



TELECONFERENCE BOARD MEETING NOTICE AND AGENDA

The Speech-Language Pathology & Audiology & Hearing Aid Dispensers Board (Board) will hold a Board Meeting via WebEx Events on

Thursday, May 13, 2021 beginning at 1:00 p.m., and continuing on Friday, May 14, 2021 beginning at 9:00 a.m.

NOTE: Pursuant to the provisions of Governor Gavin Newsom's Executive Order N-29-20, dated March 17, 2020, neither Board member locations nor a public meeting location are provided. Public participation may be through teleconferencing as provided above. If you have trouble getting on the WebEx event to listen or participate, please call 916-287-7915.

Important Notice to the Public:

The Board will hold this public meeting via WebEx Events. Instructions to connect to this meeting can be found at the end of this agenda. To participate in the WebEx Events meeting, please log on to the following websites each day of the meeting:

Thursday, May 13 WebEx Link:

<https://dca-meetings.webex.com/dca-meetings/onstage/g.php?MTID=e66c32feaa9c4cab3d939be89699c2cce>

Friday, May 14 WebEx Link:

<https://dca-meetings.webex.com/dca-meetings/onstage/g.php?MTID=e6c5cb9a8d1bafdce3bc7162a7bd6a3a6>

Due to potential technical difficulties, please consider submitting written comments by May 11, 2021, to speechandhearing@dca.ca.gov for consideration.

Board Members

Marcia Raggio, Dispensing Audiologist, Board Chair
Holly Kaiser, Speech-Language Pathologist, Vice Chair
Tod Borges, Hearing Aid Dispenser
Karen Chang, Public Member
Dee Parker, Speech-Language Pathologist
Debbie Snow, Public Member
VACANT, Dispensing Audiologist
VACANT, Hearing Aid Dispenser
VACANT, Otolaryngologist, Public Member

Full Board Meeting Agenda

Thursday, May 13, 2021

1. Call to Order / Roll Call / Establishment of Quorum

2. Public Comment for Items not on the Agenda (*The Board may not discuss or take any action on any item raised during this public comment section, except to decide whether to place the matter on the agenda of a future meeting (Government Code Sections 11125, 11125.7(a))*)

1:00 p.m. – Petition Hearing

3. Petition for Penalty Relief: Termination of Probation – Christine Stanton

CLOSED SESSION

4. Pursuant to Government Code Section 11126(c)(3), the Board will Meet in Closed Session to Discuss Disciplinary Matters Including the Above Petition, Proposed Decisions, Stipulated Decisions, Defaults, Petitions for Reductions in Penalty, Petitions for Reconsideration, and Remands.

Friday, May 14, 2021

5. Call to Order / Roll Call / Establishment of Quorum
6. Public Comment for Items not on the Agenda (*The Board may not discuss or take any action on any item raised during this public comment section, except to decide whether to place the matter on the agenda of a future meeting (Government Code Sections 11125, 11125.7(a))*)
7. Review and Possible Approval of the June 30, 2020 Board Teleconference Meeting Minutes
8. Review and Possible Approval of the February 5, 2021 Board Teleconference Meeting Minutes
9. Board Chair's Report
 - a. 2021 Board Meeting Calendar
 - b. Board Committee Updates
10. Executive Officer's Report
 - a. Administration Update
 - b. Budget Report
 - c. Regulations Report
 - d. Licensing Report
 - e. Practical Examination Report
 - f. Enforcement Report
11. DCA Update – DCA Board and Bureau Relations

11:00 a.m. – Presentation

12. Overview of the Disciplinary Process – Health Quality Enforcement Section, Attorney General's Office (G. Castro/ R. Luzon)

BREAK FOR LUNCH (TIME APPROXIMATE)

13. Update on Speech and Hearing Related DCA Waivers related to the COVID-19 State of Emergency
 - a. Waivers Approved by DCA
 - i. Modification of Continuing Education Requirements for All Licensees
 - ii. Modification of Reactivation Requirements for Speech-Language Pathologists
 - iii. Modification of the Direct Monitoring Requirements for Required Professional Experience (RPE) Licenses and the Direct Supervision Requirements for Speech-Language Pathology Assistant (SLPA) Licenses
 - iv. Modification of the Limitations on Renewing of Hearing Aid Dispenser (HAD) Temporary Licenses and HAD Trainee Licenses
 - v. Modification of Limitations and Requirements for Extension of RPE Licenses
 - b. Waivers Denied by DCA
 - i. Modification of the 12-Month Fulltime Professional Experience Requirement for Licensure as an Audiologist
 - ii. Modification of Board Continuing Education Requirements to Waive Self-Study Restrictions

14. Legislative Report: Update, Review, and Possible Action on Proposed Legislation
 - a. 2021 Legislative Calendar and Deadlines
 - b. Board-Sponsored Legislation for the 2021 Legislative Session
 - AB 435 (Mullin) Hearing aids: locked programming software: notice
 - Proposed Legislation to Revise Business and Professions Code Section 2532.25 Relative to Audiology Licensing Requirements
 - c. Board-Specific Legislation for the 2021 Legislative Session
 - AB 486 (Committee on Education) Elementary and secondary education: omnibus bill
 - AB 555 (Lackey) Special education: assistive technology devices
 - AB 1361 (Rubio) Childcare and developmental services: preschool: expulsion and suspension: mental health services: reimbursement rates
 - d. Healing Arts Legislation for the 2021 Legislative Session
 - AB 1236 (Ting) Healing arts: licensees: data collection
 - e. DCA-Wide Legislation for the 2021 Legislative Session
 - AB 29 (Cooper) State bodies: meetings
 - AB 107 (Salas) Licensure: veterans and military spouses
 - AB 225 (Gray) Department of Consumer Affairs: boards: veterans: military spouses: licenses
 - AB 646 (Low) Department of Consumer Affairs: boards: expunged convictions
 - AB 885 (Quirk) Bagley-Keene Open Meeting Act: teleconferencing
 - AB 1026 (Smith) Business licenses: veterans
 - SB 607 (Roth) Professions and vocations
 - SB 731 (Durazo) Criminal records: relief
 - SB 772 (Ochoa Bogh) Professions and vocations: citations: minor violations

15. Legislative Items for Future Meeting
 (The Board May Discuss Other Items of Legislation in Sufficient Detail to Determine Whether Such Items Should be on a Future Board Meeting Agenda and/or Whether to Hold a Special Meeting of the Board to Discuss Such Items Pursuant to Government Code Section 11125.4)

16. Discussion and Possible Action regarding Required Professional Experience Direct Supervision Requirements and Remote or Tele Supervision (As Stated in Title 16, California Code of Regulations (CCR), sections 1399.153 and 1399.153.3)

17. Discussion and Possible Action Regarding Audiology Licensing Requirements (As Stated in Business and Professions Code Sections 2532.2 and 2532.25 and Title 16, CCR section 1399.152.2)

18. Regulatory Report: Update, Review, and Possible Action on Board Regulation Packages
 - a. Discussion and Possible Action regarding Speech-Language Pathology and Audiology Fees (As Stated in 16 CCR sections 1399.157, 1399.170.13, and 1399.170.14)
 - b. Update, Discussion and Possible Action regarding Regulations as a result of AB 2138 Licensing Boards: Denial of Application: Revocation or Suspension of Licensure: Criminal Conviction (As Stated in 16 CCR sections 1399.132, 1399.133, 1399.134, 1399.156.1, 1399.156.2, and 1399.156.3)
19. Discussion and Possible Action Regarding Continuing Education/Continuing Professional Development Requirements (As Stated in Title 16, CCR sections 1399.140 et seq. and 1399.160 et seq.)
20. Future Agenda Items and Potential Dates for Standalone Committee Meetings

CLOSED SESSION

21. Pursuant to Government Code Section 11126(c)(3), the Board Will Meet in Closed Session to Deliberate on Disciplinary Matters, Including Proposed Decisions, Stipulated Decisions, Defaults, Petitions for Reductions in Penalty, Petitions for Reconsideration, and Remands.
22. Adjournment

Agendas and materials can be found on the Board's website at www.speechandhearing.ca.gov.

Action may be taken on any item on the Agenda. The time and order of agenda items are subject to change at the discretion of the Board Chair and may be taken out of order. In accordance with the Bagley-Keene Open Meeting Act, all meetings of the Board are open to the public. In the event a quorum of the board is unable to attend the meeting, or the board is unable to maintain a quorum once the meeting is called to order, the members present may, at the Chair's discretion, continue to discuss items from the agenda and make recommendations to the full board at a future meeting. Adjournment, if it is the only item that occurs after a closed session, may not be webcast.

The meeting facility is accessible to persons with a disability. Any person who needs a disability-related accommodation or modification in order to participate in the meeting may make a request by contacting the Board office at (916) 287-7915 or making a written request to Cherise Burns, Assistant Executive Officer, 1601 Response Road, Suite 260, Sacramento, California 95815. Providing your request at least five (5) business days before the meeting will help ensure availability of the requested accommodation.



MEMORANDUM

DATE	April 28, 2021
TO	Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board
FROM	Heather Olivares, Legislation/Regulation Analyst
SUBJECT	Agenda Item 7: Review and Possible Approval of the June 30, 2020 Board Meeting Minutes

Background

Attached is a draft of the meeting minutes from the June 30, 2020 Board Teleconference Meeting. The meeting minutes were reviewed at the November 20, 2020 Board Meeting and Dr. Raggio proposed clarifying changes to the meeting minutes. Please review the revised draft minutes and identify any necessary changes.

