

1 **BOARD MEETING MINUTES**

2
3 **The Wright Institute**
4 **2728 Durant Avenue, Room 109/110**
5 **Berkeley, CA 94704**
6 **(510) 841-9230**
7

8 **Thursday, August 18, 2016**
9

10 Stephen Phillips, PsyD, JD, Board President, called the open session meeting to order
11 at 9:02 a.m. A quorum was present and due notice had been sent to all interested
12 parties.
13

14 **Members Present:**

15 Stephen Phillips, PsyD, JD, President
16 Nicole J. Jones, Public Member, Vice-President
17 Lucille Acquaye-Baddoo, Public Member
18 Michael Erickson, PhD
19 Jacqueline Horn, PhD
20

21 **Others Present:**

22 Antonette Sorrick, Executive Officer
23 Sandra Monterrubio, Enforcement Program Manager
24 Cherise Burns, Central Services Manager
25 Karen Johnson, Licensing Coordinator
26 Jason Glasspiegel, Central Services Coordinator
27 Jacquelin Everhart, Continuing Education/Renewals Coordinator
28 Norine Marks, DCA Legal Counsel
29

30 **Agenda Item #2: President's Welcome**
31

32 Dr. Phillips welcomed those in attendance, stated the Board's statement and values,
33 and thanked the Wright Institute for allowing the Board to use its building for its meeting.
34 He indicated that the Board is down to five members as a result of completed terms. He
35 indicated that Ms. Arias Bhatia ended her term early and that Ms. Alita Bernal would be
36 joining the Board as a new public member. He said that Ms. Bernal is Managing
37 Principal of Urban Point, LLC, a marketing and business development company, and
38 previously worked as Director of Marketing and Business Development at Marina Del
39 Rey Hospital and as Community Relations Director at St. Vincent Medical Center. He
40 indicated that Ms. Bernal is a board member of Hollywood Presbyterian Medical Center
41 Foundation and Camp Ronald McDonald and said she is very excited to join the Board.
42

43 **Agenda Item #3: Public Comment for Items not on the Agenda**
44

45 Victor Ojakian said that he believes the Licensing Committee will bring forth language
46 for the suicide prevention topic the following day. He said that he could not attend day
47 two of the Board meeting because he will be on a Center for Disease Control project
48 that will deal with suicide prevention. He encouraged the Board to implement the desire
49 of the Licensing Committee to require training in suicide risk assessment and
50 intervention. He reminded the Board that people are not blaming psychologists for the
51 lack of training in this area. He indicated that he has done a lot of work elsewhere in
52 order to create a fabric so everyone has a level of awareness. He said his personal goal
53 is to save lives, and not to single out individuals. He thanked the Board for its time.

54
55 Dr. Phillips thanked him for his comments.

56
57 **Agenda Item #4: Approval of Minutes: May 19-20, 2016**

58
59 It was M(Acquaye-Baddoo)/S(Erickson)/C to approve the May 19-20, 2016 Board
60 meeting minutes as amended without changing the order of the minutes to match the
61 order in which agenda items were heard.

62
63 Vote: 5 aye (Acquaye-Baddoo, Erickson, Jones, Phillips, Horn,), 0 no

64
65 Ms. Jones reported that after the meeting adjourned, the Board presented cards to the
66 departing Board members, Dr. Miguel Gallardo, Dr. Andrew Harlem, and Ms. Linda
67 Starr, who ended their terms in order to show its appreciation for their hard work.

68
69 **Agenda Item #5: Approval of Minutes: July 27, 2016**

70
71 It was M(Erickson)/S(Acquaye-Baddoo)/C to approve the July 27, 2016, Board meeting
72 minutes as amended without changing the order of the minutes to match the order in
73 which agenda items were heard.

74
75 Vote: 5 aye (Acquaye-Baddoo, Erickson, Jones, Phillips, Horn,), 0 no

76
77 **Agenda Item #6: Budget Report**

78
79 Mr. Glasspiegel presented the Budget Report and indicated that the Board's budget for
80 Fiscal Year 2016-17 is \$4,962,000. Dr. Phillips asked if any of the figures represented in
81 the Analysis of Fund Condition document were dependent on the loan repayment. Mr.
82 Glasspiegel confirmed that the figures were dependent upon the loan repayment. Dr.
83 Phillips asked if anything would affect the loan repayment based upon the discussion of
84 budgets in California. Mr. Glasspiegel indicated that the repayment was deferred to
85 Fiscal Year 2018-19. Dr. Erickson asked if staff was aware of anything that warranted a
86 discussion. Mr. Glasspiegel indicated that staff was not aware of anything at this time
87 and that the Board' fund condition is in good shape.

88
89 **Agenda Item #7: Enforcement Report**

90

91 Ms. Monterrubio presented the Enforcement Report. She indicated that Denise Russell,
92 the Board's former Special Investigator, transferred to another department effective
93 August 1, 2016, and reported that the Board has posted the Special Investigator
94 position.

95
96 Ms. Monterrubio reported that the Enforcement unit has implemented a one-year pilot
97 program to allocate cases from the Health Quality Investigation Unit (HQIU) to the
98 Division of Investigation (DOI) due to staff shortages at HQIU.

99
100 She reported that the Board received 83 complaints since July 1, 2016, and 35 of those
101 were submitted online. She said that there are 16 cases pending at the Attorney
102 General's office and staff is currently monitoring 49 probationers.

103
104 Ms. Jones stated that she appreciates staff's willingness to implement the pilot program
105 to speed up the cases and would welcome a status report of the program before the
106 end of the year.

107
108 Ms. Monterrubio indicated that staff has requested quarterly meetings with David
109 Chriss, Chief of DOI, and Kathleen Nicholls, Deputy Chief of HQIU, to see how the
110 cases are going.

111
112 Dr. Erickson thanked Ms. Monterrubio for her report.

113
114 Dr. Phillips thanked staff for its efforts to fix the ongoing problem of turnaround time for
115 case resolution, and stated that he understands that there are many variables outside of
116 staff's control and appreciates that staff is working on the variables that the Board can
117 control.

118
119 **Agenda Item #8: Executive Officer's Report**

120
121 **a) Organizational Update**

122
123 Ms. Sorrick presented the organizational update and welcomed Cherise Burns to the
124 Board. Ms. Jones said she is excited to work with Ms. Burns. Dr. Phillips indicated that
125 Ms. Burns is going to be the Central Services Manager and said that the Board is
126 excited to have her.

127
128 **b) DCA Update**

129
130 Ms. Sorrick presented the Department of Consumer Affairs (DCA) Update and indicated
131 that it was for information purposes only.

132
133 **Agenda Item #9: Strategic Plan Update**

134
135 Ms. Sorrick presented Strategic Plan action items that were updated as of July 2016.
136 Dr. Phillips complimented staff on the number of items that have been completed. Ms.
137 Jones asked staff what action has been taken for the "Implement findings from CPS

138 Review” item, located under Goal 1: Licensing, section 1.1. Ms. Sorrick indicated that
139 the organizational structure has been changed and Budget Change Proposals have
140 been submitted to mirror the findings reported in the CPS report.

141
142 Ms. Jones asked if the “Review and amend statutes and regulations to facilitate a more
143 efficient application process to become a licensed psychologist” item is still on schedule.
144 Ms. Sorrick said that staff has made changes to Business and Professions Code
145 sections 2913 and 2914 in addition to the verification of experience regulations. She
146 said the Licensing Committee is still discussing pathways to licensure and she will keep
147 the item listed as “on schedule.”

148
149 Ms. Jones asked if the hard card pocket licenses will be ready and brought back to the
150 Board in 2017. Ms. Sorrick said that the Board has submitted a contract to a vendor for
151 hard card pocket licenses. She said after the contract is in place, staff will contact
152 DCA’s Change Control Board to see if the BreEZe system will be able to communicate
153 with the vendor to produce the pocket license.

154
155 Ms. Jones requested a more specific timeframe for items 1, 2 and 4 under Goal 3: Laws
156 and Regulations, section 3.1. Ms. Sorrick indicated that the new student assistant will
157 compile the stakeholder list. She said it has placed lower on the priority list due to the
158 other demands, but does want to focus on this for the student assistant. Ms. Jones
159 requested that the status be changed to 2017. Dr. Phillips said that this type of work is
160 the focus of the Outreach and Education Committee, which currently only has one
161 member; however, Dr. Horn has agreed to be a part of the committee and he said has
162 asked Ms. Bernal if she would be interested in being on the Committee.

163
164 Ms. Jones thanked Ms. Monterrubio for sending reminders on all of the enforcement
165 cases.

166
167 Dr. Phillips thanked Ms. Jones for her close attention to this agenda item, it was helpful
168 in clarifying the timing of some very important issues.

169
170 Ms. Acquaye-Baddoo thanked staff for its work.

171
172 **Agenda Item #10: Communications Plan Update**

173
174 Ms. Sorrick indicated that the communications plan was laid out as a byproduct of the
175 strategic plan and changes as events occur throughout the year. Ms. Jones said that
176 there should be a timetable instead of listing items “As Needed” for the email lists. Ms.
177 Sorrick thanked her for the suggestions and said it should be quarter 2 of 2017.

178
179 **Agenda Item #11: Social Media Update**

180
181 Mr. Glasspiegel presented the social media update. Dr. Phillips asked Mr. Glasspiegel
182 how well he thinks the Board is doing with the use of social media. Mr. Glasspiegel said
183 that the Board is doing well.

