumni of CSPP and all the thousands of graduates of other recognized and duly-accredited programs in Psychology in the United States and Canada that do not meet your program criteria, is to revise and revert your requirements to an inclusive set of criteria that does not foster discrimination. Please allow us to prove to you that we are indeed qualified under the eyes of your Program.

Yours respectfully,

**Angel Enrique Pacheco, Ph.D., C.Psych.  
Clinical Psychologist**

Registered Member, *College of Psychologists of Ontario*, Member #  
4488

[Certificate of Registration Authorizing Autonomous Practice with  
Children, Adolescents, Adults, Seniors, Couples, Families, and  
Organizations]

Licensed Psychologist, *California Board of Psychology*, License # PSY  
5395

Registered Clinical Psychologist, *New Zealand Psychologists Board*,  
Registration # 90-03347

Licensed Clinical Psychologist, *Colegio Dominicano de Psicólogos*  
[*Dominican College of Psychologists*], Registration # 01-00124

Health Service Psychologist, *Canadian Register of Health Service Psychologists*, Registrant # 06196

Health Service Psychologist, *National Register of Health Service Psychologists*, Registrant # 51645

National Provider Identifier, *USA National Plan and Provider Enumeration System (NPPES)*, Provider Number 1316110141

**From:** [bopmail@DCA](mailto:bopmail@DCA)  
**To:** [Rivera, Cristina@DCA](mailto:Rivera,Cristina@DCA)  
**Cc:** [Glasspiegel, Jason@DCA](mailto:Glasspiegel,Jason@DCA); [Burke, Jonathan@DCA](mailto:Burke,Jonathan@DCA)  
**Subject:** FW: PSYPACT Telehealth Requirement Consideration  
**Date:** Tuesday, August 17, 2021 9:23:53 AM

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**From:** Raymond Turpin [REDACTED]  
**Sent:** Monday, August 16, 2021 3:22 PM  
**To:** bopmail@DCA <bopmail@dca.ca.gov>  
**Subject:** PSYPACT Telehealth Requirement Consideration

[EXTERNAL]: [REDACTED]

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Dear California Board of Psychology:

Although I do not currently practice in the state of CA, I graduated from a school there and I received what I consider to be excellent clinical training. My PsyD program was regionally accredited but not APA accredited and I am appalled that the Board is considering disqualifying therapists like myself from doing telehealth if they do not possess a degree from an APA accredited school. I see no reason for this. If a school is regionally accredited that should be enough. If you have concerns about the education of certain programs then research those instead of taking this blanket approach on all non-APA accredited programs.

Please do not make this decision as it will negatively impact a large number of otherwise fully qualified therapists from practicing in this age of pandemic. There is a drastic shortage of therapists here in North Carolina where I practice and I cannot imagine this decision happening here. It would be destructive to the profession, countless otherwise fully qualified therapists and it would also harm patients' ability to find a quality therapist for telehealth.

Raymond C Turpin, PsyD  
California Institute of Integral Studies (CLN '99)

**From:** [bopmail@DCA](mailto:bopmail@DCA)  
**To:** [Rivera, Cristina@DCA](mailto:Rivera,Cristina@DCA); [Cheung, Stephanie@DCA](mailto:Cheung,Stephanie@DCA)  
**Cc:** [Glasspiegel, Jason@DCA](mailto:Glasspiegel,Jason@DCA); [Burke, Jonathan@DCA](mailto:Burke,Jonathan@DCA)  
**Subject:** FW: PSYPACT  
**Date:** Tuesday, August 17, 2021 1:03:19 PM

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**From:** Nathan Brandon [REDACTED]  
**Sent:** Tuesday, August 17, 2021 12:53 PM  
**To:** bopmail@DCA <bopmail@dca.ca.gov>  
**Subject:** PSYPACT

[EXTERNAL]: [REDACTED]

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To Whom It May Concern:

I am writing to express my concern about adopting the PSYPACT agreement in its current form. It is my understanding that it would be required that in order to continue practicing telehealth in the state of California, psychologists would have to have attended an APA accredited program. I am a licensed psychologist in the state of California and have built my private practice over the course of the past three years providing solely online therapy. If PSYPACT is adopted in California, I would lose my entire private practice and livelihood.

I implore the Board of Psychology to consider the 30 percent of licensed psychologists in California who did not graduate from APA accredited programs because the Board does not require it to practice psychology in the state of California. To adopt the rule that you must have attended an APA accredited program now to practice telehealth would upend people's lives and would be a disservice to clients who are currently in engaged in telehealth with licensed psychologists who attended non-APA accredited programs.