Action Requested

Discuss whether there are necessary corrections or additional information needed. If not, make a motion to approve the June 30, 2020 Board Meeting minutes.

Attachment: June 30, 2020 Board Meeting Minutes



BOARD MEETING MINUTES – DRAFT

June 30, 2020

Teleconference

Full Board Meeting

1. Call to Order / Roll Call / Establishment of Quorum

Dr. Marcia Raggio, Board Vice Chair welcomed everyone and called the Speech-Language Pathology and Audiology and Hearing Aid Dispensers Teleconference Board Meeting to order at 10:00 a.m. Dr. Raggio had all members and executive staff introduce themselves; six members of the Board were present and thus a quorum was established. This meeting was held via WebEx with the assistance of a Department of Consumer Affairs (DCA) SOLID moderator.

Board Members Present

Marcia Raggio, PhD, Dispensing Audiologist, Vice Chair
Karen Chang, Public Member
Christy Cooper, AuD Dispensing Audiologist
Holly Kaiser, Speech-Language Pathologist
Amnon Shalev, Hearing Aid Dispenser
Debbie Snow, Public Member

Staff Present

Paul Sanchez, Executive Officer
Anthony Pane, DCA Legal Counsel
Karen Halbo, DCA Regulations Attorney
Cherise Burns, Assistant Executive Officer
Tenisha Graves, Enforcement Coordinator
Lisa Snelling, Licensing and Administration Coordinator

2. Public Comment for Items not on the Agenda

Dr. Carol Mackersie stated that she would like to learn more about the Board's plan to revise the Audiology licensure regulations.

Dr. Yugandhar Ramakrishna, Assistant Professor at California State University Northridge, stated that he would like to know if there are any plans to ease or reconsider the hearing aid dispensers license requirements. Paul Sanchez, Executive Officer, asked for clarification on what the specific question of Dr. Ramakrishna involved. Dr. Ramakrishna clarified that he was asking specifically about reconsidering the requirement for audiologists to have to pass the Hearing Aid Dispensers Practical Examination in order to dispense hearing aids, especially since this is not required in other states and considering the amount of training and examinations required for audiologists.

3. Update on DCA Waiver Requests Submitted by the Board related to the COVID-19 State of Emergency

Mr. Sanchez provided a summary of the authority provided to DCA by the Governor to waive statutory and regulatory requirements for licensure and how staff worked with stakeholders to identify and submit DCA Waiver requests on the behalf of the Board's licensees.

Cherise Burns, Assistant Executive Officer, then provided a summary of each of the approved DCA Waivers and updates on these waivers. Ms Burns then also provided an update on denied and pending DCA Waiver requests and that the Board will continue to pursue these DCA Waiver requests. Ms. Burns also indicated that the Board can submit additional DCA Waiver requests and opened it up to the Board Members for discussion.

Holly Kaiser asked for clarification on the telesupervision waiver and the request for an extension of this waiver. Ms. Burns clarified that she has been following up with the DCA Executive Office on whether they will be automatically extended at the expiration of the original waiver. Mr. Sanchez also clarified that the DCA Executive Office has confirmed they are reviewing all DCA Waivers that need extensions, for which there are many, and they are trying to do this automatically when needed.

Dr. Raggio mentioned that she knows of a number of professional organizations that were going to write letters in support of the 12-month requirement waiver and asked whether staff know if those letters have been submitted to the DCA Director and whether we have received any feedback about these. Mr. Sanchez responded he only knows of one such letter that he was copied on and forwarded to the DCA Director but didn't know of any other letters that may have been sent. Mr. Sanchez mentioned that when the organizations are ready that they can send those letters to him and that he will get those letters to DCA.

Dr. Raggio then asked if there was any public comment regarding this agenda item.

Dr. Carol Mackersie, Program Director for the Audiology program at San Diego State, stated that she really appreciates the work the Board has done during this crisis. She also commented about the 12-month RPE requirement ignores the first four years of the student's education and only considers the last year as something that is eligible for the purposes of licensure. She believes this creates a barrier to licensure that really needs to be looked at very closely as where the state and national professional organizations consider the 12-months of experience to include the entire educational experience that involves supervised clinical work.

Dr. Raggio let Dr. Mackersie and the other participants know that the Board would be looking at this issue later in the meeting. There was no additional public comment on this agenda item.

Dr. Rupa Balachandran, University of the Pacific in San Francisco, wanted to add her support to Dr. Mackersie's comments that looking at the requirement for licensure to include experience accrued prior to the last year.

4. Discussion of New Practice Related Issues and Changes in the Professions Due to COVID-19

Dr. Raggio provided a summary of the agenda item and the information provided by Dr. Roy Schutzensgel, of the Department of Health Care Services, regarding the fact that audiologists are considered part of the essential workforce under the Governor's March 2020 Executive Order and that a telephone call could be considered billable telehealth if it had to do with follow-up from a face-to-face meeting or of the content of that phone call was considered what you would do during a face-to-face meeting with a patient.

Dr. Raggio asked for comment from the Board regarding this agenda item.

Dr. Christy Cooper stated that she works at Kaiser which has opened back up some limited services and for hearing aid checks are using curbside pick-up options. Dr. Raggio mentioned that there have been regional differences in whether private audiology practices have closed down completely or continued operations throughout the crisis.

Dr. Raggio then asked for public comment on the agenda item.

Andrea Huttinger thanked the Board for working to keep licensee businesses open during the crisis and asked how long the current telehealth parameters would be in effect for or whether they should expect a change or modification soon. Dr. Raggio stated that she doesn't know of any changes that are imminent regarding telehealth and expects the parameters will stay the same for as long as necessary.

There was no further public comment on this agenda item.

- 5. Executive Officer's Report**
- a. Administration Update**
- b. Budget Report**
- c. Licensing Report**
- d. Practical Examination Report**
- e. Enforcement Report**

Mr. Sanchez provided the Executive Officer's Report and gave a summary of the work the staff and DCA's Office of Information Services did to get staff socially distanced and teleworking in order to keep the Board's office running during the crisis and provided an update on hiring efforts during the crisis. Mr. Sanchez welcomed Holly Kaiser to the Board and mentioned with her recent appointment that the Board now has no vacancies. Mr. Sanchez also provided an update on the Board's budget for Fiscal Year 2019-20, which is in good shape and showed we have expended most of our funds and has a lower reversion than normal years due to a retirement and onboard of the new Assistant Executive Officer. He also summarized the budgetary orders from the Department of Finance that the Board is operating under to reduce state expenditures, including reducing costs for new goods and services, banning all non-essential travel, and only hiring for essential positions only. Mr. Sanchez then provided the Licensing Report and a summary of current timeframes and the allocation of overtime to work incoming applications. Mr. Sanchez then provided an update on the postponed Hearing Aid Dispensers Practical Examinations and that the Board is looking at ways adapt the examination in coordination with DCA's Office of Examination Services so that we can safely administer the examination. Ms. Burns also commented that those who were already approved to take the April examination will be the first to take the examination once we are able to safely resume the examinations. Mr. Sanchez also highlighted that the Board will need additional experts to help with examination administration and encouraged licensees to participate. Mr. Sanchez then provided the Enforcement Report and a summary of current disciplinary actions and probation monitoring of licensed and unlicensed individuals. Mr. Sanchez also provided an update about the Board continuing to move forward with a move to a new location as the current office space is only meant for nine people and we have exceeded that size already and are now having issues with adequately socially distancing in the current small office space.

Dr. Raggio thanked Mr. Sanchez for the report and then Mr. Sanchez asked if there was any public comment on this agenda item. There was no public comment on this agenda item.

6. Discussion and Possible Action regarding Regulations as a result of AB 2138 Licensing Boards: Denial of Application: Revocation or Suspension of Licensure: Criminal Conviction (As Stated in Title 16, California Code of Regulations (CCR) sections 1399.132, 1399.133, 1399.134, 1399.156.1, 1399.156.2, and 1399.156.3)

Dr. Raggio introduced the agenda item and then Cherise Burns provided a summary of the rulemaking process and the AB 2138 regulation package and Board actions taken so far. Including that package was noticed and the forty-five (45) day public comment period started on March 6, 2020 and ending on April 20, 2020. No public hearing was requested by any party and there was one (1) public comment was received on April 20, 2020. The public comment was made by Faride Perez-Aucar of Root and Rebound Reentry Advocates and Vinuta Naik of Community Legal Services of East Palo Alto and submitted on behalf of the following organizations: A New Way of Life Reentry Project, Center for Employment Opportunities, Center for Living and Learning, Legal Aid at Work, Legal Services for Prisoners with Children, All of Us or None, Los Angeles Regional Reentry Project, National Association of Social Workers, California Chapter, REDF, The Record Clearance Project, San Jose State University, and Rubicon Programs.

a. Adoption of Responses to Comments Received During 45-day Public Comment Period

Ms. Burns then covered the summary of each of the comments received in the public comment letter and the proposed Board response to each comment, as shown in the meeting materials.