184

185 Ms. Sorrick reported that an individual had been making complaints on their Twitter
186 account and tagged the Board. She said Board staff encouraged those who have a
187 complaint to file it online, in person, or by mail. Ms. Jones asked if Tweets could be
188 removed. Ms. Sorrick said the Board could not remove a Tweet that someone else has
189 made, which tags or mentions the Board.

190

191 **Agenda Item #12: Website Update**

192

193 Mr. Glasspiegel presented the website update.

194

195 Ms. Jones asked about the Newsletter and whether we send out an email to people to
196 see if they would like to get a hard copy of the Newsletter or whether they get that
197 already in the mail.

198

199 Ms. Sorrick said that the Board emails the Newsletters and sends it by mail to those on
200 the mailing lists. She indicated that 250 hard copies are printed and the rest are sent
201 electronically.

202

203 **Agenda Item #13: Update on Newsletter**

204

205 Ms. Sorrick presented a copy of the Board's Spring Journal and said that the content for
206 the Summer Journal is due by September 20, 2016.

207

208 **Agenda Item #14: Outreach Activities Update**

209

210 Ms. Sorrick indicated that the Board has travel restrictions based upon the Governor's
211 Executive Order. She said that the Board needs a speaking role in order to be approved
212 to attend meetings. She indicated that the Board will be requesting her attendance at
213 the Association of State and Provincial Licensing Boards' (ASPPB) 56th Annual Meeting
214 in October. She stated she had been asked to present on the impact of the *North*
215 *Carolina Dental Examiners* case and the regulatory scheme in California.

216

217 Ms. Jones asked if Ms. Marks could attend as well. Dr. Horn indicated that it is going to
218 be one person from several different jurisdictions to speak about the case. Ms. Jones
219 said she believes Ms. Sorrick represents the Board well, but she knows that Ms. Marks
220 has a lot of knowledge regarding the case. Dr. Erickson asked if the Board needed to
221 emphasize the importance of Ms. Sorrick's attendance at the meeting. Ms. Sorrick said
222 that she would be happy to draft a reason for her attendance and give it to Dr. Phillips
223 for review before it is sent to the DCA Executive for review. Dr. Phillips agreed that it
224 may be helpful and indicated that he would be happy to do that. Ms. Jones said that the
225 whole Board should be a part of the encouragement relayed in the letter.

226

227 It was M(Horn)/S(Acquaye-Baddoo)/C to accept the Outreach Activities Update and to
228 ensure that the presentation to ASPPB includes DCA's policy on the *North Carolina*
229 *Dental Examiners* case.

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231 Vote: 5 aye (Acquaye-Baddoo, Erickson, Phillips, Jones, Horn), 0 no

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**Agenda Item #15: Access to Mental Healthcare in the State of California
Campaign Update**

Ms. Sorrick indicated that the Outreach and Education Committee would continue its discussion on the campaign at its next meeting on October 21, 2016.

Dr. Horn asked if there was a bill going through the legislature about the loan repayment fund.

Ms. Sorrick indicated that SB 1204 (Hernandez), a bill supported by the Board, would have considered psychologist renewal fees to increase the funding for the loan repayment program. She said the author pulled efforts on that bill and refocused on physicians at this time, which became another bill. This year there have been no revitalized efforts relating to the Board's specific repayment program.

Agenda Item #16: Petition Hearing

Administrative Law Judge Michael C Cohn presided. Deputy Attorney Carolyn Evans was present and represented the people of the State of California. Peter Murphy, PhD was present and was represented by Michael Goch, A.P.C.

Agenda Item #17: Petition Hearing

Administrative Law Judge Michael C Cohn presided. Deputy Attorney Carolyn Evans was present and represented the people of the State of California. Christopher Barr, PhD was present.

Agenda Item #18: Closed Session

The Board met in closed session pursuant to Government Code Section 11126(c)(3) to discuss disciplinary matters including the above petitions, petitions for reconsideration, stipulations, and proposed decisions.

Friday, August 19, 2016

Stephen Phillips, JD, PsyD, Board President, called the open session meeting to order at 9:03 a.m. A quorum was present and due notice had been sent to all interested parties.

Members Present:

- Stephen Phillips, PsyD, JD, President
- Nicole J. Jones, Public Member, Vice-President
- Lucille Acquaye-Baddoo, Public Member
- Michael Erickson, PhD
- Jacqueline Horn, PhD

279 **Others Present:**
280 Antonette Sorrick, Executive Officer
281 Sandra Monterrubio, Enforcement Program Manager
282 Cherise Burns, Central Services Manager
283 Karen Johnson, Licensing Coordinator
284 Jason Glasspiegel, Central Services Coordinator
285 Jacquelin Everhart, Continuing Education/Renewals Coordinator
286 Norine Marks, DCA Legal Counsel

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289 **Agenda Item #19 Presentation by Association of State and Provincial Psychology**
290 **Boards**

291

292 Dr. Horn indicated that she could not participate as a Board member during the
293 presentation because she is employed by ASPPB.

294

295 **a) Psychology Interjurisdictional Compact (PSYPACT)**

296

297 Ms. Janet Orwig, the Associate Executive Officer for Member Services for ASPPB and
298 Dr. Alex Siegel, the Director of Professional Affairs for ASPPB, were in attendance to
299 provide a presentation on the Psychology Interjurisdictional Compact (PSYPACT) and
300 the EPPP Step 2.

301

302 Dr. Siegel indicated that the purpose of ASPPB is to help states, territories and
303 provinces regulate the practice of psychology. He said that ASPPB exists to help with
304 mobility, portability of licensure, and the examination process for people to become
305 licensed in North America.

306

307 Ms. Orwig indicated that one of her responsibilities is to visit with the staff of the various
308 licensing boards. She said that the most common request she receives is to help with
309 the regulation of telepsychology. She said that the board at ASPPB created a
310 telepsychology task force to figure out how to help the licensing board members with
311 the regulation of telepsychology. She said ASPPB's task force joined with the American
312 Psychological Association (APA) and Insurance Trust task force to create
313 telepsychology guidelines in order to help psychologists manage their practice if they
314 were going to be using telepsychology. She indicated that these guidelines addressed
315 the needs of an individual psychologist, but did not answer the question that the
316 licensing boards had asked, which was to help them regulate telepsychology. She said
317 they created the E.Passport, but they did not feel that it gave enough teeth to the home
318 jurisdiction and the jurisdiction where the client was located. To address the lack of
319 disciplinary authority with the E.Passport, they created the interstate compact, known as
320 PSYPACT, which would allow state licensing boards to discipline E.Passport providers.
321 ASPPB believes that the E.Passport gives criteria that all psychologists would have to
322 meet and PSYPACT would provide the enforcement capacity required to take
323 disciplinary actions.

324

325 Dr. Siegel said the PSYPACT has two main points. He said if you are licensed in good
326 standing in a PSYPACT state and you have an E.Passport, you can practice from that
327 state electronically to any other PSYPACT state without having a license in that distant
328 or receiving jurisdiction. He said if you are in PSYPACT state and you need to cross the
329 border to another PSYPACT state for an emergency, you can provide service face-to-
330 face in that state for up to 30 days in the calendar year, given that it is also a PSYPACT
331 state. He indicated that the home jurisdiction's laws apply in an interjurisdictional
332 practice. He said PSYPACT solves the issue of knowing when to follow which laws
333 through patient consent and the rule that the home jurisdiction takes precedent. He said
334 that PSYPACT requires the states to work together in adjudicating cases. He indicated
335 that the states retain control and that it is state-specific; however, where there are
336 inconsistencies between PSYPACT and state law, PSYPACT supersedes state law.
337

338 Dr. Siegel indicated that Arizona became the first state to adopt PSYPACT. He said that
339 Rhode Island and Nevada have introduced bills, Utah has a legislative sponsor, Hawaii
340 and New Mexico are interested, Maine is active in the process, North Dakota is
341 interested in doing something in 2017, and Missouri is going to introduce a bill. He said
342 he was informed by the Executive Director of the Texas Psychological Association that
343 PSYPACT is on its legislative agenda for 2017. He indicated that PSYPACT becomes
344 effective once seven states have signed up and once this happens, a commission will
345 be formed. He said the commission is an independent agency made up of one member
346 from each PSYPACT state that will create the regulations to implement PSYPACT. He
347 said that these regulations cannot go beyond the scope of practice. He said that a
348 licensee cannot practice into a jurisdiction beyond its scope of practice.
349

350 Ms. Orwig said she could provide a link to the legislative testimonies from the Arizona
351 Board members.
352

353 Dr. Phillips indicated that he wanted to hear the second presentation before the Board
354 Members made any comments and reminded everyone that since the Board did not
355 have a quorum, no action could be taken on this agenda item.
356

357 b) EPPP Step 2

358
359 Dr. Siegel indicated that the Examination for Professional Practice of Psychology
360 (EPPP) is a knowledge-based examination that everyone in the United States and
361 Canada, with the exception of Quebec, are required to take for licensure. He said that
362 ASPPB wants to ensure that psychologists have the requisite competency of knowledge
363 and skills to be able to provide services so that the public will not be harmed from
364 incompetent practice. He said they have relied on ratings from supervisors to rate the
365 level of values, skills and abilities of applicants for years. He said the problem with this
366 is there are good supervisors and there are bad supervisors, producing too much
367 variability. He said that we need to have a standardized method for assessing the skills,
368 values and abilities of the individuals. He indicated that psychology is the only
369 profession that does not have a skills portion to its examination. He said they are
370 looking at the EPPP Step 2 as the last examination before licensure.
371

372 Dr. Siegel said that the examination is called EPPP Step 2 because statutes require
373 applicants to take the EPPP, but the law does not specify singular or plural. He said he
374 hopes it will be out by January 2019 for boards to consider and adopt.