--

Best regards,

Nathan Brandon, Psy.D.

[REDACTED]





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**Subject:** FW: Speaking up on behalf of PSYPACT  
**Date:** Thursday, August 19, 2021 8:28:31 AM

---

**From:** Daniela Owen [REDACTED]  
**Sent:** Wednesday, August 18, 2021 5:55 PM  
**To:** bopmail@DCA <bopmail@dca.ca.gov>  
**Subject:** Speaking up on behalf of PSYPACT

[EXTERNAL]: [REDACTED]

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ATTENTION:

Seyron Foo, President  
Lea Tate, Psy.D., Vice President

Dear Mr. Foo, Dr. Tate and members of the California Board of Psychology,

I am writing to express my strong support for the adoption of the Psychology Interjurisdictional Compact (PSYPACT) legislation in California. My experience providing services through the COVID-19 pandemic convinced me that it is time for PSYPACT in CA.

During the Pandemic, with a new baby born May 2020 amidst the greatest fears and unknown circumstances, my family had to make hard decisions. As a Psychologist licensed in CA with a new baby, we needed help with childcare so that I could return to work and help some of the many, many children and adolescents severely affected by COVID. Because of uncertainty surrounding safety of my newborn, my husband and I decided to move to FL to be near my parents, who would help care for our baby and follow every COVID safety guideline we wished. We didn't have to worry about working with a nanny who may or may not have followed the same guidelines as we deemed best for our family. As a result of our move, I was able to continue to provide care for patients in CA during this time. Now that we live in FL I would also like to offer treatment to the children in my area in Florida, who are in need. This would be especially helpful during the hours that are not convenient for my CA patients. Florida does not have reciprocity as many other states have and trying to balance my practice and parenting, I did not have the bandwidth to pursue an additional license. The more states who join PSYPACT the stronger it will become and encourage all states to join together towards allowing patients to see therapists in any state.

This will also be extremely helpful for my patients heading off to college who have a history of

working with me and then have their treatment unnecessarily interrupted when they move out of CA and have to try to start treatment with a new provider during a time when they are particularly vulnerable. Being able to continue care with these patients would be invaluable to them and their families not to mention would GREATLY minimize disruption to their treatment and improve speed of outcomes and gains.

I have educated myself about PSYPACT. The arguments for adopting PSYPACT legislation are compelling: even in the years preceding Covid, among the 51 million U.S. adults with mental illness, only about [45% received treatment](#); we now have an explosion of need secondary to the ravages of COVID and recent political upheaval; continuity of care with our current patients is seriously compromised by inter-state restrictions; the excellent specialized training we receive in CA could benefit many more clients currently out of reach of this care (e.g., those with autism spectrum disorder, ADHD, posttraumatic stress disorder, and opioid addiction); and there is already a strong national movement in the direction of interstate reciprocity: [26 states have already enacted PSYPACT](#) and more are pending legislation.

Importantly, MANY CA psychologists want PSYPACT.

The first objection often cited is that PSYPACT restricts participation to psychologists who graduated from APA or CPA-accredited programs. As you know, psychologists who did not graduate from such programs would not *lose* any of their current telehealth privileges in CA or across state lines, but they could not participate in the additional interstate privileges afforded by PSYPACT. This group is a tiny minority amongst a massive majority whom this would benefit (and most importantly it would benefit patients!).

The second current objection I am aware of is the fear of market competition: that psychologists with lower cost-of-living in other states could now practice in CA, offering similar services for lower fees. I acknowledge that reciprocity introduces the *possibility* of a more competitive, or at any rate different, marketplace for therapy in California over time. However, the access and continuity problems we are *currently* seeing outweigh the hypothetical financial concerns. For suffering individuals who could never afford a California private practice therapist, this opens a door to possible excellent care from qualified clinicians residing in states where they can afford to charge less and maintain a good quality of life. Furthermore, there is a ALWAYS (not just during COVID) a shortage of highly qualified and trained clinicians offering evidence-based treatments. As a result, many apps and other technology-based solutions have popped up to answer this problem. These are often not vetted, do not include Board Certified clinicians, and do include information that was not created by clinicians. This is a bigger concern - and is taking away from patients seeing actual clinicians - right now.