Since many of the comments were requesting the statute be duplicated into the regulation, Ms. Burns also clarified that along with not violating the Administrative Procedure Act's requirement to not duplicate statute in regulations, that statutory requirements do not need to be duplicated in regulations, as statute and regulation always work in concert with one another. She stated that even if the statute is not referenced or duplicated inside the regulation, the statute always applies, and the regulation simply clarifies what additionally applies.

Ms. Burns also stated that with the regulations open-ended language allowing applicants and licensees to submit any variety of evidence of rehabilitation that they think applies. As where if the Board tries to create an exhaustive list of types of rehabilitation evidence a applicant or licensee can submit you run into a different problem, where exhaustive lists tend to mean all-inclusive lists, and then the Board would be constrained to that list of potential rehabilitation evidence that could never include all types of rehabilitation. The current language allows the applicant and licensee the maximum flexibility to provide any type of rehabilitation evidence they believe applies and to tell us why, and then the Board will take all of that into consideration.

Dr. Raggio asked how the Board responds to these comments to the people that submitted them. Ms. Burns clarified that the public comment and the Board's responses to them go into the Final Statement of Reasons, which is reviewed by the Office of Administrative Law, and they make sure that the Board has addressed these comments and followed appropriate procedures. Karen Halbo, Attorney II, DCA Regulations Unit, clarified that it is the Board's job to review the comments and make a response to them, and the comments stay within the regulatory package.

Dr. Raggio then asked if there was a direction or motion that staff would like to provide the Board at this point. Ms. Burns clarified that since there was no disagreement from the Board on the proposed responses to the public comment that they can go ahead and make a motion to direct staff to reject the proposed comments and provide the responses to the comments as indicated in the meeting materials and use these when completing the regulatory process as authorized by this motion.

Motion: Raggio; Second: Cooper.

Motion to direct staff to reject the proposed comments and provide the responses to the comments as indicated in the meeting materials and use these when completing the regulatory process as authorized by this motion.

Dr. Raggio asked for public comment on the agenda item, no public comment was received.

Dr. Raggio then called roll for the vote. Motioned passed 6-0.

b. Order of Adoption

Ms. Halbo then provided a summary of the history of the development of the AB 2138 regulatory language and how the change in leadership at the Office of Administrative Law now wants additional clarifications to the proposed regulatory language that the Board's language was modeled on. Some of these clarifications are non-substantive and require no Board action but some are substantive changes that require the Board to approve the changes and require an additional 15-day comment period. Ms. Halbo then explained the ramifications of not making the changes now and instead making them later, which could slow down the regulation package. Ms. Halbo discussed each of the changes requested and the clarifying reasons for each of these changes. Ms. Burns also clarified that when all Boards and Bureaus started working on these regulations, most of us ended up taking three similar tracks with small specific variations for each Board, so if there are clarifications needed to get these regulations active it would be better to do it now than at the end when we may be up against a different deadline and the legislation has already been active.

Dr. Raggio clarified that what is being asked of the Board is to approve these mostly technical changes so that we can get the package through to the Office of Administrative Law more quickly. Ms. Burns stated that is correct.

Motion: Chang; Second: Kaiser.

Motion to direct staff to take all steps necessary to complete the rulemaking process, including sending out the modified text with these changes for an additional 15-day comment period. If after the 15-day public comment period, no adverse comments are received, authorize the Executive Officer to make any non-substantive changes to the proposed regulation, and finish the regulatory process to adopt the proposed regulation as described in the modified text.

Dr. Raggio asked for any additional comment on the agenda item, no additional comments were made.

Dr. Raggio then called roll for the vote. Motioned passed 6-0.

The Board then took a 10-minute break.

7. Discussion and Possible Action Regarding Audiology Licensing Requirements (As Stated in Business and Professions Code Sections 2532.2 and 2532.25 and Title 16, CCR section 1399.152.2)

Upon returning to the meeting, Dr. Raggio ensured all Board Members and executive staff were present.

Dr. Raggio then provided a summary of the current Audiology licensing requirements and the problems caused by the 12-month Required Professional Experience requirement, and the work the Board has done on revisioning these requirements at the February Board Meeting and the input from stakeholders since that meeting. Dr. Raggio then covered some issues for consideration and discussion as shown in the meeting materials and opened it up to the Board.

Karen Chang asked whether telehealth counts towards the hours required. Dr. Raggio responded that she was not sure but that the Board should count them as they are direct patient care hours. Ms. Burns clarified that the Board is currently allowing the telehealth hours to count so long as they are receiving appropriate supervision, in accordance with DCA Waivers. Dr. Cooper stated that their externs are accruing hours via telehealth and the level of supervision provided depends on the competency of the extern, where at the beginning it is 100 percent over-the-shoulder supervision and later in the experience as they are ready to graduate it is typically at supervision nearby.

Ms. Chang also mentioned that with varying experiences, what if some were doing mainly hours of paperwork, like 1,000 hours, and not many in direct patient care. Dr. Raggio stated that it is incumbent on the program to decide what is reasonable in terms of allowing other hours and trust that since they are accredited these programs will do the right thing, but we should consider that.

Dr. Raggio then asked Board Members how they felt about the consideration of pre-didactic clinical clock hours that are done at 100 percent supervision be considered as part of the total number of hours.

Dr. Cooper stated that is a hard one for her as it really depends on the placement of the student, she stated that when she was going through her program there were three clinical rotations and then the 12-month externship and doing the three clinical internships was the equivalent of a year. Dr. Raggio asked if Dr. Cooper felt she received adequate supervision during those internships. Dr. Cooper stated that she did get adequate supervision but a lot of it was shadowing and not as much hands on as she got in her externship.

Holly Kaiser asked about the RPE requirement and whether removing the requirement to get the RPE license would mean that the after finishing their 1850 clock hours they would be able to apply for a full license. Dr. Raggio asked Mr. Sanchez about the need for the RPE license historically.

Mr. Sanchez clarified that Dr. Raggio meant that removal of the RPE requirement would be due to the students being under the supervision of the schools. Dr. Raggio confirmed that and asked why they now have to have the RPE license. Mr. Sanchez clarified that requirement is a carry-over from the previous requirement when Audiologists had to obtain their master's degree and then complete the 12-months of experience as an RPE after graduation from their program.

When licensure became a Doctoral degree requirement, then the 12-months of experience became a part of the doctoral program and the Board at that time made the decision that it would still be a requirement. Ms. Burns also commented that having come from another board where not all trainees have to be registered with the board for their experience to count towards licensure, you can run into different problems since they did not have to register their supervisor with the board sometimes people would get to the end stage of applying for licensure and find out their experience didn't follow all the laws and regulations for supervision so some of their experience hours would not count towards licensure. Ms. Burns stated that there can be a catch where if they don't have to be registered with the Board, we don't catch those things upfront that cause their hours to not qualify in the end.

Dr. Raggio asked whether a registration would be adequate compared to a license to make sure that those rules are followed. Ms. Burns stated that it worked for her last board. Mr. Sanchez asked for clarification on Dr. Raggio's question and Dr. Raggio clarified that she wasn't sure if there were different financial differences or other ramifications or would an RPE registration serve the same purpose as an RPE temporary license to make sure they are following the rules. Mr. Sanchez clarified that the registration versus licensure more a legal distinction, but for what we are talking about a registration and a license would work the same.

Dr. Raggio asked what the current fee is for the RPE license. Ms. Burns said she would quickly look it up. Mr. Sanchez stated that the real question here is whether the supervision they are getting in the schools is adequate and I think we have to go back and look at all of the areas in our practice act where this is referred to and then come back with what would have to change if we were to consider this. Dr. Raggio stated that when we get to public comment, we will get more feedback and knowledge about how these pre-graduation clinics are run and how stringent, how well supervised and designed they are. Dr. Raggio then asked the Board how they felt about being able to count all hours if these are proven to be supervised and solidly designed and run by licensees, how do members feel about eliminating the post-graduation requirement. Ms. Kaiser stated that she felt that if there is adequate practicum experience outside of the clinical setting in the universities then it would make sense to acknowledge those as adequate training. She stated that 1850 is a lot of hours when as a speech-language pathologist only 300 hours when going into their clinical fellowship.

Ms. Burns then confirmed the application fee for the audiology RPE is \$60.

Dr. Raggio also mentioned that another idea proposed was to make the requirement a range of time so that it wasn't so rigged, or whether we can count other types of hours to count outside of patient contact hours.

Ms. Burns then commented that it is often hard to get the legislature to change something from a concrete no less than 12 months to a range of months, normally they are going to want to set a cap or a base and then want the Board to define in regulations up to that amount. So, if it becomes a minimum of nine (9) months, what exactly does that mean and they will want us to define that. Ms. Burns also noted from the logistical side of application processing for staff, knowing exactly what should count and what shouldn't count, while not the primary concern of the Board, if a range is approved considering what that looks like in practice should be considered. Dr. Raggio asked if there is a range, is there also an hours requirement typically. Ms. Burns clarified that other models are a little vaguer so that it allows more flexibility, for example at her last board, they had a doctoral degree requirement for a licensed psychologist where 3,000 hours were required for licensure, 1,500 of those hours could be accrued as part of the graduate program, after the Master's degree but before graduation with the PhD or PsyD,

and then the other 1,500 hours was done after graduation from the doctoral program and included everything including socialization into the field learning how to open and operate your own practice and those other kinds of considerations so included more than just clinical patient hours. It really depends on how specific or how flexible and those kind of considerations.