375
376 Ms. Acquaye-Baddoo asked what law would take precedent if the PSYPACT laws
377 supersede the state laws. Dr. Siegel said that it would only supersede the laws that
378 pertain to the interjurisdictional practice of psychology.

379
380 Dr. Erickson said that the presentation was very informative and said he had a question
381 about the PSYPACT superseding state laws pertaining to psychology. Dr. Siegel
382 explained that the PSYPACT would only supersede interjurisdictional state laws and
383 that licensees could not provide services outside the scope of practice where the
384 services are being rendered. He said that the PSYPACT is a hub and spoke model. He
385 said that if he was a psychologist licensed in California and California was a PSYPACT
386 state, and one of his patients went to Colorado, which was also a PSYPACT state, to
387 ski, he could provide services electronically. He then explained that if a California
388 psychologist went on vacation to Colorado, Colorado would not then become his or her
389 spoke. He said that the psychologist would not be permitted to provide services to
390 someone in Georgia or even in California.

391
392 Dr. Phillips asked if future students would be paying a second fee for the EPPP Step 2.
393 Dr. Siegel said that they would need to pay another fee. He said they do not know what
394 the cost will be, but they are going to try to keep it as low as they can.

395
396 Dr. Phillips indicated that psychologists licensed in New York are not required to take
397 continuing education. He said that a New York licensee could then provide services to a
398 California resident where continuing education is believed to be important for the
399 maintenance of competence. He said this might be a hesitation for some people. Dr.
400 Siegel confirmed that New York is the only state in this country that does not require
401 CE.

402
403 Dr. Phillips explained that California requires applicants to take the California
404 Psychology Laws and Ethics Examination (CPLEE) and does not see how the EPPP
405 Step 2 will eliminate the need for California licensees to take the CPLEE. Dr. Siegel
406 stated that if the Board is looking to have an examination more specific to California
407 laws, the CPLEE might still be needed,

408
409 Dr. Phillips said that if someone practices interjurisdictionally, they would not know the
410 California laws and regulations. Ms. Orwig indicated that anyone signing up for the
411 E.Passport must attest that they know the laws and regulations of any state they will be
412 practicing in, but they would not be required to take a test.

413
414 Dr. Siegel indicated that ASPPB is looking into the differences in the laws between
415 states to identify any potential issues. He said a psychologist who signs up for the
416 E.Passport will be under contract, and if they violate the contract of the E.Passport or
417 PSYPACT, their privileges under the E.Passport and PSYPACT would be revoked. He
418 said they would lose privileges with all of the states. He said that the state could then

419 use the violation to file a complaint against the psychologist for practicing
420 inappropriately. He said if the licensee loses the E.Passport, they would still be able to
421 apply for a license in that state where the violation took place.

422
423 Dr. Phillips asked if the funds received from the E. Passport would be allocated to the
424 states. Dr. Siegel said they would first need to determine the costs. He said once the
425 costs are determined, the funds could be used for facilitating the adjudications.

426
427 Dr. Phillips asked if the funds would be used to reimburse the state's enforcement staff
428 for doing investigations or proceeding with the licensing complaints. Dr. Siegel said that
429 the funds would not be used to reimburse the state's enforcement staff.

430
431 Dr. Phillips asked if the commission would only be made up of one representative from
432 the first seven states that join PSYPACT. Ms. Orwig said that each state in PSYPACT
433 would have a representative on the Commission.

434
435 Ms. Jones said she appreciated the presentation and asked Ms. Marks how far the
436 conversation could go considering the Board does not have a quorum. Ms. Marks said
437 she would prefer the agenda item to remain as a presentation. She said it is better to
438 have a quorum so that the Board could have the kind of discussion to lead the Board to
439 make a decision.

440
441 Dr. Siegel said if the California Legislature and the Governor chose to sign a bill
442 authorizing PSYPACT, the language could not be modified because it is the same
443 across all jurisdictions. He said it is an up or down vote.

444
445 Ms. Jones asked if there have been conversations with the California Legislature
446 regarding this bill. Dr. Siegel said no, he has not had those conversations.

447
448 Dr. Phillips requested that the Board only gather information based upon the
449 presentation so that they do not begin to deliberate on the subject.

450
451 Ms. Acquaye-Baddoo asked if there are specific criteria for the members of the
452 commission.

453
454 Dr. Siegel said that, off the top of his head, the commissioner must be a board member,
455 the Executive Director of the licensing board, or a designee. He said it is not someone
456 outside of the governance of the regulation of the practice of psychology within the
457 applicable jurisdiction. Ms. Acquaye-Baddoo thanked him for the work.

458
459 Dr. Siegel said if PSYPACT is going to happen, it will happen by 2018. He said it has
460 received a lot of endorsement from various organizations.

461
462 Dr. Gilbert Newman, the Dean and Director of Clinical Training of the Wright Institute,
463 said that as a member of the commission on accreditation, he thinks a lot about the
464 necessity of professional judgement in determining competency. He said that it seems
465 like the EPPP Step 2 is an attack on professional judgement. He said it requires the

466 program to submit students to another hurdle where the Wright Institute, through five
467 years of graduate training, has already been measuring each student's competency
468 against very specific minimum levels of achievement. He asked what deficiencies have
469 been identified that suggested the need for this exam. Dr. Siegel said there were no
470 deficiencies and they have not seen an uptick in disciplinary action taken by boards. He
471 said supervision is still essential in the practice of psychology, but there is still variability
472 and inconsistency in the measures that are used currently. He said if you visit the
473 ASPPB website and go to the students section, you could view each program and see
474 the aggregate number of students who have passed the EPPP. He said you could see
475 that some of the programs have a 100 percent pass rate on the EPPP, while some of
476 the APA-accredited schools have a 13 percent pass rate. He said there is too much
477 variability in the process. Dr. Newman said that test taking is a skill itself. He said the
478 test may be testing a skill that has not been taught in graduate programs. He asked why
479 the exam could not just be administered to those who did not go to an APA-accredited
480 program. Dr. Siegel said there is a lot of variability within the APA accreditation process,
481 which is formally known as the Commission on Accreditation. He said that it is a
482 wonderful and robust organization that has done a lot to advance the skills, knowledge
483 and consistency of training, however, each licensing board looks at the individual and
484 not the program.

485
486 Dr. Jo Linder-Crow asked if each jurisdiction will have the choice to implement or not
487 implement the EPPP Step 2. Dr. Siegel said yes it is a state action and ASPPB
488 considers it as an entry examination and not for someone who has been practicing for
489 10-15 years.

490
491 Dr. Melodie Schaefer from the California Psychological Association (CPA) asked if any
492 data been collected to support the belief that the EPPP Step 2 will help protect the
493 public.

494
495 Dr. Siegel said examinations for licensure are based upon content validity as opposed
496 to predictive validity. He stated that the selection score is what is considered. He said
497 most of the people are going to be around the 500 pass point, which is the
498 recommended number. He said the fact that someone scores 800 versus 500 does not
499 mean that they are more knowledgeable than the person scoring 500 because it is a
500 selection criterion exam. He said it is difficult to do examinations for predictive validity.
501 He said in order to do a study, the board would need to give a license to someone who
502 is competent and has passed the EPPP in addition to someone who is incompetent and
503 has failed the EPPP and reexamine them in five years to see where they are in the
504 process. He stated that this is unethical. He said the EPPP has a practice analysis
505 every eight to ten years where they interview practicing psychologists, students in
506 training, and people in training counsels in order to know what the field considers the
507 essential aspects of the practice of psychology. He said at the conclusion of the
508 analysis, the eight domains of the exam are tweaked a little bit based upon where the
509 profession is. He said they are currently conducting a practice analysis to see how that
510 will evolve into the skills needed for the entry-level practice for the field. He said they
511 hope to have the analysis completed within the year and said that they will begin writing
512 questions next year for the examination process.

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Ms. Orwig indicated that there is a link to the job task analysis survey on www.asppb.net.

Dr. Phillips thanked Ms. Orwig and Dr. Siegel for their presentation and said that agenda item #21 would be the next item for discussion.

Ms. Jones said she appreciated the presentation and that it was challenging that the Board could not have a strong conversation about the information they received due to not having a quorum.

Dr. Phillips said that the Board wanted to be sensitive to Dr. Siegel and Ms. Orwig who traveled a long way to give their presentation.

Agenda Item #21: Discussion of Implementation of AB X2-15 – The End of Life Option Act – Effective 6/9/16

Ms. Sorrick indicated that the Board received a public comment at its May Board meeting regarding the End of Life Options Act. She said this bill would implement changes to the end of life options for individuals who met certain criteria. She said staff invited the California Medical Board to speak about this bill and introduced Kim Kirchmeyer, Executive Director of the Medical Board of California (MBC), and Jennifer Simoes, Chief of Legislation of the MBC.