What's needed to address this country's current mental health crisis is major change, and all changes come with growing pains. Now that there exists a centralized system, which has solved many of the problems of regulation and disciplinary mechanisms,

and which has been subject to piloting in many U.S. states, I feel the burden is on us to **justify why it doesn't make sense** for CA to join this effort.

For all of these reasons, **advocating for PSYPACT legislation in CA** aligns with the Board's mission and strategic goals of supporting the evolution of the profession, while protecting the health, safety, and welfare of consumers (who are now at increased risk). As a CA psychologist, I believe it is worth contending with some possible struggle in order to vote with what for so many of us amounts to core values: to provide and advocate for appropriate treatment for people in need, in California and beyond.

Thank you for your time.

Sincerely,  
Daniela Owen, Ph.D.

--

Daniela J. Owen, Ph.D.

Clinical Psychologist, PSY23748  
Assistant Director, San Francisco Bay Area Center for Cognitive Therapy

[REDACTED]

Assistant Professor of Clinical Psychology  
University of California, Berkeley

Author

"Right now, I am fine"

[Right Now, I Am Fine – Puppy Dogs & Ice Cream Inc. \(puppydogsandicecream.com\)](http://puppydogsandicecream.com)

"Right now, I am brave"

[Right Now, I Am Brave – Puppy Dogs & Ice Cream Inc. \(puppydogsandicecream.com\)](http://puppydogsandicecream.com)

"Right now, I am kind"

[Right Now, I Am Kind – Puppy Dogs & Ice Cream Inc. \(puppydogsandicecream.com\)](http://puppydogsandicecream.com)

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**To:** [Burke, Jonathan@DCA](mailto:Burke,Jonathan@DCA); [Rivera, Cristina@DCA](mailto:Rivera,Cristina@DCA); [Glasspiegel, Jason@DCA](mailto:Glasspiegel,Jason@DCA)  
**Subject:** FW: Support for PsyPact  
**Date:** Friday, August 20, 2021 8:18:14 AM

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**From:** [REDACTED]  
**Sent:** Friday, August 20, 2021 7:22 AM  
**To:** bopmail@DCA <bopmail@dca.ca.gov>  
**Subject:** Support for PsyPact

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Greetings,

I am a licensed psychologist in California, and I understand that the Board will be discussing PSYPACT at its 8/27 meeting. I am not able to attend, but I would like to express my support for California joining Psypact, for these reasons:

1. It will help clients to have continuity of care via telehealth as they move to a new location, which is itself a stressful life transition, and hence not a time when starting over with a new therapist is ideal.
2. Many couples reside in different states for work reasons, or due to long distance relationships, and it is hard to find therapists who are licensed in both states for these couples.
3. In this mobile economy, clients may need to move to another state for work assignments, and ongoing treatment may help their ability to continue working productively.
3. It is not practical for therapists to obtain new licenses or temporary permits every time a client moves to a new state.

Conducting psychotherapy during the pandemic has demonstrated that telehealth access is an essential tool and method of delivering services. It is the right choice to move in the direction of more universal standards and reciprocity for psychological care. Please support California joining PSYPACT.

Thank you,  
Lea Goldstein, Ph.D.  
Psy11428

**From:** [Glasspiegel, Jason@DCA](mailto:Glasspiegel, Jason@DCA)  
**To:** [Rivera, Cristina@DCA](mailto:Rivera, Cristina@DCA)  
**Subject:** FW: Supporting PSYPACT  
**Date:** Monday, August 9, 2021 10:13:17 AM  
**Attachments:** [image002.png](#)  
[image003.png](#)

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**Jason Glasspiegel**  
**Central Services Manager**

(916) 574-7137 Direct  
(916) 574-8672 Fax  
[jason.glasspiegel@dca.ca.gov](mailto:jason.glasspiegel@dca.ca.gov)

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**Sent:** Monday, August 9, 2021 8:27 AM  
**To:** Foo, Seyron@DCA <Seyron.Foo@dca.ca.gov>; Phillips, Stephen@DCA <Stephen.Phillips@dca.ca.gov>  
**Cc:** Sorrick, Antonette@DCA <Antonette.Sorrick@dca.ca.gov>; Burke, Jonathan@DCA <Jonathan.Burke@dca.ca.gov>; Glasspiegel, Jason@DCA <Jason.Glasspiegel@dca.ca.gov>  
**Subject:** FW: Supporting PSYPACT