Dr. Raggio then asked the members if there were any opinions about specifying a number of hours pre-graduation and some number of hours required during the RPE. Dr. Cooper stated that it seemed like a good option to her. Ms. Kaiser stated that she also agrees.

Ms. Burns clarified that the way that this could work for our Board is that if you want to require 1800 hours, you could allow up to 900 hours could be completed pre-graduation or however you want that to be flexible. For example, at my last board, if you wanted to complete all your hours post-graduation you could also do that so there were multiple ways to meet someone's needs.

Mr. Sanchez stated that this goes back to the conversation of what is supposed to be supervised clinical experience versus required professional experience, and when you look at the meaning in statute there isn't that much of a distinction. So, we should look at the whole picture here and try to define what does the Board think a person needs to be licensed as an Audiologist, and address that and address whether there is a need for the RPE license. Because a lot of what we are doing here is just taking off from what was required of the master's student and trying to make it fit into the doctoral programs that we have now. This is a good opportunity to look at everything and what should we be requiring of these audiology candidates. Dr. Raggio agreed with Mr. Sanchez's statement.

Dr. Raggio then suggested some possible solutions that the Audiology Practice Committee could look at during their next meeting in addition to the outlined considerations. These could be due to the average National clock hour requirement, there should be no less than 1,850 clock hours as one possibility, we would need to look into the types of hours that could be included in those hours. Another possible solution could be that if students can verify that their pre-graduation clinics are 100 percent supervised by a licensed audiologist that we should be able to include some of those clock hours in the total requirement and should we eliminate the 12-month requirement entirely and instead rely on the number of clock hours.

Ms. Chang stated that at the last Board Meeting she believed that we were considering an hours requirement instead of the 12-month requirement because it was restraining for some students. It also had to do something with their graduation and insurance coverage under the school. Ms. Chang just wanted to clarify why we were discussing it currently and if there was a decision they need to make now. Dr. Raggio stated that Ms. Chang was correct and noted that the language provided in the current meeting materials that were the result of the last meeting, the language provided still had the qualifier that the experience had to follow the completion of the didactic and clinical rotation requirements of the doctoral program, so even if we did adopt that and are okay with it, we still have some other concerns. Ms. Burns then added that to make a statutory change we have to go through the legislative process, so talking about it here and at the Audiology Practice Committee to finalize the language for final consideration at the Fall Board Meeting, which would allow us to finalize a legislative proposal and seek a bill author to get the changes made next year. Dr. Raggio commented that she would like to get some public comment before finalizing the language.

Debbie Snow commented that she agrees that it sounds reasonable to have the Audiology Committee investigate all the aspects further and then come back at the Fall Board meeting and agrees with what Ms. Chang said.

Dr. Raggio then opened the agenda item up for public comment.

Dr. Rupa Balachandran, University of the Pacific in San Francisco, thanked the Board for having this discussion and stated that she is grateful to see the progressive nature of the Board and continuing to look at how the educational and license requirements are aligned to serve all of our constituents. She then provided some clarification on what they mean when they say non-patient contact hours, she said she can see the concern that someone might be put in the role of simply doing paperwork and she definitely agrees that would be a concern. But what she would like some clarification on is what can count when the patient leaves the building and they are filling out orders for equipment, or filling out an ear mold order or hearing aid order, or calling manufacturers for specifications for that product, or sending the patient information about something discussed with the patient, or researching something the patient requested, there are several with patient related activities that are not direct patient contact, also there are practice related activities, which are practice management and considered to be integral to the Audiology education. Dr. Balachandran stated that they are appreciative and value the Board's concern of students not being put to tasks where they will gain that professional experience, and occasionally as a program director they run into that and regardless of how strict the regulations are there will always be bad actors, but between the student and the program director and director of clinical education work together to make sure that students get the professional experience they need. She also reminded the Board that the RPEs are students and still paying fees while accruing this experience, so they are very conscious of getting the best experience out of the fees they are paying out. Dr. Balachandran asked for clarification on the language about pre-graduation clinical experience, as there is pre-RPE clinical experience and the RPE experience happens pre-graduation so this could be confusing for students, maybe use Pre-RPE instead of pre-graduation. She stated that she supports an hours-based requirement as it holds the programs and the externship providers accountable. Dr. Balachandran also confirmed that the 12-month requirement is a detriment to international students, and she supports removing that as it doesn't allow these students to use their resources appropriately and causes them to have to leave California, which was not the intent for starting programs in California. She appreciates the amount of work and thought the Board has put into this process.

Dr. Raggio asked whether she has developed forms that look at accreditation requirements and how many hours students have received to keep an organized track of their experience throughout their RPE. Dr. Balachandran confirmed that all audiology programs use a software program that allows the program to document every hour the student accrues, the types of patient populations served, and the types of appointments, and this tracking starts with their very first clinical hour. She stated that they track these from an accreditation standpoint they have to document the types of clinical experience, the adequacy of their clinical resources, the training of their clinical preceptors and whether they are keeping up with their licensure and their CEUs, and the nature of that supervision so they can submit their accreditation report every year. Dr. Balachandran stated that this documentation also shows how they meet all the standards in every audiology area from both a didactic coursework and a clinical standpoint.

Dr. Raggio then asked whether the program was customizable or created specifically for the program. Dr. Balachandran stated that most of the programs come with the standards preloaded and there are also customizable portions, but they are fairly easy and ready to use. She also stated that it is standard practice for clinical programs to use a platform of this type.

Dr. Raggio then asked Dr. Balachandran if she had an opinion on the use of different types of hours, such as modeling hours, or whether they all have to be face-to-face, or whether she has

an opinion on whether that should be the case. Dr. Balachandran stated that she believes that an Audiologist needs to learn to do everything, so we want to make sure there is some kind of minimum patient contact hours. She stated that you cannot become an Audiologist if all you did was learn to make appointments, she stated believes it would be good to make a minimum number of patient contact hours but it is very valuable for them to learn all aspects of being in practice, which involves billing, ordering, and doing biological checks on the equipment. Dr. Balachandran stated that each piece of this contributes to being a professional, so every hour cannot be patient contact, it needs to be balanced. She also stated that you could have a minimum patient contact hour requirement, but that she imagined it would become tedious for programs and clinics that take in interns to be counting each of these. Dr. Balachandran stated that a broader requirement which says audiology and patient related activity would be something more appropriate. She stated that many of these clinics are taking on interns free of cost and as a professional courtesy, if we started dictating what and how they need to do each piece she thinks they would find themselves in a different situation where they may not want to take on students, so she wouldn't want restrictions to become too tight either.

Dr. Carol Mackersie, Program Director for the Audiology program at San Diego State, stated that she agrees with most of what Dr. Balachandran said, and that in particular the suggestion to break the hours up into pre-RPE and then the RPE experience hours might be okay. She stated that she is not sure what the issue is with the CSU 11-semester situation, they have had their program operating since 2003 and having 11 semesters has not ever been a problem for them in regards to the 12-month RPE requirement, they do three (3) semesters of an RPE experience. So she is not sure where the problem is with that issue. Dr. Mackersie also stated that someone also brought up the idea of shadowing and the concern that shadowing is really observation and that is not considered clinical, she stated that when students log hours in one of the online database platforms there is a category called observation and when shadowing students would be instructed to log those types of hours in the observation category so they wouldn't be counted as clinical hours. She also stated that she respectfully disagrees with Rupa about the 12-month RPE, she stated that she believes California is in a unique position that we offer this RPE provisional license and she believes it puts us in a better position in terms of being able to get externships for these students because it is a provisional license. Dr. Mackersie stated that in other states that don't have provisional licenses they have a lot of trouble getting externships for students because they have to be with those students for every moment of time because they do not have a provisional license. She stated that she would hate to see the provisional license thrown out altogether, but she would like to see is a disentangling of the clinical hour requirement from the RPE requirement. Dr. Mackersie stated that she understands the difficulty for international students, and she would have no problem with shortening the RPE requirement to overcome that problem but would be in favor of having a 12-month equivalent where the language could say equivalent to 35 hours a week. She stated the equivalency word could be important because some of their students are at externship sites that are extremely demanding and are working 10-hour days and sometimes on weekends, so they are accruing hours at a really rapid rate because of the demands of their externship site. Dr. Mackersie also stated that it would be very reasonable to ask for documentation in the form of a summary of the students' hours, it is easy to do and not a burden at all since it is all built into the software, and only approved hours would show up as hours. She stated that she also agrees with Dr. Balachandran that other types of clinical activities are highly relevant and very important for the student's education and should be counted.

Dr. Raggio then clarified that the 11-semester issue had to do with the program and not the RPE, when the CSU programs were being approved by the CSU Chancellor's Office the executive order was negotiated and determined that the programs should be no more than 11

semesters, and some of them are trying to get this clinical training accomplished in that amount of time and it's just not possible in some cases. She stated that we are working on that issue of whether we want to change it at the level of the Chancellor's Office, or we can solve it by reworking language of these statutes and regulations. Dr. Mackersie reiterated that she is still confused as she has been with her program since 2003 and they do not have a problem getting the clinical training completed. Dr. Raggio thanked Dr. Mackersie for her comment.