Ms. Kirchmeyer thanked Ms. Sorrick and the Board for having them. She said they would provide questions that the Medical Board had received and a copy of their PowerPoint presentation.

Ms. Simoes said that the bill would allow an adult resident of California who has been diagnosed with a terminal disease and who has the mental capacity to make a medical decision, to make a request to receive a prescription for an aid-in-dying drug from their physician for the purposes of ending his or her life.

Ms. Kirchmeyer said she had never seen a bill so prescriptive, which makes it easier for boards to implement. She said the request needed to be made both orally and in writing in addition to completing a form. She said that the attending physician needs to determine that the patient has the mental capacity to make the decision. She said the Medical Board is not making any changes to the forms required in the bill, but if they find necessary changes, they will make them through legislation.

Dr. Horn asked what would happen if the patient is unable to speak or write in order to request the end of life option. Ms. Kirchmeyer said they have not run in to that, but for the most part, the patient would have to be the one to take the drug. She said no one could give it to them. She said that, in her opinion, the patient would need to be able to fill out the forms.

559 Dr. Erickson said he read an article in the Sacramento Bee that said the drug could cost
560 \$3,000 and may not be covered by all plans. He asked what would happen to those
561 people who could not afford it. Ms. Kirchmeyer said this issue has not come up, but it
562 would not be within the Medical Board's jurisdiction.
563

564 Dr. Horn said she appreciated the Legislature's thoroughness and was hopeful that the
565 various questions could be answered over time. Ms. Kirchmeyer said she could post
566 frequently asked questions on the Medical Board's website once it gets more
567 information.
568

569 Dr. Linder-Crow thanked Ms. Kirchmeyer and Ms. Simoes for their presentation. She
570 said CPA has worked hard on the front end of this bill to ensure that psychologists were
571 included. She said psychologists were not included in the original language. She said
572 CPA would help its members think this bill through. She asked if the person providing
573 the assessment needed to meet specific requirements. Dr. Phillips said California has
574 competency standards and the individual would need to have competency in order to
575 partake in the End of Life Option Act. Dr. Horn thanked CPA for its work and said that
576 UC Davis is currently looking at this bill to establish requirements.
577

578 Dr. Phillips thanked Ms. Kirchmeyer and Ms. Simoes for their presentation. He said it
579 appears that this is being handled in a very thoughtful way and appreciates the light
580 they are able to shed on this issue.
581

582 **Agenda Item #22: Health Professions Education Foundation Presentation on**
583 **Licensed Mental Health Services Provider Education Program (LMHSPEP) and**
584 **Mental Health Loan Assumption Program (MHLAP)**
585

586 Dr. Phillips introduced Tino Raya and LaNia Bussey, both program officers from the
587 Health Professions Education Foundation (HPEF).
588

589 Mr. Raya thanked the Board for having them and said that they were going to give an
590 overview of the two mental health programs that HPEF has to offer. He said they have
591 13 scholarship and loan repayment programs administered across the State of
592 California and they have awarded over 12,000 individuals. He indicated that the Mental
593 Health Loan Assumption Program (MHLAP) is funded through the Mental Health
594 Services Act (MHSA) and that applicants can receive up to \$10,000 in exchange for a
595 12-month service obligation working for a Public Mental Health System. He said it was
596 established to assist County Public Health Systems in hiring and retaining mental health
597 professionals and each county has its own requirements.
598

599 Ms. Bussey provided an overview on the Licensed Mental Health Services Provider
600 Education Program (LMHSPEP). She said it was designed to award mental health
601 professionals who provide direct patient care in a mental health professional shortage
602 area or a qualified facility in California. She said the program is funded through renewal
603 fees from the Board of Behavioral Sciences and the Board of Psychology in addition to
604 a one-time grant from the California Endowment. She said there is a Selection
605 Committee that reviews and scores the applications. She said \$64,503 was awarded to

606 psychologists for Fiscal Year 2015-16 and a total of 76 psychologists were awarded
607 funds. She indicated that the application cycle is open and they are accepting
608 applications for the Selection Committee.

609
610 Dr. Horn asked how the funds are distributed per psychologist. Ms. Bussey explained
611 that the funds from the Board of Psychology are only used to award psychologists;
612 however, the awardees could also be split-funded because the California Endowment
613 grant is awarded based upon the setting.

614
615 Dr. Phillips asked what the average award amount was. Mr. Raya indicated that the
616 average award granted was \$12,000.

617
618 Ms. Acquaye-Baddoo thanked them for attending and said she was looking forward to
619 the upcoming application for the Selection Committee.

620
621 Dr. Horn asked if someone can apply for multiple years. Ms. Bussey said an applicant
622 can be awarded for up to two years and can apply as many times as possible as long as
623 they have not been awarded more than two times.

624
625 Ms. Sorrick indicated that the Board has an insert in its license renewal application
626 packets that tells licensees how to apply for funding and how to contribute additional
627 funds. She said she is hopeful that licensees will take advantage of both sides of the
628 insert.

629
630 Dr. Linder-Crow asked why there was a huge discrepancy in the amount of funds
631 awarded to psychologists versus licensed professionals with the Board of Behavioral
632 Sciences (BBS). Mr. Raya explained that the funds are based upon renewal fees for
633 those professions. He said there was not as high a number of psychologists renewing
634 as BBS licensees, which resulted in less funding.

635
636 Dr. Phillips thanked Mr. Raya and Ms. Bussey for their presentation.

637
638 **Agenda Item #20: Policy and Advocacy Committee Report and Consideration of**
639 **Committee Recommendations on Board Positions**

640
641 Legislation Update

642
643 Ms. Jones said she appreciated the matrix staff created for the legislative bills.

644
645 a) AB 796 (Nazarian) Health Care Coverage: Autism and Pervasive Developmental
646 Disorders

647
648 Ms. Jones said the Board submitted an opposition letter on July 28, 2016, and
649 requested that staff strike sentence one in the background section of the memo to
650 reflect the amendments to the bill since the Board's last meeting.

651

652 Mr. Glasspiegel indicated that this bill would require the State Department of
653 Developmental Services, no later than July 1, 2018, with input from stakeholders, to
654 update regulations to set forth the minimum standards of education, training, and
655 professional experience for qualified autism service professionals and
656 paraprofessionals. He also stated that this bill would repeal the sunset provision in the
657 requirement for health care service plans to provide health coverage for behavioral
658 health treatment for pervasive development disorder or autism. Ms. Sorrick said the bill
659 previously included requirements for educational and training standards developed in
660 regulations and these have since been removed from the bill.

661
662 Dr. Horn asked if the Board needed to change its reasons for opposition to the bill. Ms.
663 Jones said the opposition letter states that the bill falls short of the Board's
664 recommendations, which is still true. Dr. Phillips indicated that the Board is still
665 concerned with the fact that the individuals providing the services are being reimbursed
666 without being licensed or regulated.

667
668 Ms. Jones acknowledged staff's hard work and the amount of detail in the opposition
669 letter.

670
671 Dr. Phillips thanked Ms. Sorrick and Mr. Glasspiegel for the quick turnaround with the
672 opposition letter after the Teleconference Board meeting.

673
674 Ms. Jones indicated that no action is needed at this time.

675
676 b) AB 1715 (Holden) Healing Arts: ABA

677
678 Ms. Jones said this item is for informational purposes only since the author has pulled
679 the bill.

680
681 Dr. Phillips asked if there will be any further action in the future on the bill. Mr.
682 Glasspiegel indicated that it is possible for this issue to return in the future.

683
684 c) AB 1835 (Holden) Private Postsecondary Education: Exemptions

685
686 Ms. Jones said that AB 1835 was enrolled.

687
688 Mr. Glasspiegel explained that it will now go to the Governor for a decision.

689
690 Ms. Jones said no action is needed.

691
692 d) AB 2017 (McCarty) College Mental Health Services Program

693
694 Mr. Glasspiegel said this item is for information purposes only. He indicated that the
695 amount of money identified for appropriation was taken out of the bill. Dr. Erickson
696 asked why the amount was amended out. Mr. Glasspiegel said he was not sure why the
697 amount was removed. Ms. Jones indicated that the amendment does not change the

698 Board's "Support" position because it took this position before there was an amount in
699 the bill.

700
701 e) AB 2086 (Cooley) Workers Compensation: Neuropsychologists

702
703 Ms. Jones indicated that the Board had a robust discussion on AB 2086 at its July
704 Board meeting and said that the bill has been in its third reading since August 15, 2016.

705
706 Mr. Glasspiegel said that no changes have been made to the bill that would affect
707 neuropsychologists. He reported that the Board's proposed changes have not been
708 made and said that the Board may want to consider changing its "Support if Amended"
709 position.

710
711 Dr. Erickson said it is important to get neuropsychology back in the worker's
712 compensation process. He said the overall purpose is to help this bill move forward
713 even though the Board's proposed amendments were not included. He said he would
714 like the Board to take a "Support" position. Dr. Phillips agreed and wanted to ensure that
715 this specialty is represented in the system.