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**From:** Arielle Balbus [REDACTED]  
**Sent:** Sunday, August 8, 2021 10:26 AM  
**To:** bopmail@DCA <[bopmail@dca.ca.gov](mailto:bopmail@dca.ca.gov)>  
**Subject:** Supporting PSYPACT

[EXTERNAL]: [REDACTED]

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To Whom It May Concern:

I am a licensed psychologist practicing in the Bay Area writing in **strong support of PSYPACT** legislation in California. I became licensed shortly before the pandemic and have already experienced the ways that our current licensing restrictions negatively impact continuity of care and mental healthcare access for those who most need it. I believe that interstate licensing is the future for our field and hope that the CA board will not hesitate to do the right thing and join forces with other states.

Over the past two years, I have been offering therapy both to highly resourced families and families

living at or below the poverty line. During the pandemic, I had private practice folks spend time in Truckee or Hawaii, and community clients move to live with family or find work wherever they could. In both cases, there was a strong ethical imperative to maintain continuity of treatment during a uniquely stressful and disruptive time. Being part of PSYPACT would have ensured that I could offer unbroken access to remote treatment, critical for all families, but especially those who relocated to areas with poorer access to quality mental health care.

The issue of mental healthcare access has reached crisis proportions for our country at this time, and it is clear to me that the high density of CA clinicians becoming part of PSYPACT will mean greater access to care for rural areas and communities in the heartland who urgently need care, including specialized care that is most abundant in coastal cities. I strongly believe that a public health mission is at the core of what it means to be an ethical psychologist, and that joining PSYPACT is an obvious way to be in alignment with these values.

On a personal level, I have beloved aging relatives out of state whom I would love to be able to live with and care for as they need more care. Knowing that I could offer remote services across state lines would mean the world to me and my family in this age of greater mobility and a need for greater flexibility to care for one another.

Thank you for your consideration and for making this choice in alignment with our professional values.  
Best regards,  
Arielle Balbus

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Arielle Balbus, Psy.D.  
Licensed Clinical Psychologist (PSY#32171)

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**From:** [bopmail@DCA](mailto:bopmail@DCA)  
**To:** [Burke, Jonathan@DCA](mailto:Burke,Jonathan@DCA); [Rivera, Cristina@DCA](mailto:Rivera,Cristina@DCA); [Glasspiegel, Jason@DCA](mailto:Glasspiegel,Jason@DCA)  
**Subject:** FW: Vote No on PsyPACT Aug 27th  
**Date:** Thursday, August 19, 2021 8:26:25 AM

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**From:** Shelley Diamond, Ph.D. [REDACTED]  
**Sent:** Wednesday, August 18, 2021 7:07 PM  
**To:** bopmail@DCA <bopmail@dca.ca.gov>  
**Subject:** Vote No on PsyPACT Aug 27th

[EXTERNAL]: [REDACTED]

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Hello Board,

I cannot attend the meeting on August 27th because I am already committed to six hours seeing patients scheduled that day.

I have been licensed since 2006 and have been in private practice full time since then, that's 15 years. I have a full case load. Many of my patients have a history of childhood trauma and we have had to work hard to build a sense of trust in our relationship.

My degree is from Saybrook Graduate School, a regionally accredited school that did not conform to APA rules. If you approve PsyPACT, I will apparently lose my ability to practice as a licensed psychologist.

I am concerned about the psychological impact on my patients if I have to tell them they cannot work with me any longer. I know it will be a re-traumatization.

If you want to approve PsyPACT, please consider making it a law that only takes effect in the future, to people who have not yet earned a license or to people who have not yet graduated. Otherwise, there will be a devastating impact on patients who are all forced out of therapy with me and many other excellent psychologists.

I urge you to vote NO on a PsyPACT agreement that excludes currently licensed psychologists from practicing in California.

Best wishes, Shelley Diamond, Ph.D.