Dr. Chrstine Kirsh, Director of Clinical Education for San Diego State University, she stated that the clinical practicum experiences that the students obtain prior to their RPE are obtained at sites where there is close supervision by the clinical directors of the programs, and that she has more scrutiny and input into those pre-RPE experiences than she does when students go off for their RPE. She stated that there is a lot of oversight of those experiences in their 2nd or 3rd year, and that they are following best practices and receiving 100 percent supervision, so she believes that these hours should count. Dr. Kirsh stated that she can understand the reasoning behind wanting to eliminate the 12-month requirement for an externship, she would hope that there would be a minimum month requirement because she doesn't want to see students trying to get out of that externship early by working many hours in the beginning and finishing the experience sooner than nine (9) or 10 months because time on task is really important and just doing things over a period of time is very valuable. She stated that she wouldn't want the experience to be too short on the other hand. Dr. Kirsh also stated that in whether to count shift hours and all of the experiences that Audiologists do during the course of a day are allowed by professional associations for tasks that an Audiologist would do during the typical course of a day, and she believes that if a student was counting too many of those hours and not enough patient contact, the program would have a difficult time proving that they had met all of the standards that they needed to meet. She stated that they would not meet the standards if they were not doing enough patient care hours. Dr. Raggio thanked Dr. Kirsh for her comments.

Dr. Yugandhar Ramakrishna, Assistant Professor at California State University Northridge, extended his support to Rupa in regards to the 12-month requirement, considering the impact on international students. He stated that these visa restrictions called curriculum practical training that restricts them to less than 12 months, so they cannot cross beyond the 12 months and if they do they need to leave the United States. Dr. Ramakrishna stated that for him personally, fortunately he didn't have a 12-month requirement but instead an 1,800-hour requirement. He also extended his support to having a requirement for AUD students having a minimum amount of time across all specialties and with different patient populations. Dr. Ramakrishna was thanked for his comments.

Dr. Raggio stated that we learned a lot today and are on the home stretch with this. She then requested that the Board delegate this to the Audiology Practice Committee for further discussion and sharpening of this language to come back to the Board with possible recommendations for how to make these statutory and regulatory changes. Ms. Chang agreed that was a good idea. Mr. Sanchez and Mr. Paine clarified that Dr. Raggio can delegate this to the Committee without a vote. Dr. Raggio then delegated this item to the Audiology Practice Committee to bring back recommendations at the next Board Meeting, after having a separate Committee meeting in the interim. Ms. Burns clarified that this could be a standalone Committee Meeting held via WebEx with a moderator and all interested stakeholders would be notified of the meeting. Mr. Paine clarified whether the Committee would be requesting a meeting, and Ms. Burns confirmed that under Agenda Item 12 they could request a standalone meeting.

The Board then broke took a 15-minute break for lunch at 12:45 pm. Upon returning from lunch, Dr. Raggio ensured all Board Members and executive staff were present.

8. Update on Impacts of the Centers for Medicare and Medicaid Services' (CMS) Merit-based Incentive Payment System (MIPS) Design on Audiologists

Dr. Raggio then provided a summary of the CMS MIPS program and its requirements due to an inquiry the Board received on the program and the requirement for participating in this program. As part of these requirements, there are some required screenings of patients for depression and vision and blood pressure test related to fall risk and Dr. Raggio suggested that these are items that the Board may need to discuss. Dr. Raggio explained that there are some requirements that Audiologists should be able to do within their scope of practice, but there are other activities that are questionable. She also clarified that the American Academy of Audiology (AAA) noted that the program also allows for those activities outside of the Audiologists scope of practice, that alternative activities can be undertaken that would allow for appropriate participation in the MIPS program, e.g. interviews, questionnaires.

Dr. Raggio then asked if any other Board Members participate in the MIPS program. Dr. Cooper responded that she does not participate in the MIPS program.

Dr. Raggio stated that she felt that the Board should address this concern from the audiology community since in the blood pressure screening there are a lot of metrics involved in this that are way beyond what Audiologists should be doing and you cannot just use a questionnaire and instead use a referral. She stated that she would like the Audiology Practice Committee to discuss this to create a response that the Board could send out when these kinds of inquiries come in.

Ms. Kaiser stated that unless there is a standardized way of collecting this data in questionnaires, she would be concerned about being held responsible for whether she asked the questions in the right way in areas that are outside of her scope of practice. Dr. Raggio stated that she learned from AAA that there are already standardized metrics and questionnaires that are acceptable to these organizations and acceptable to CMS, but that they are still working on this themselves and we all need to do a lot more investigating.

Dr. Raggio then asked for public comment on the agenda item, no public comment was received.

Dr. Raggio then referred this topic to be discussed at the Audiology Practice Committee to do a little more investigating and develop a statement that we could put on our website.

Dr. Raggio asked if the inquirer had already been responded to by staff and Mr. Sanchez stated he would have to check with staff on that. Mr. Sanchez noted that staff try their best to answer these types of questions regarding scope of practice and legal parameters, but sometimes they do require subject matter expertise, which is why we have our practice committees in hearing aid dispensing, speech-language pathology and audiology. He encouraged these types of discussions so that the Board can give guidance to staff. Dr. Raggio stated that this was particularly complex and fed into an earlier concern the Board had with Audiologists doing any kind of psychological testing, which is fodder for another meeting.

9. Update Regarding Reinstatement of Medi-Cal Optional Benefits and Hearing Aid Coverage

Dr. Raggio then introduced the agenda item and Mr. Nick Brokaw of Sacramento Advocates, on behalf of the California Academy of Audiology, who provided an update on the reinstatement of Medi-Cal optional benefits and coverage of pediatric hearing aids. Mr. Brokaw provided a summary of the changes to the Governor's Budget from January to the May Revision due to reduced revenue as a result of the pandemic and associated lockdowns, and how the normal California State Budget Process was truncated due to the pandemic. Mr. Brokaw confirmed that despite budgetary cuts to health care, advocacy by the Board and professional associations got the Legislature to reject proposed cuts and ensured that the recently agreed upon budget deal included funding for optional Medi-Cal benefits for audiology and speech therapy services among other optional benefits. He stated that with the current economic uncertainties there still could be cuts later in the year.

Dr. Raggio clarified what an optional benefit was, such as if a patient came in for a hearing aid, they could do a hearing aid evaluation and counsel them about their hearing loss and choices and they could bill for those services. She clarified that these were the types of services that were not covered after prior cuts, so they had to provide them to patients but would not be reimbursed for the services.

Karen Chang asked what the optional benefit for pediatric hearing aid coverage would be. Mr. Brokaw was not able to speak specifically to that question, as the budget just funded the categories of optional benefits.

Amnon Shalev wanted to clarify that hearing aid coverage generally was never on the budget cutting board. Mr. Brokaw clarified that there were different options offered in the hearing aid space, the only discussion around pediatric hearing aids specifically was part of a bill last year to create a pediatric hearing aid program that was subsumed by a compromise deal into the Governor's January Budget, which then was on the chopping block in the May Revise. But in the final budget deal that program was provided funding so that the program can be established moving forward. Adult hearing aids were never part of that discussion or on the chopping block.

Holly Kaiser asked if there is a place where she could look up more examples of optional benefits in speech and audiology. Dr. Raggio stated that she has to Google it as the manual for Medi-Cal is monstrous. Mr. Brokaw noted that the Department of Health Care Services has information and resources on their website.

Dr. Raggio then asked for public comment on the agenda item, no public comment was received.

Dr. Raggio and Mr. Sanchez thanked Mr. Brokaw for providing the Board with the critical update.

10. Legislative Report: Update, Review, and Possible Action on Proposed Legislation:

Ms. Burns provided an update on the legislative session thus far and on upcoming legislative deadlines. Ms. Burns noted that many bills that were on prior agendas were left off of this meetings agenda as they had died along the way or gut and amended to other topics. Ms. Burns then provided a summary and update on each bill prior to the Board discussing any particular bill.

a. Board-Specific Legislation

- **AB 2520 (Chiu) Access to medical records**

Ms. Burns provided an overview of the bill's proposed requirements and where it is at in the legislative process. Ms. Burns then stated that staff recommended the Board adopt a Support position on the bill as providing patient access to their own medical records enhances consumer protection.

- **AB 2648 (Holden) Speech language pathologists**

Ms. Burns stated that this bill is now dead and no longer moving through the legislative process. She then provided an overview of the bill's proposed requirements and the concerns the Board had with the bill including broad language about the location being based on the patient's medical needs and questions about emergency medical procedures for patients. So before the bill failed deadlines, the author and various parties were working on the consumer protection aspects of the bill and how many procedures would need to be done before the general authorization of a physician could be provided.

- b. DCA-Wide Legislation**

- **AB 613 (Low) Professions and vocations: regulatory fees**

Ms. Burns provided an overview of the bill's proposed requirements and that the bill failed deadlines and will not be moving forward this session.

- **AB 1263 (Low) Contracts: consumer services: consumer complaints**

Ms. Burns provided an overview of the bill's proposed requirements and where it was at in the legislative process at that time.

- **AB 1616 (Low) Department of Consumer Affairs: boards: expunged convictions**

Ms. Burns provided an overview of the bill's proposed requirements and where it was at in the legislative process at that time.