716
717 Ms. Sorrick reported that staff sent a floor alert to the Senate on Wednesday, August
718 17, 2016, and they have until the end of August to hear the bill on the floor. She
719 indicated that the bill would then go back to the originating house for concurrence. She
720 said the Board may want to change its position to "Support", but still provide its
721 proposed amendments. Dr. Horn said she liked Ms. Sorrick's suggestion and agreed
722 with Dr. Phillips and Dr. Erickson that the most important part is getting
723 neuropsychologists back on the panel. Dr. Phillips said he liked Ms. Sorrick's
724 suggestion as well and asked what a floor alert was. Mr. Glasspiegel said he put the
725 position letters for every bill the Board had a position on in a memo format, abbreviated
726 them if necessary, and took them to the Capitol to drop them in every Senate and
727 Assembly member's inbox that he could.

728
729 Dr. Linder-Crow said she appreciated the Board's discussion on the bill. She said CPA
730 is a co-sponsor of this bill and that this is the second year for the bill to come forward.
731 She said CPA's lobbyist, Amanda Levy, had been in extended conversations with the
732 Division of Workers' Compensation about the little progress this bill has made. She said
733 the Division had attached projected costs to the bill that CPA did not agree with. She
734 said it was not in CPA's purview to take the Board's proposed amendments and the
735 Division has not indicated whether or not it would accept the Board's amendments. She
736 said it would be helpful if the Board took a "Support" position. She said she does not
737 anticipate any problems with this bill in the legislature.

738
739 Dr. Erickson asked if an explanation of all of the discussions and hard work that has
740 gone into this bill go to the Governor. Dr. Linder-Crow said she was not sure.

741
742 Ms. Sorrick asked the Board if it would like staff to create a timeline of what the Board
743 has done in response to the Governor's veto message.

744

745 Dr. Phillips said there would need to be two motions: one for taking a "Support" position
746 and one to draft a letter to convey the discussions the Board has had.

747
748 Dr. Erickson asked if the Division is in support of the bill. Mr. Glasspiegel said that he
749 had not heard of a position.

750
751 Ms. Sorrick asked staff to draft a letter regarding the Board's support and to provide the
752 letter to Dr. Erickson for review so that it may go to the Governor. Ms. Jones requested
753 that the letter be sent to the Policy and Advocacy Committee for review.

754
755 It was M(Horn)/S(Erickson)/C to take a "Support" position and include the Board's
756 proposed changes in the position letter with the inclusion of the Board's efforts and
757 emphasis on the delay in care that this has caused.

758
759 Vote: 5 yes (Acquaye-Baddoo, Erickson, Phillips, Jones, Horn), 0 no

760
761 f) AB 2443 (Baker) Improving Mental Health Access for Students

762
763 Mr. Glasspiegel reported that AB 2443 was held in the Assembly Appropriations
764 Committee.

765
766 Ms. Jones said this item was for informational purposes only and staff will continue to
767 watch this bill.

768
769 g) AB 2507 (Gordon) Telehealth: Access

770
771 Ms. Jones reported that AB 2507 was held in the Assembly Appropriations Committee.
772 Dr. Erickson asked why it was held. Mr. Glasspiegel said he did not know, but he said
773 he assumed there was fiscal impact to implement it.

774
775 Dr. Melodie Schaefer indicated that there are health care service plans reimbursing for
776 telehealth services. She said that Blue Shield is one of them, but she could not
777 remember the other two. She said she would let the Board know what the other carriers
778 were when she found out.

779
780 Ms. Jones indicated that staff would continue to watch this bill and wait to hear what the
781 Telepsychology Committee recommends.

782
783 h) AB 2859 (Low) Professions and Vocations; Retired Category

784
785 Ms. Jones indicated that AB 2859 had its third reading as of August 15 and staff will
786 continue to watch it.

787
788 i) SB 1033 (Hill) Medical Board: Disclosure of Probationary Status

789
790 Ms. Jones indicated that SB 1033 was placed in the inactive file so no action was
791 needed. She said staff will continue to watch it.

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j) SB 1034 (Mitchell) Health Care Coverage: Autism

Ms. Jones indicated that the Board sent an "Oppose" letter after its July Board meeting to express the Board's concern with the lack of consumer protection due to no licensure requirements. She said that no action is needed.

k) SB 1101 (Wieckowski) Alcohol and Drug Counselors: Regulation

Ms. Jones indicated that SB 1101 is in the Senate Appropriations Committee. She said no action is needed and staff would continue to watch it.

l) SB 1155 (Morrell) Professions and Vocations: Licenses: Military

Ms. Jones indicated that SB 1155 was held in the Assembly Appropriations Committee as of August 11, 2016. She said no action was needed.

m) SB 1193 (Hill) Psychology: Board of Psychology: Personnel

Mr. Glasspiegel indicated that SB 1193 became the Board's Sunset Extension bill as of August 19, 2016. He said the Board was in the same bill as the Board of Pharmacy and the Veterinary Medical Board. He said it is in its third reading on the Assembly floor as of August 18, 2016.

Ms. Sorrick reported that the Board considered some language at its July Teleconference Board meeting that would allow for recognition of someone who was certified through the American College of Osteopathic Board of Neurology and Psychiatry as someone who could supervise a psychological assistant. She said there was also some language about an organization that provided coursework for continued professional development. She said the final change was to include a provision that anyone enrolled in doctoral program in psychology, educational psychology, or education with a field of specialization in counseling psychology or educational psychology at a nationally accredited or approved institution on or before December 31, 2016 would still meet the requirements for licensure after January 1, 2020.

Ms. Jones asked if the Board needed to take another position since the bill number had changed. Ms. Marks said it was not necessary for the Board to take another position since the bill contains the same substance as the other bill.

n) SB 1194 (Hill) Professions and Vocations: Board: Competitive Impact

Mr. Glasspiegel indicated that the language in SB 1194 is still in SB 1195, but would be amended into SB 1194.

Ms. Jones said that staff will continue to watch this bill.

o) SB 1204 (Hernandez) Health Professions Development: Loan Repayment

839
840 Ms. Jones indicated that SB 1204 would not be moving forward and that the hearing
841 was cancelled by the author. She said this item was for informational purposes only and
842 staff would continue to watch this bill.

843
844 Ms. Sorrick said that between Assembly Member Gordon's bill and this bill, the Board
845 may want to consider sending a letter at the end of the legislative session to encourage
846 or promote further clarification of the law. She said that this could be placed on the
847 November agenda.

848
849 The Board members agreed to bring this back to at the November Board meeting.

850
851 p) SB 1217 (Stone) Healing Arts: Reporting Requirements: Liability

852
853 Ms. Jones indicated that the author is no longer pursuing SB 1217.

854
855 g) SB 1334 (Stone) Crime Reporting: Health Practitioners: Trafficking

856
857 Ms. Jones indicated that SB 1334 was in the Senate Appropriations Committee. She
858 said no action is required and staff would continue to watch this bill.

859
860 Mr. Glasspiegel reported that this bill was held in the Senate Appropriations Committee
861 and had little chance of moving.

862
863 r) Legislative Items for Future Meeting

864
865 Ms. Jones stated that it was already suggested to include as future agenda items the
866 loan repayment and loan funding issue.

867
868 s) Update Regarding the California Child Abuse and Neglect Reporting Act (CANRA)
869 and Mandated Reporting – Penal Code Sections 261.5, 288, and 11165.1

870
871 Mr. Glasspiegel indicated that the Board's request for an opinion from the Attorney
872 General's (AG) office was canceled in June 2016 and that Ms. Sorrick is attempting to
873 receive clarification on why the request was canceled.

874
875 Ms. Jones requested that this item be kept on the agenda and thanked staff for its
876 efforts.

877
878 Ms. Sorrick said the disciplinary guidelines were approved and would be added
879 November agenda.

880
881 Ms. Jones asked if today was the last day for legislation. Ms. Burns indicated that today
882 was the last day the committees could meet and for bills to be amended on the floor.

883
884 Ms. Jones requested that staff send the floor alerts to the Board members so they could
885 stay in the loop of the policy and advocacy actions. She thanked staff for all of the work.

886 Dr. Phillips thanked the Policy and Advocacy Committee for providing updates to the
887 Board.

888
889 **Agenda Item #22: Telepsychology Committee Report and Consideration of**
890 **Committee Recommendations**

891
892 **a) Proposed Additions to California Code of Regulations, Title 16, to Address Standards**
893 **of Practice for Telehealth**

894
895 Dr. Erickson indicated that the State Legislature asked the Board in 2011 if legislative or
896 regulative changes needed to be addressed regarding telehealth and online practice.
897 He said that in its report back to the Legislature, the Board said it was researching and
898 analyzing the use of telehealth for the practice. He said in 2016, the Board committed to
899 the following in its report to the State Legislature: developing telepsychology regulations
900 that would instruct licensees on how to provide telehealth to Californians, giving
901 psychologists additional opportunities to provide care to underserved populations. He
902 said the Telepsychology Committee has had four meetings and has drafted language
903 for guidance.

904
905 Dr. Phillips said that a number of hours have gone into creating this language. He said it
906 is clarifying, but not too specific.

907
908 Dr. Horn thanked the Committee for its hard work. She asked if these guidelines would
909 pertain to people who are licensed psychologists, but are not practicing telehealth, such
910 as those who are organizational consultants. Ms. Marks said the Board has jurisdiction
911 over the practice of psychology, people licensed with the Board, and those who are
912 engaging in activities in which licensure is required. She said she is not sure that the
913 Board has any jurisdiction if licensure is not required.