Shelley Diamond, Ph.D. #PSY20818  
[REDACTED]



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**From:** [Glasspiegel, Jason@DCA](mailto:Glasspiegel, Jason@DCA)  
**To:** [Rivera, Cristina@DCA](mailto:Rivera, Cristina@DCA)  
**Subject:** FW: Written comments for Board Meeting on August 27, 2021  
**Date:** Tuesday, August 17, 2021 10:06:51 AM  
**Attachments:** [image002.png](#)  
[image003.png](#)

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## Hand Carry for the Board Meeting



**Jason Glasspiegel**  
**Central Services Manager**

(916) 574-7137 Direct  
(916) 574-8672 Fax  
[jason.glasspiegel@dca.ca.gov](mailto:jason.glasspiegel@dca.ca.gov)

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**From:** bopmail@DCA <bopmail@dca.ca.gov>  
**Sent:** Tuesday, August 17, 2021 9:14 AM  
**To:** Cheung, Stephanie@DCA <Stephanie.Cheung@dca.ca.gov>  
**Cc:** Sorrick, Antonette@DCA <Antonette.Sorrick@dca.ca.gov>; Burke, Jonathan@DCA <Jonathan.Burke@dca.ca.gov>; Glasspiegel, Jason@DCA <Jason.Glasspiegel@dca.ca.gov>  
**Subject:** FW: Written comments for Board Meeting on August 27, 2021

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**From:** Erinn Tozer <[REDACTED]>  
**Sent:** Monday, August 16, 2021 7:09 PM  
**To:** bopmail@DCA <[bopmail@dca.ca.gov](mailto:bopmail@dca.ca.gov)>  
**Subject:** Written comments for Board Meeting on August 27, 2021

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Dear Members of the Board,

I am writing to urge increased funding and attention to the length of time it takes for an applicant to move through the psychological assistantship application process as well as the licensure process. As a small business group psychology practice, we have hired clinicians who are finishing their post-doc year. Because we can not receive reimbursement from an insurance company until the clinician has a psychological assistantship number, several of the clinicians will have to wait 8 weeks with no income while they wait for the Board to act (based on the timeline posted online). In addition, insurance companies won't allow us to credential new clinicians until they have a license number. We anticipate clinicians who have completed their post-doctoral year by the end of July to not have a license number until November 1st at the earliest based on timelines posted on the Board of Psychology website. After the license number is given, we then have to wait another 3-6 months for

the insurance companies to credential the clinician. I know the latter is not your problem. But even if we could fill a new clinician's caseload starting when their license number was given to them (estimated November 1st), that is a long time for a clinician to go without income (3 months). How can we treat our new clinicians this way? I urge increased funding to decrease the application timeframes for our colleagues. The current timelines are really unacceptable. We recently had a clinician take the CPLEE and it took 6 weeks after passing the CPLEE to get a license number. Why does this take so long when this is the final step? We should be able to give a license number the day they pass the CPLEE as you know well in advance who they are, what their credentials are, etc.

Best regards,  
Erinn Tozer, Ph.D.

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Erinn Tozer, Ph.D.  
Pronouns: She/her/hers  
Executive Director  
Hillcrest Psychological Associates



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**To:** [Burke, Jonathan@DCA](mailto:Burke,Jonathan@DCA); [Glasspiegel, Jason@DCA](mailto:Glasspiegel,Jason@DCA); [Rivera, Cristina@DCA](mailto:Rivera,Cristina@DCA)  
**Subject:** in favor of PSYPACT  
**Date:** Friday, August 20, 2021 1:19:26 PM

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**From:** [REDACTED]  
**Sent:** Friday, August 20, 2021 12:44 PM  
**To:** bopmail@DCA <bopmail@dca.ca.gov>  
**Subject:** in favor of PSYPACT

[EXTERNAL]: [REDACTED]

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To Whom It May Concern:

I am a licensed psychologist in CA, and I understand that the Board will be discussing PSYPACT at its 8/27 meeting. I am expressing my support for CA joining Psypact, for these reasons:

1. It will help clients to have continuity of care via telehealth as they move to a new location, which is itself a stressful life transition, and hence not a time when starting over with a new therapist is ideal.

2. As an Asian American licensed psychologist, many clients come to me because there is not one in their area, especially not one with knowledge and skills with that background and has expertise with trauma psychotherapy work. When clients move out of the state, there is even less access to Asian American therapists with trauma expertise.

3. Many couples and families reside in different states for work reasons, or due to long distance relationships, and it is hard to find therapists who are licensed in both states for these couples or family sessions.

4. It is not practical for therapists to obtain new licenses or temporary permits every time a client moves to a new state.

Hence, as career mobility continues to abound, and there's telehealth access, it is the logical and most client-centered choice to move in the direction of more universal standards and reciprocity for psych care. Please support CA joining PSYPACT.

Sincere regards,  
Ellen

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Ellen J. Lin, Ph.D.

(she/her/hers)

Licensed psychologist (#Psy19278)

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