- **AB 2028 (Aguiar-Curry) State agencies: meetings**

Ms. Burns provided an overview of the bill's proposed requirements and where it was at in the legislative process. Ms. Burns then detailed how this bill could impact the Board's ability to discuss and take action on meeting agenda items and materials if the posting requirements were not met, and how it would make the Board unable to respond to at-meeting public questions with updated materials, which has occurred at prior Board Meetings. Because the bill could significantly limit the Board's ability to discuss and take actions because of missing some artificial deadline, even though we provide the information to the public as soon as it is available, hampers what the Board is able to do and take action on. Ms. Burns stated for these reasons staff is recommending the Board adopt an Oppose position on this bill.

- **AB 2113 (Low) Refugees, asylees, and immigrants: professional licensing**

Ms. Burns provided an overview of the bill's proposed requirements and where it was at in the legislative process at that time.

- **AB 2549 (Salas) Department of Consumer Affairs: temporary licenses**

Ms. Burns provided an overview of the bill's proposed requirements and where it was at in the legislative process at that time.

- **AB 3045 (Gray) Department of Consumer Affairs: boards: veterans: military spouses: licenses**

Ms. Burns provided an overview of the bill's proposed requirements and where it was at in the legislative process at that time.

- **SB 878 (Jones) Department of Consumer Affairs Licensing: applications: wait times**

Ms. Burns provided an overview of the bill's proposed requirements and where it was at in the legislative process at that time.

- **SB 1168 (Morrell) State agencies: licensing services**

Ms. Burns provided an overview of the bill's proposed requirements and that the bill failed deadlines and will not be moving forward this session.

Ms. Burns then asked the Board if they would like to discuss AB 2520 (Chui) and the staff recommendation of a Support position. Dr. Raggio then asked the Board if they had any comments on the bills discussed or the two recommended positions.

Amnon Shalev asked about AB 2113 and why should the department expedite processing of these applications over any other category of applicants such as low-income, minority, or any other American Citizen. Ms. Burns stated that she does not know why Assembly Member Low wanted to do this but stated that usually with other similar bills it was because they were already licensed in their home country and are now here. Mr. Shalev asked for this bill if they have the license in their home country. Ms. Burns stated she would have to check the bill language quickly and get right back to him on that.

Dr. Raggio then asked Mr. Sanchez whether the bills that failed deadlines were placeholder bills. Mr. Sanchez stated that it probably varies, Ms. Burns clarified that in this group of bills those that died were not spot bills and had specific language before they failed the deadline.

Ms. Burns then clarified for Mr. Shalev that unlike prior bills, this bill did not require the individual to have a license in their home country, so this bill is broader.

Mr. Shalev then asked how the Board was going to vote on these bills and whether they will be done individually. Dr. Raggio agreed and thought since there is potential dissent on some of them then maybe we should go one by one. Mr. Sanchez stated that it was his understanding that the Board only needs to vote on those bills that the Board is going to take a position on. Mr. Paine confirmed that the Board can make individual motions for each individual bill that the Board wants to take a position on or you can make one motion for all the bills the Board wants to take positions on, but if you are going to get different votes he would recommend making them separate motions. Mr. Sanchez encouraged the Board to first take up the bills that have a staff recommendation. Dr. Raggio asked if there were any dissenting opinions on taking up a vote first for AB 2520 and AB 2028. No dissenting opinions were given.

Motion: Shalev; Second: Kaiser.

Motion to Support AB 2520 and Oppose AB 2028.

Ms. Chang asked if there could be a separate motion regarding AB 2113. Ms. Burns clarified that the current motion is only regarding accepting Board staff's recommended positions to support AB 2520 on access to patient medical records and oppose AB 2028 on Board Meeting materials. She stated that this motion does not include a position on AB 2113 and after this motion the Board could discuss the other bills.

Dr. Raggio then asked for public comment on the motion, no public comment was received.

Dr. Raggio then called roll for the vote. Motioned passed 6-0.

Dr. Raggio then asked whether Ms. Chang wanted to discuss another bill, Ms. Chang confirmed that she did not.

11. Legislative Items for Future Meeting

Dr. Raggio provided a summary of the agenda item. Ms. Burns stated that the current two items that the Board has under consideration for future meetings are a legislative proposal on locked hearing aids that staff have been working on with Dr. Raggio and Mr. Borges and will bring to the Fall Board Meeting, and a legislative proposal on changing the Audiology licensure requirements that will be heard at the Audiology Practice Committee and then final recommendations presented at the Fall Board Meeting. Ms. Burns stated that there were no bills that have suddenly come up needing the Board's attention that were not able to be agendized. She also stated that professional associations can make the Board aware of any legislative proposals that they are working on that the Board could discuss at a future meeting as well.

Dr. Raggio then asked for public comment on the agenda item, no public comment was received.

12. Future Agenda Items and Potential Dates for Standalone Committee Meetings

Dr. Raggio then asked if Board staff would be reaching out to schedule separate standalone meetings for practice committees. Mr. Sanchez confirmed that staff would be reaching out to

members of the Audiology Practice Committee to schedule that meeting and will be looking at the work of the other practice committees to see if they need to meet and will inform the members if needed.

13. Future Agenda Items and Potential Dates for Board Meetings

Dr. Raggio asked whether there are any future agenda items for discussion that Board Members would like to add for future Board Meetings. Mr. Sanchez asked whether Ms. Burns had any items that were tabled at this meeting that should be placed on the agenda for the next Board Meeting. Ms. Burns confirmed that the future agenda should include the two legislative proposals and updates on the AB 2138 regulation package, unless the Board determines some of the COVID-19 related waivers should become permanent. Mr. Sanchez clarified that Ms. Burns meant addressing the situations the waivers have temporarily fixed by codifying those changes in law. Ms. Burns confirmed that and gave the example that if the Board wanted to make full telesupervision a permanent option that is something to consider for the future.

Dr. Raggio then asked for public comment on future agenda items, no public comment was received.

Dr. Raggio asked whether Mr. Sanchez wanted to offer potential future meeting dates. Mr. Sanchez deferred to Ms. Burns to discuss future meeting dates, Ms. Burns mentioned potentially having a late October meeting but that she will send out a poll for potential meeting dates.

Closed Session

14. Pursuant to Government Code Section 11126(c)(3), the Board Will Meet in Closed Session to Deliberate on Disciplinary Matters, Including Proposed Decisions, Stipulated Decisions, Defaults, Petitions for Reductions in Penalty.

The Board went into Closed Session at 2:16 pm and notified the public that the Board would not be going back into open session to adjourn the meeting.

15. Adjournment

The meeting was adjourned at 2:57 pm.



MEMORANDUM

DATE	April 21, 2021
TO	Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board
FROM	Heather Olivares, Legislation/Regulation Analyst
SUBJECT	Agenda Item 8: Review and Possible Approval of the February 5, 2021 Board Meeting Minutes

Background

Attached is a draft of the meeting minutes from the February 5, 2021 Board Teleconference Meeting. Please review and identify any necessary changes.

Action Requested

Discuss whether there are necessary corrections or additional information needed. If not, make a motion to approve the February 5, 2021 Board Meeting minutes.

Attachment: February 2021 Board Meeting Minutes



BOARD MEETING MINUTES – DRAFT
Teleconference Meeting
February 5, 2021

For the sake of clarity, the meeting minutes are organized in numerical order to reflect their original order on the agenda; however, issues were taken out of order during the meeting.

1. Call to Order / Roll Call / Establishment of Quorum

Dr. Marcia Raggio, Board Chair, called the Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board meeting to order at 9:11 a.m. Dr. Raggio called roll; six members of the Board were present and thus a quorum was established.

Board Members Present

Marcia Raggio, AuD, Board Chair
Holly Kaiser, SLP, Vice Chair
Tod Borges, HAD, Board Member
Karen Chang, Public Board Member
Dee Parker, SLP, Board Member
Debbie Snow, Public Board Member

Staff Present

Paul Sanchez, Executive Officer
Cherise Burns, Assistant Executive Officer
Anthony Pane, DCA Legal Counsel
Karen Halbo, DCA Regulations Counsel
Tenisha Ashford, Enforcement Coordinator
Lisa Snelling, Licensing Coordinator
Heather Olivares, Legislation/Regulation Analyst

Guests Present

Carol Mackersie
Shellie Bader
Dan Newmark
Bryce Docherty
Leigh Kjeldsen
Jody Winzelberg
Maria Grijalva
Evelyn Merritt
Cherysse Lanns
Ryan Perez
Erik Breitling

Alexis Ronney
Whitney Mast
Nick Brokaw
Christy Kirsch
Lindsay Cockburn
Amit Gosalia
Sally Pesco
Carolyn Bower
Melanie Gilbert
Bryce Penney
Linda Pippert

2. Public Comment for Items not on the Agenda

Dr. Amit Gosalia stated that cognitive screening is not explicitly in the scope of practice for audiologists. Dr. Gosalia requested the Board issue a statement that audiologists can perform cognitive screenings for referral purposes and work to add cognitive screenings to the scope of practice for audiology.

3. Review and Possible Approval of the November 20, 2020 Board Teleconference Meeting Minutes

Holly Kaiser suggested changes to the minutes regarding public comment received from Michele Linares regarding continuing education credits for the CSHA virtual convention.