914
915 Dr. Phillips asked if the statute that prompted the Board to promulgate these regulations
916 was specific to telehealth or telepsychology. Ms. Marks said she would look up the
917 statute and get back to Dr. Phillips.

918
919 Ms. Jones asked if the Committee discussed how to determine if someone is competent
920 in the delivery of telehealth. Dr. Erickson said the Committee did not address this but
921 would treat this as the same for other competency issues. Dr. Phillips said there are
922 many factors that are considered when deciding if someone is competent enough to
923 provide services in specific areas. Ms. Jones asked if there would be enough experts to
924 review complaints based on the use of telepsychology. Dr. Horn said the Board could
925 require an attestation under penalty of perjury that the person is competent to provide
926 telehealth services. She said that no one should be practicing in an area in which they
927 are not competent. Ms. Jones said she was more concerned with whether or not there
928 was a process in place to ensure that people have the skills to use telehealth properly.
929 Dr. Horn asked if these guidelines would be regulations. Dr. Phillips said yes, they
930 would be proposed regulations. Ms. Jones suggested that the Board look at disciplinary
931 actions related to the use of telehealth. She said unprofessional conduct might need to
932 be specified in the guidelines.

933 Dr. Horn said she would like to revisit her question of what practice areas would these
934 regulations apply other than the delivery of mental health services. Ms. Marks said as
935 she understands it, these guidelines would apply to those licensed with the Board
936 practicing under their license regardless if it is considered direct mental health. She said
937 Business and Professions Code section 2904.5 states that a psychologist licensed
938 under this chapter is a licentiate for purposes of section 805 and thus is a health care
939 provider subject to the provisions of 2290.5, which is the telehealth section. She said
940 she does not think that it differentiates what the licensed psychologist is doing. She said
941 a psychologist practicing as a psychologist would be subject to these regulations.
942

943 Dr. Erickson asked if the term "telepsychology" would be better than using the term
944 "telehealth." Dr. Horn said she is not sure the Board can call it telepsychology if the
945 statute references telehealth. Ms. Marks stated that her concern was with whether or
946 not the regulations being promulgated pursuant to section 2290.5, which refers to
947 telehealth, are functionally related to those people providing health services. She said
948 the statute does talk about telehealth, and the Psychology Licensing Law states that a
949 psychologist licensed pursuant to this chapter is a health care provider. She said she
950 believes this would mean that the psychologist is subject to the regulations that are
951 being promulgated pursuant to 2290.5. Dr. Phillips said he believes that section 2290.5
952 applies to the healthcare aspect of psychology as opposed to the broader functions that
953 psychologists take on. Dr. Horn said she agreed with Dr. Phillips understanding of
954 section 2290.5.
955

956 Dr. Phillips said the Committee's proposed regulations would be insufficient if the Board
957 said that telehealth included all telepsychological services because they focus more on
958 the healthcare aspect. He said they did not discuss other variables a licensee would
959 need to consider if they were doing consultative services. He said he does not believe
960 this is necessary because he does think this was the intention of the statute. He said he
961 does not believe all psychologists are providing health care services.
962

963 Ms. Marks asked if the Board members if they thought these regulations were too
964 restrictive to apply to a psychologist who is providing something other than health
965 services. She asked if there is a reason why these regulations should not apply to those
966 individuals. She asked if the Board wanted to consider pursuing clarification legislation,
967 if necessary, or taking another look at the regulations. Dr. Phillips said he thinks the
968 proposed regulations would provide accurate guidelines to someone practicing outside
969 of traditional healthcare telepsychology.
970

971 Dr. Erickson said these regulations were created with HIPAA in mind. He said he does
972 not think organizational psychologists think of HIPAA when they do team building by
973 telephone from one site to another. Dr. Phillips said if HIPAA was not applicable to a
974 specific situation because it did not involve protective health information, the individual
975 did not need to consider that particular regulation.
976

977 Dr. Horn said she does not think the regulations would constrain someone who was not
978 providing traditional healthcare services.
979

980 Dr. Phillips said the Board could encourage people from other areas of psychology to
981 review the regulations to see if they think they would be impeded by any of the
982 language if the language goes out for a rulemaking package.
983

984 Ms. Jones asked if these regulations would only apply to California residents
985 temporarily out of state and what types of comments the public has provided at the
986 Committee meetings.
987

988 Dr. Phillips said the Committee has always been comprised of two Board members. He
989 said they wanted to move relatively fluidly in order to finish the language. He said they
990 have not had the opportunity to receive input from some of the Board's stakeholders. He
991 said that in response to Ms. Jones first question, the language also encompasses those
992 clients who reside in California.
993

994 Ms. Jones stated that she does not believe there should be two-person committees
995 because the Board is missing the opportunity to receive public comment.
996

997 Ms. Marks explained that even if the work is done in a two-person committee that is not
998 noticed, there is still time for a public discussion at the time of the Board meeting.
999

1000 Ms. Jones said that moving fast through the work should never be the Board's only
1001 goal, especially in light of the Board's value of transparency.
1002

1003 Ms. Sorricks said that, from a staff's perspective, the purpose of the two-person
1004 committee was to allow staff to first draft language with legal counsel and consult with
1005 the sub-committee to address clarifying questions before it went before the Board. Ms.
1006 Jones said it is important to have public communication at all times. Dr. Phillips
1007 suggested that the Board discuss the two-person committee at the November Board
1008 meeting and said he was interested in hearing public comment to see if something was
1009 overlooked.
1010

1011 Ms. Marks asked Dr. Horn if she thought it was more appropriate for the practice of
1012 psychology and what is contained in the telehealth statute to indicate in the proposed
1013 language that the standards apply to those licensees engaging in psychotherapy, which
1014 is separately defined in the practice of psychology. Dr. Horn said the language would fit
1015 the delivery of psychotherapy services. She said her quick answer would be yes. Ms.
1016 Marks asked the Board to consider if the regulations need to apply to other
1017 psychological services outside of psychotherapy.
1018

1019 Ms. Jones said the Committee needed to have another fully noticed meeting to receive
1020 public comment in order for the Board to move forward with a rulemaking package. Dr.
1021 Erickson said he agrees that this is an important issue and valued her input.
1022

1023 Dr. Phillips said the Committee had access to other draft guidelines and documents that
1024 suggested how telepsychology should be addressed. He said he did not want people to
1025 think that the Committee did not consider the issues raised by other stakeholder groups
1026 in the context of creating these draft regulations. He said the regulations were not

1027 drafted with the intention of excluding public participation. He said the public might not
1028 feel like they had enough time to review the proposed language in order to provide
1029 public comment. Ms. Marks said the two-person committee allows Board members to
1030 be more facile when scheduling the meetings. Ms. Jones said she was more concerned
1031 with the reason that was conveyed for having the two-person committee, which was to
1032 move the process along more quickly. Dr. Phillips said the Committee wanted to be
1033 more facile in the way the Committee reacted to this issue to be able to schedule
1034 meetings more quickly. He said he does not think two-person committees prevent
1035 people from providing public comment and would like to restrict the public comment to
1036 the proposed regulations and to whether they felt like they had enough opportunity to
1037 comment on the language. He said the Board will have a discussion at another meeting
1038 about the propriety of a two-person and three-person committee.
1039

1040 Dr. Schaefer said that she was going to use the term "telepsychology" instead of
1041 telehealth because medicine is calling it "telemedicine." She said psychologists need to
1042 own their profession. She said telepsychology has been going on for decades. She said
1043 the issue is around the appropriate use of technology for the protection of the
1044 information of the patient they are serving. She asked how a psychologist would import
1045 a text message into a client's file to show documentation of the conversation. She asked
1046 if emails need to be encrypted and said these are the issues that need to be spoken
1047 about. She said the Board needs language that addresses in-state and out-of-state and
1048 said they should be separate. She said it is confusing for the constituencies if you do
1049 not separate them. She said the term "temporarily" that is used in the proposed
1050 language could be defined in many ways. She said guidance needs to be available
1051 soon. She said telemedicine has been going on for years and psychologists are the last
1052 to get on the bandwagon. She said it is important to provide the language to different
1053 groups in order to get feedback.
1054

1055 Dr. Phillips said that the Board is using the term "telehealth" because it is used in the
1056 statute implemented by the Legislature.
1057

1058 Dr. Schaefer asked if the Board could push back on the use of the term "telehealth."
1059

1060 Dr. Phillips said the Board would need to seek a legislative change and would need
1061 regulations.
1062

1063 Dr. Schaefer asked if the Board does not do it now, then who will do it and when.
1064

1065 Dr. Phillips said he wanted to address another one of her questions regarding
1066 telemedicine. He said that they do not have regulations in the State of California. Dr.
1067 Phillips said the Board can regulate what a California psychologist can do in California
1068 and what they do with a California resident who is out-of-state. He said the Board
1069 cannot regulate what a California psychologist does with a resident in New York
1070 because they are, or may be, subject to that state's licensing laws.
1071

1072 Dr. Schaefer suggested that the Board add additional language to clarify that it does not
1073 have jurisdiction in Dr. Phillips' scenario and that the psychologist would need to contact

1074 the state in which they are providing services to get more information on its laws. She
1075 said people might think the language could be projected onto out-of-state patients if this
1076 clarification is not included.

1077
1078 Dr. Erickson thanked Dr. Schaefer for her comments.

1079
1080 Ms. Jones said it is important for the Board to consider the questions asked by Dr.
1081 Schaefer.

1082
1083 Dr. Schaefer said that the American Psychological Association and the California
1084 Psychological Association (CPA) have talked about the fact that they do not know how
1085 to market what psychologists are so that the consumer knows the difference between
1086 their profession and others. She said the Board has an opportunity to help with this
1087 clarification.

1088
1089 Dr. Linder-Crow said she understands that the Board cannot be as flexible as CPA can
1090 be because the Board is bound by certain laws and regulations. She said she did not
1091 feel the public received enough notice to review the language prior to the Board
1092 meeting. She said CPA was not aware of the Committee meeting and did not have a
1093 chance to provide public comment. She said this is such a critical issue and CPA has
1094 been pushing for these guidelines. She said she understands the dilemma of wanting to
1095 move quickly to get things done. She said the comments that CPA would provide at the
1096 Board meeting could have been provided at the Committee level, which might have
1097 made it possible for the Board to move forward with the language.

1098
1099 Dr. Phillips said the materials were included at the May Board meeting.

1100
1101 Dr. Linder-Crow said CPA provided comments at the July Teleconference Board
1102 meeting. She said she did not see that their comments were reflected in the proposed
1103 language. She said CPA has been present for the opportunities to provide public
1104 comment.

1105
1106 Dr. Phillips said the Committee facilitated the process the way that it did because they
1107 felt that the Board has been laboring over this issue for such an extended period of time
1108 without giving adequate guidance to its licensees. He said the Committee was trying to
1109 be responsive and perhaps it was overzealous in its attempt to be responsive.

1110
1111 Dr. Linder-Crow said she was not questioning if the Board's committee process was
1112 appropriate, but she did want to respond to the question of how the process looked to
1113 the public.

1114
1115 Dr. Phillips said as a result of this discussion he did feel that they could have done a
1116 better job reaching out to stakeholders earlier in the process to get whatever feedback
1117 they could.

1118
1119 Dr. Elizabeth Winkelman, Director of Professional Affairs of CPA, thanked the Board
1120 and the Committee for the work it has done on this issue. She suggested that the Board

1121 provide the documentation to the public in advance so that the public may provide
1122 useful comments. She said her main concern lies with the interjurisdictional aspect that
1123 is referenced in section (a) of the proposed language. She said she believes the
1124 Board's intent is to talk about what is going to happen with the client who is physically
1125 located in California or a client who is a resident of California, but is located somewhere
1126 else at the time services are rendered. She said there are two aspects that are
1127 problematic. She said all of the other documentation she has read about
1128 interjurisdictional practice talks about the physical location of the patient and not their
1129 residency. She said it is very confusing to identify the location where the person is a
1130 resident versus where they are physically located. She said the guidance she has read
1131 talks about when a psychologist can provide services to a patient who is physically
1132 located in another place. She said her other concern is with the interjurisdictional
1133 aspect. She said most of the questions that CPA receives are about interjurisdictional
1134 practice. She said the regulations should address both in-state and out-of-state
1135 telepsychology practice. She suggested that the Board clarify that both a licensee and
1136 someone who is under supervision of a licensee can provide telepsychological services,
1137 if that is what the Board intends. She said it is important to clarify if the language is
1138 intended for health services or for all services. She said the reference of "any other
1139 issues" in sections b(2) and b(3) is problematic. She suggested using the phrase
1140 "including, but not limited to." She said the phrase "any benefits, risks, or constraints
1141 posed by the patient or client's physical location" in section (b)(3)(d) is also problematic.
1142 She said she recently discovered the Board of Behavioral Science's (BBS) Standards of
1143 Practice for Telehealth that went into effect on July 1, 2016 and suggested that the
1144 Board review the language because it is clear. She said it addresses the
1145 interjurisdictional and in-state settings and specifically states what it wants the
1146 practitioner to do, such as ascertain the address of the present location at the beginning
1147 of each telehealth session.

1148
1149 Dr. Phillips said there was one comment Dr. Winkelman made that he believes is
1150 problematic to the statute that allowed the Board to draft these regulations. He said it
1151 does have to be a licensee to practice telehealth. He said the statute might need to be
1152 amended in order to include interns and post-doctoral students. He said her comments
1153 were very helpful. He said the Committee did review BBS's regulations and said it might
1154 be worth reviewing again to ensure that the Board is being thorough. He said the
1155 question of whether the Board is just focusing on telehealth or also considering other
1156 areas of practice is important to consider. He suggested that the Committee not put a
1157 rulemaking package forward at this point and have another meeting and provide active
1158 outreach to the stakeholders.

1159
1160 Dr. Erickson said the Committee should have a noticed meeting and craft a revised set
1161 of regulations. Dr. Phillips suggested that the Committee focus on what the law allows
1162 the Board to do.

1163
1164 Dr. Winkelman said that the BBS regulations state the following: "A licensee or
1165 registrant in this state may provide telehealth services to a client located in another
1166 jurisdiction only if the California licensee or registrant meets the requirements to lawfully
1167 provide services in that jurisdiction and delivery of services via telehealth is allowed by

1168 that jurisdiction.” She said this statement is clear and is consistent with other guidelines
1169 that she has read. She said until the PSYPACT is implemented, a psychologist is
1170 probably going to need a license or the permission to practice temporarily in another
1171 state.

1172
1173 Dr. Phillips said being explicit would be helpful to the licensee.

1174
1175 Ms. Jones said she supports the recommendation to have another Telepsychology
1176 Committee meeting. She said it is important for the Committee to address the use of the
1177 term “telepsychology.” She said the Board was unable to have a discussion after the
1178 PSYPACT presentation because they did not have quorum, but she thinks that
1179 PSYPACT should first be discussed by the Committee and then the Board.

1180
1181 Dr. Erickson suggested that the Committee invite Dr. Siegel to its next meeting.

1182
1183 Dr. Schaefer informed the Board that APA-sites have interns who have been providing
1184 services via telehealth for years. She said the Board needs to address it if it is a legal
1185 issue.

1186
1187 Dr. Phillips said this issue is important and asked if CPA could also take a look at it.

1188
1189 Dr. Linder-Crow said telehealth is defined as the mode of delivery. She said it is
1190 important to keep this in mind during future discussions. She said telehealth is not
1191 something different from the practice of psychology.

1192
1193 Ms. Marks said section 2904.5 states that a licensed psychologist is a healthcare
1194 provider pursuant to 2290.5. She said this might indicate that it has to be a licensee.
1195 She said this could capture a registrant, but it did not identify a psychological trainee as
1196 it identified a marriage family therapist intern. She said the two-person committee could
1197 notice a meeting without meeting the 10-day notice rule because it is not required to be
1198 noticed.

1199
1200 The Committee agreed to have another Telepsychology Committee meeting.

1201
1202 **Agenda Item #23: Licensing Report**

1203
1204 Ms. Karen Johnson presented the Licensing Report and said the processing time for
1205 applications was less than two weeks. She reported that Stephanie Cheung was the
1206 new Licensing Manager for the Licensing Unit and would be starting Monday, August,
1207 23. She said she would be involved with policy and regulation. She said the regulation
1208 of the 72-month limitation to the registration of psychological assistants went into effect
1209 on October 23, 2010 and the Board is coming up on the six-year mark. She said the
1210 regulation limits psychological assistant registrations to a cumulative total of six-years.
1211 She said staff has been working closely with the BreEZe team to figure out each
1212 registrant’s cumulative total of registration, and they have experienced some hurdles.
1213 She said much of the data that was in the Board’s legacy system was not talking to the
1214 new BreEZe system that was implemented in 2013. She said that staff’s solution was to

1215 assign everyone a genesis date, which would be October 23, 2011. She said it would be
1216 a one-time adjustment to account for those people with a registration prior to October
1217 23, 2010. She said the worst case is that some people would get extra time. She said
1218 staff has sent individual letters to those who received a registration prior to October 23,
1219 2010.

1220
1221 Dr. Horn said staff's solution is fair.

1222
1223 Ms. Johnson reported that the Licensing Committee is still reviewing the pathways to
1224 licensure and there are pending regulation changes to section 1387 and 1387.1. She
1225 said there would be a change in how the Board would receive documents. She said the
1226 trainee would be able to submit their verification of experience form directly to the Board
1227 with their application for licensure in an envelope signed by the supervisor. She said the
1228 Board would also no longer be requiring pre-approval of a plan for a psychological
1229 assistant in a private practice setting.

1230
1231 Ms. Acquaye-Baddoo thanked Ms. Johnson for her presentation.

1232
1233 **Agenda Item #24: Continuing Education Report**

1234
1235 Ms. Jacquelin Everhart presented the Continuing Education Report. She said she has
1236 been sending email notifications to let licensees know they have been selected for audit
1237 and will receive a follow-up letter via their address of record. She indicated that this has
1238 helped with people who are not sure if their address of record is current.

1239
1240 **Agenda Item #25: Licensing Committee Report and Consideration of Committee**
1241 **Recommendations**

1242
1243 **a) Review Checklist that Supervisors May Use to Ensure Compliance with the Statutes**
1244 **and Regulations**

1245
1246 Dr. Horn said people applying for licensure have been failing because they are not
1247 being informed of the laws and regulations. She said staff created a checklist to ensure
1248 that they are advising their trainees appropriately.