M/S/C Borges/Chang

Motion to approve the November 20, 2020 Board meeting minutes as amended. The motion carried 6-0.

4. Board Strategic Plan Approval

Paul Sanchez provided an overview of the Strategic Plan and stated the next step is for Board staff to work on developing an Action Plan. Mr. Sanchez stated the Board will need to approve the Strategic Plan as is or with suggested changes.

The Board made a change to goal 5.1 regarding program administration in order to improve clarity as follows: Utilize technology to develop methods to improve and increase responsiveness to telephone inquiries from stakeholders to improve their access to the information they need.

M/S/C Snow/Borges

Motion to approve the Strategic Plan as amended. The motion carried 6-0.

5. Board Chair's Report

2021 Board Meeting Calendar

Dr. Marcia Raggio provided an overview of the upcoming Board Meeting dates and stated they are all scheduled to be teleconferences at this point.

Board Committee Updates

Dr. Raggio reported that some of the Board's Committees have vacant positions. Dr. Raggio asked for Board member's interest in serving on the Board's Committees. Dr. Raggio reported the Board will also be forming a Sunset Review Ad Hoc Committee, Enforcement Ad Hoc Committee, and Legislation Ad Hoc Committee.

6. Executive Officer's Report

Administration Update

Paul Sanchez reported the Board is moving forward with the Business Modernization Project which will allow applicants and licensees to complete online transactions. Cherise Burns also reported that the Business Modernization Project will allow consumers to file complaints online and interact with Board staff.

Dr. Marcia Raggio inquired about the Board's costs for the Business Modernization Project. Mr. Sanchez stated Board staff could get that information. Cherise Burns stated licensing fees will be used to pay for this project and there will be no additional fees to pay for it.

Mr. Sanchez reported the Board's office will be relocating to a more adequate location. The new location will meet current requirements for social distancing.

Mr. Sanchez also reported the Board will start working on the Sunset Review report soon.

Mr. Sanchez reported the Board is recruiting for an Associate Governmental Program Analyst position to assist with legislation and regulations.

Budget Report

Paul Sanchez provided an overview of the expenditure report. Mr. Sanchez stated the Board's expenditures have increased for enforcement cases referred to the Attorney General's Office.

Regulations Report

Paul Sanchez provided an overview of the regulations report that shows the regulations the Board is currently working on and their status.

Dr. Marcia Raggio requested Board staff to provide an overview of the rulemaking process. Cherise Burns provided a brief overview of the process including the Board discussing desired revisions to the regulations, Board approval of the regulatory text, Board staff developing regulatory documents such as the Initial Statement of Reasons, an internal DCA and Agency review process, the official rulemaking process starting with the initial public comment period, responding to public comments, developing the Final Statement of Reasons, and completing the Office of Administrative Law review process.

Holly Kaiser inquired if there is a flow chart available to provide an overview of the regulatory process. Cherise Burns stated she has a flow chart that can be shared and posted on the Board's website.

Licensing Report

Paul Sanchez provided an overview of the licensing cycle times. Mr. Sanchez stated the 6-week cycle time is due to unexpected absences and challenges due to working remotely.

Practical Examination Report

Paul Sanchez provided an overview of the exam results from the practical exams held in November 2020. Mr. Sanchez stated the Board is experiencing challenges recruiting exam proctors.

Tod Borges inquired whether participation as an exam proctor will count as live continuing education hours. Cherise Burns stated that after a review of the regulations, the Board determined that exam proctors for the hearing aid dispensing practical exam will receive live continuing education hours. Mr. Borges suggested highlighting on the Board's website that live continuing education hours are available for proctoring the hearing aid dispensing practical exam.

Enforcement Report

Paul Sanchez provided an overview of the disciplinary actions during the past 12 months.

7. DCA Update – DCA Board and Bureau Relations

Carrie Holmes, DCA Deputy Director for Board and Bureau Relations provided a DCA update including the reopening of DCA offices with safety measures following the closures due to COVID-19, the Board Member vacancies, form 700 filings, and the mandatory sexual harassment training.

8. Discussion and Possible Action Regarding Audiology Examination Requirement: Consideration of The New Praxis Audiology Examination and Its Passing Score Recommendation (As Stated in Title 16, California Code of Regulations (CCR) section 1399.152.3)

Dr. Marcia Raggio stated Educational Testing Services revised the subject test for audiology and developed home-based testing capabilities. Dr. Raggio reported the previous exam passing score is 170 and for the new exam, the recommended passing score is 162.

Holly Kaiser inquired how applicants from other states with a lower minimum exam score would be handled if the Board does not adopt the new recommended exam score. Cherise Burns stated if California requires a different minimum passing score, regardless if an applicant qualifies for licensure in another state, they would be required to meet the passing score requirements in California to obtain licensure.

Cherysse Lanns with the University of the Pacific stated that this issue directly impacts current students applying for externships and graduation. Ms. Lanns reported current students are being directed to take the older Praxis Exam; however, ASHA is only accepting the older Praxis Exam through August 31, 2021.

Melanie Gilbert inquired how different standards across the states would impact interstate compacts in the future. Cherise Burns stated the new Praxis Exam will be accepted by the Board, but the difference would be the minimum required passing score.

Holly Kaiser inquired if information is available from other states with similar licensure requirements regarding the Praxis Exam score they have adopted. Dr. Raggio stated New York has been found to be comparable to California in the past. Paul Sanchez stated the Board regularly conducts an occupational analysis to determine the validity of the exam.

Dr. Raggio referred this issue to the Audiology Practice Committee.

M/S/C Kaiser/Parker

Motion to adopt a passing score of 162 for the new Praxis Exam. The motion carried 6-0.

9. Update on Speech and Hearing Related DCA Waivers related to the COVID-19 State of Emergency

Cherise Burns provided an update on the DCA waiver requests submitted in response to the COVID-19 State of Emergency. Regarding waivers approved by DCA, Ms. Burns stated DCA is committed to extending waivers through the end of the pandemic and the Board anticipates necessary waivers will continue to be extended.

Ms. Burns reported there have been two waivers denied by DCA. Ms. Burns stated a modification of the 12-month fulltime professional experience requirement for licensure as an audiologist was denied in May 2020 because the Department does not believe that waiving pre-licensure requirements, such as experience or competency exams, at this time is in the best interests of consumer protection. Ms. Burns stated a modification of the continuing education self-study requirements was denied in December 2020 because the Department has provided a general waiver of continuing education requirements during the pandemic and believes it would be unreasonable to allow licensees to complete all continuing education requirements via self-study as this would weaken consumer protections by not requiring some training be provided by a type of classroom or lecture type training that is verified.

Ms. Burns stated the Board has the option to submit additional waiver requests as additional needs are identified. Ms. Burns stated stakeholders can also submit a waiver request directly to the Department of Consumer Affairs.

Tod Borges inquired how the approved waiver information is being disseminated to licensees. Cherise Burns stated the information is sent to the listserv of licensees that have an email address on file with the Board. Ms. Burns stated the information is also posted on the DCA website and the Board's website within the highlighted alert section. Mr. Borges suggested using the Board's website to better advertise the information.

Holly Kaiser stated the denial of the self-study continuing education waiver is a concern due to the difficulty in accessing live courses. Ms. Kaiser stated that due to the pandemic and licensees balancing work and often having children at home, licensees need flexibility to access coursework. Mr. Borges stated obtaining live continuing education hours was a concern even before COVID-19. Paul Sanchez stated this issue can be added as a future agenda item.

Melanie Gilbert suggested the Board send a postcard or letter to licensees with information on how to find waiver information on the Board's website and how to be added to the Board's email listserv. Paul Sanchez stated the Board is collecting more email addresses and will look into making changes to the website to better share the waiver information. Dr. Marcia Raggio suggested working with the professional organizations to obtain updated email lists. Paul Sanchez stated the Board is sending COVID-19 updates to the professional organizations.

10. Legislative Report: Update, Review, and Possible Action on Proposed Legislation

Heather Olivares provided an overview of the legislative calendar including upcoming legislative deadlines. Ms. Olivares provided an update on the two legislative proposals approved by the Board. Ms. Olivares reported the Board Chair and staff met with Senate Business, Professions and Economic Development Committee staff and Republican caucus policy staff to discuss the legislative proposal relative to the

Audiology Licensing Requirements and its possible inclusion in the Committee omnibus bill. Ms. Olivares reported the Board Chair and staff also met with Assemblymember Kevin Mullin's legislative director to discuss the legislative proposal relative to locked hearing aids. Ms. Olivares reported Assemblymember Mullin agreed to be the Author of this bill and his staff submitted the bill request to the Office of Legislative Counsel to meet the January 22nd deadline.

11. Legislative Items for Future Meeting

Holly Kaiser suggested addressing the issue of foreign-trained speech-language pathologists and ways to streamline the application process. Paul Sanchez suggested that Board staff provide Ms. Kaiser with an overview of the Board's criteria and process for reviewing foreign-trained application prior to determining if the issue needs to be discussed in the SLP Practice Committee or bringing the issue to the full Board.

12. Regulatory Report: Update, Review, and Possible Action on Board Regulation Packages

Heather Olivares reported the Board currently has two regulatory proposals going through the formal regulatory process. Ms. Olivares provided an update on the Speech-Language Pathology and Audiology Fee regulatory proposal and stated the proposal was submitted to Agency on December 28, 2020 and the Board is waiting for approval from Agency before the completed rulemaking package can be submitted to the Office of Administrative Law. Ms. Olivares also provided an update on the AB 2138 regulations and stated the completed rulemaking package was submitted to the Office of Administrative Law on November 18, 2020.