1249
1250 Ms. Johnson said the checklist would be added to the Board's website and would be
1251 provided as a link in the Licensing Unit's signature blocks.

1252
1253 Ms. Marks requested that the language be reviewed for grammatical changes.

1254
1255 It was M(Jones)/S(Acquaye-Baddoo)/C to approve the Supervision Checklist as
1256 amended and allow staff and legal counsel to make those changes.

1257
1258 Vote: 5 yes (Acquaye-Baddoo, Erickson, Phillips, Jones, Horn), 0 no

1259
1260 **b) Review of Pathways to Licensure Flowchart**

1261

1262 Dr. Horn reported that Dr. Phillips requested staff to create a flowchart to show the
1263 different pathways to licensure, which staff has provided. She said the plan is to have
1264 the flowchart attached to the applications for licensure.

1265
1266 It was M(Erickson)/S(Jones)/C to approve the Pathways to Licensure Flowchart.

1267
1268 Vote: 5 aye (Acquaye-Baddoo, Erickson, Phillips, Jones, Horn), 0 no

1269
1270 c) Review and Consideration of Draft Policy for Delegation to Licensing Committee to
1271 Decide Closed Session Items

1272
1273 Dr. Horn said the draft policy would allow the Licensing Committee to make the final
1274 decisions for extension requests. She said at the last Committee meeting, Ms. Marks
1275 stated she did not think the Committee could have the delegated authority and still go
1276 into closed session to discuss the requests, but she would do some research and report
1277 back to the Board. Dr. Horn said Ms. Marks found this to be true. She said the synopsis
1278 of the Committee's discussion was in the Board's materials. She said the Committee
1279 wanted to maintain the confidentiality of the person submitting the request.

1280
1281 Ms. Jones said it is important that the Board members make the decisions together.

1282
1283 Dr. Horn said since the Committee does not wish to move forward, this item is for
1284 information purposes only.

1285
1286 d) Review of Proposed New Statutory Language Regarding Coursework in Suicide Risk
1287 Assessment and Intervention

1288
1289 Dr. Horn said staff was asked to look at other one-time requirements to see how they
1290 were written and to bring a recommendation to the Committee at its September
1291 meeting.

1292
1293 e) Review and Assessment of Current Licensing Requirements, Recommendation to
1294 Stakeholders for Consideration: Proposed Amendments to Existing Sections of Title 16,
1295 California Code of Regulations: 1381, 1381.1, & 1381.2 (Applications); 1381.4 (Failure
1296 to Appear for an Examination); 1381.5 (Failure to Pay Initial License Fee); 1387
1297 (Supervised Professional Experience); 1387.1 & 1387.2 (Qualifications of Primary and
1298 Delegated Supervisors); 1387.3 (Non-Mental Health Services); 1387.4 (Out-of-State
1299 Experience); 1387.5 (SPE Log); 1388, 1388.6, 1389 & 1389.1 (Examinations-
1300 Waiver/Reconsideration); 1387.7, 1390, 1390.1, 1390.2, & 1390.3 (Registered
1301 Psychologists); 1387.6, 1391, 1391.1, 1391.2, 1391.3, 1391.4, 1391.5, 1391.6, 1391.7,
1302 1391.8, 1391.10, 1391.11, & 1391.12 (Psychological Assistants)

1303
1304 Dr. Horn said she believes the Committee will finish its review at the September
1305 Committee meeting.

1306

1307 f) Discussion, Review and Consideration of the Proposed Revisions to Title 16 of the
1308 California Code of Regulations; Sections 1397.60, 1397.61, 1397.62, 1397.69, 1397.70
1309 (CE/CPD)
1310

1311 Dr. Horn said the Committee is still reviewing the language to ensure clarity and is
1312 hoping it will finish at the September Committee meeting.
1313

1314 Ms. Jones said after the Committee's review is completed the language will go to the
1315 stakeholders for feedback.
1316

1317 g) Consider Committee's Recommendation Regarding Request for an Extension to the
1318 Limit of a Cumulative 72 Months to Renew a Psychological Assistant Registration
1319 Pursuant to Section 1391.1(b) of the California Code of Regulations
1320

1321 Dr. Horn reported that #1 requested a three to four year extension to the 72 months to
1322 renew a psychological assistant registration. She said the Committee's recommendation
1323 is to deny the request.
1324

1325 Dr. Phillips said she had been a psychological assistant since 1994 it appeared that she
1326 wanted to be one for the rest of her career.
1327

1328 It was M(Jones)/S(Erickson)/C to accept the Committee's recommendation to deny #1's
1329 request.
1330

1331 Vote: 4 aye (Erickson, Phillips, Jones, Horn), 1 no (Acquaye-Baddoo)
1332

1333 **Agenda Item #26: Use of Social Media – Guidelines for Appropriate Use of Social**
1334 **Media**
1335

1336 Ms. Sorrick presented a copy of the presentation by Amigo Wade at the Association of
1337 State and Provincial Psychology Boards (ASPPB).
1338

1339 Dr. Horn said she attended ASPPB's Midyear Meeting where the social media
1340 presentation was held. She said one of the presenters showed clips of psychologists
1341 behaving badly that were broadcasted on social media. She said an intern was in the
1342 middle of her intern year when she got drunk and fought on the street. Dr. Horn said this
1343 was caught on camera and was fired by her internship. She suggested that the
1344 Outreach and Education Committee look at this issue to provide education and outreach
1345 to stakeholders.
1346

1347 **Agenda Item #27: President's Report**
1348

1349 a) 2016 and 2017 Meeting Calendar and Locations
1350

1351 Dr. Phillips presented the 2017 Board meeting dates.
1352

1353 b) Committee Updates

1354 Dr. Phillips reported that the Licensing Committee meeting is scheduled for September
1355 19, 2016. He said Ms. Alita Bernal is considering joining the Outreach and Education
1356 Committee and said he would consult with the Board members to see what committees
1357 they would like to be on.

1358
1359 c) Review and Consideration of Draft Committee Delegation to be included in the
1360 Administrative Procedures Manual

1361
1362 Dr. Phillips said these guidelines would give authority to the Policy and Advocacy
1363 Committee Chair and the Executive Officer to take action if something changes with a
1364 bill that affects the Psychology Licensing Law. He said the Committee Chair and
1365 Executive Officer could develop a response to the issue that arose and report back to
1366 the Board president.

1367
1368 Ms. Jones asked if there was a provision that allowed meetings to occur if a 10-day
1369 notice was not achievable. Ms. Marks said the Open Meetings Act allows the Board to
1370 have a special meeting to address legislation, but it does require a 48-hour notice. Ms.
1371 Jones said she was not sure if this policy is needed.

1372
1373 Ms. Sorrick said the delegation would give the Executive Officer and Committee Chair
1374 the ability to act quickly in case the Board was not able to obtain quorum. She said it
1375 would allow them to change the Board's position at the last minute. Dr. Phillips said that
1376 the delegation states, "The Board shall be notified of such action as soon as possible."
1377 He said he believes that the Board needs the ability to act in a rapid fashion in
1378 emergencies.

1379
1380 Ms. Acquaye-Baddoo suggested that the delegation be given a timeline so that the
1381 Board could return to it later.

1382
1383 Ms. Sorrick suggested that the delegation be a pilot program.

1384
1385 Dr. Horn said she would like it to be a pilot program. She said she would only want this
1386 to be used in extraordinary situations.

1387
1388 Ms. Jones asked if there was a time that the Board was impeded and if there were other
1389 boards that do this.

1390
1391 Ms. Marks said she does know of one other board.

1392
1393 Ms. Sorrick said the Board has had more board meetings this year than last year so the
1394 issue has not been too prevalent. She said the Board took an "Oppose Unless
1395 Amended" position on AB 1715 and then the amendments the Board requested were
1396 implemented. She said she felt that she had the implicit authority to change the Board's
1397 position since the amendments were made, but the delegation would codify that
1398 authority.

1399

1400 Ms. Jones thanked Ms. Sorrick for her comment and said she was able to change the
1401 Board's position because it was granted through a motion the Board had moved. She
1402 said the Board should schedule a teleconference Board meeting every year and then
1403 cancel it if it is not needed. She requested that Ms. Marks provide a report of the
1404 different boards that have this delegation.
1405

1406 Ms. Sorrick suggested the following changes to the language: replace "may delegate"
1407 with "hereby delegate", add "Policy and Advocacy" to the term "chair", add "or quorum"
1408 after "time" and add the term "it" between "as pertains".
1409

1410 It was M(Erickson)/S(Horn)/C to accept the draft committee guidelines as amended for
1411 inclusion in the Administrative Procedures Manual through the third regularly scheduled
1412 quarterly meeting in 2017.
1413

1414 Vote: 4 aye (Acquaye-Baddoo, Erickson, Phillips, Jones, Horn), 1 no (Jones)
1415


1416 **Agenda Item #28: Recommendations for Agenda Items for Future Board Meetings**
1417

1418 Ms. Everhart provided the recommendations as made by the Board members
1419 throughout the meeting.
1420

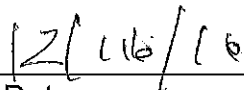
1421 **Agenda Item #29: Adjournment**
1422

1423 The Board adjourned at 5:54 p.m.
1424
1425
1426
1427
1428

1429
1430
1431
1432



President



Date