13. Future Agenda Items and Potential Dates for Standalone Committee Meetings

Tod Borges requested the continuing education requirements be added as a future agenda item. Dr. Marcia Raggio requested adding the scope of practice for audiologists relative to cognitive screenings be added as a future agenda item.

14. Adjournment

The meeting adjourned at 12:49 p.m.

Hand Carry Item

Agenda Item 9:
Board Chair's Report



MEMORANDUM

DATE	May 3, 2021
TO	Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board
FROM	Paul Sanchez, Executive Officer
SUBJECT	Agenda Item 10: Executive Officer Report

This report and the statistical information provided by staff is to update you on the current operations of the Board.

a) Administration Update

Board Projects

Business Modernization – The Business Modernization Project is a collaborative effort with DCA’s Organizational Improvement Office, to provide the Board with an information technology solution that will transition the Board from its existing legacy databases to a new system that will provide access for licensees and applicants to apply for licensure and complete online transactions. The system will also allow consumers to submit complaints directly to the Board through the online portal and improve the Board’s ability to track enforcement investigations and actions.

During the month of April, the Board completed its market research activities and received approval of the California Department of Technology’s Project Approval Lifecycle (PAL) Stage 2 Alternative Analysis documents. The Board has now completed Stages 1 (Business Analysis) and 2 (Alternative Analysis) of the PAL.

The Board has begun Stage 3 (Solution Development) of the process and will continue to complete the last two required PAL Stages with a target completion date of October 2021.

Board Office Relocation – During the month of April, the Board moved to its new location at 1601 Response Road, Suite 260, Sacramento, California. The new location provides the Board with improved facilities to conduct its business, including HAD practical examination room, additional file and storage space, and adequate space for social distancing.

Administration/Personnel/Staffing

COVID-19 Plan and Response – As reported at February meeting, the Board office reopened to the public on February 1, 2021. The Board’s leadership continues to promote and implement State health and safety guidelines. The Board office is staffed on a rotational basis with most employees teleworking at least part time.

Staffing – The Board office currently has one vacancy for a legislation/regulations analyst in administration.

b) Budget Report

Included in your Board materials is the most recent Expenditure Projection Report. This report reflects fiscal activity through March 31, 2021 and is based on data provided by DCA’s Budgets Office. Based on this report, we project that the Board is on course to expend most of its budget with an estimated reversion of \$27,000. We will continue to monitor the budget closely and work with DCA Budgets to have more information on final projections and reversion amounts as we get closer to the end of the fiscal year.

c) Regulations Report

Below is a table with the Board’s pending rulemaking files that are either in the DCA Initial Review Process or in the Official Rulemaking Process with the Office of Administrative Law.

Rulemaking File	Final Filing Date	Status	Comments
AB 2138: Criminal Conviction Substantial Relationship and Rehabilitation Criteria	3/5/2021	11/18/2020 – Submitted to OAL 10/12/2020 – Submitted for Agency review 10/8/2020 – Submitted for DCA review 7/6/2020 – 15-day comment period 6/30/2020 – Board approved modified text 3/6/2020 – Initial 45-day comment period 12/31/2019 – Submitted for Agency review 7/30/2019 – Submitted for DCA review 4/11/2019 – Board approved language	OAL has an extended review period due to COVID-19
Speech-Language Pathology and Audiology Fees	8/6/2021	4/7/2021 – Submitted to OAL 12/28/2020 – Submitted for Agency review 12/18/2020 – Submitted for DCA review 8/7/2020 – Initial 45-day comment period 6/1/2020 – Submitted for Agency review 1/23/2020 – Submitted for DCA review 7/19/2019 – Board approved language	OAL has an extended review period due to COVID-19

Rulemaking File	Final Filing Date	Status	Comments
Required Professional Experience Direct Supervision Requirements and Remote or Tele Supervision		2/20/2020 – Board approved language	Additional changes are needed to the regulatory text
Speech-Language Pathology Supervised Clinical Experience, Required Professional Experience Speech-Language Pathology Assistant Training Programs, Speech-Language Pathology Assistant Requirements and Qualifications for Registrations		2/20/2020 – Board approved language	Board staff to draft regulatory documents including Notice and ISOR

d) Licensing Report

Licensing Cycle Times – The chart below provides a snapshot of Board’s current and past licensing cycle times. Due to unplanned leaves of absence and state employee furloughs, licensing application processing timeframes have increased. Board staff have worked overtime hours to prevent a backlog in licensing.

Licensing Cycle Times	2/1/20	6/1/20	10/1/20	2/1/21	Current
SLP and Audiologists Complete Licensing Applications	2 weeks	3 weeks	5 weeks	6 weeks	5 weeks
Review and Process SLP and Audiologist Supporting Licensing Documents	3 weeks	1 weeks	10 weeks	1 weeks	2-3 weeks
Review and Process RPE Applicant's Verification Forms for Full Licensure	3 weeks	2 weeks	2 weeks	5 weeks	4-5 weeks
Hearing Aid Dispensers Applications	Current	Current	Current	Current	Current

e) Practical Examination Report

Practical Examinations were held on March 12, 13, and 20, 2021 and on April 16 and 17, 2021. The table below contains results for the HAD practical examinations held in March 2021. Results for April examinations are pending and will be reported at the next Board meeting. The next practical examinations will be held on July 23 and 24, 2021.

HAD Practical Examination Results for March 12, 13 & 20					
Candidate Type	Number of Candidates	Passed	%	Failed	%
Applicants with Supervision (Temporary Trainee License)					
HA	30	10	33%	20	67%
AU	1			1	100%
RPE					
Aide	1	1	100%		
Applicants Licensed in Another State (Temporary License)					
HA					
AU	2	1	50%	1	50%
Applicants without Supervision					
HA	10	8	80%	2	20%
AU	7	5	71%	2	29%
RPE	1	1	100%		
Total Number of Candidates					
	52	26	50%	26	50%

f) Enforcement Report

The Board received 30 complaints and subsequent arrest notifications in the third quarter of the 2020-21 fiscal year. During this same period the Board issued one (1) citation and fine for unlicensed activity and not cooperating with a Board investigation. There are currently 10 formal discipline cases pending with the Attorney General's Office. The Board is currently monitoring 19 probationers of which three (3) probationers require drug or alcohol testing and six (6) are in a tolled status.

The following disciplinary actions have been adopted by the Board during the past 12 months:

Name	License No.	License Type	Case No.	Effective Date	Action Taken
Blanchard, Miriam	SP 8627	Speech-Language Pathologist	1I-2019-017	March 20, 2021	Revocation of License
White, Christine Elizabeth	SP 21236	Speech-Language Pathologist	1I-2019-118	January 31, 2021	Voluntary Surrender of License
Mayhew, Debra Lynn	HA 3178	Hearing Aid Dispenser	1C-2016-095	January 30, 2021	Revocation Stayed, Five Years Probation with Terms and Conditions
Handy, JoQueta Hayes	SP 10090	Speech-Language Pathologist	1I-2017-118	December 9, 2020	Voluntary Surrender of License
White, Christine Elizabeth	SP 21236	Speech-Language Pathologist	1I-2019-118	October 19, 2020	Interim Suspension Order Issued
Turner, Sharon	SP 9478	Speech-Language Pathologist	1I-2019-092	August 8, 2020	Voluntary Surrender of License
Hopkins, Dawn Marie	SP 12177	Speech-Language Pathologist	1I-2015-063	May 15, 2020	Voluntary Surrender of License

Name	License No.	License Type	Case No.	Effective Date	Action Taken
Romero, Florence	SPA 1242	Speech- Language Pathology Assistant	1I-2019- 163	April 30, 2020	Revocation: Default Decision and Order
Geraci- Staub, Julianne	HA 7587	Hearing Aid Dispenser	1C-2019- 76	March 7, 2020	Revocation: Default Decision and Order

Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board - 0376
FY 2020-21 BUDGET REPORT
 May 13-14, 2021 Board Meeting

FM 9

OBJECT DESCRIPTION	FY 2016-17	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21				
	ACTUAL EXPENDITURES (MONTH 13)	ACTUAL EXPENDITURES (MONTH 13)	ACTUAL EXPENDITURES (MONTH 13)	ACTUAL EXPENDITURES (Prelim FM13)	Governor's BUDGET 2020-21	CURRENT YEAR EXPENDITURES 03.31.2021	PERCENT SPENT	PROJECTIONS TO YEAR END	UNENCUMBERED BALANCE
PERSONNEL SERVICES									
Salary & Wages (Staff)	463,473	478,930	525,967	601,545	611,000	450,621	74%	604,389	6,611
Statutory Exempt (EO)	87,141	91,296	94,944	98,268	82,000	68,978	84%	91,797	(9,797)
Temp Help	4,851	8,446	224	64,729	1,000	20,442	2044%	38,020	(37,020)
Board Member Per Diem	5,200	5,100	4,700	4,600	6,000	1,100	0%	1,467	4,533
Overtime/Flex Elect	17,204	19,003	36,663	55,901	5,000	49,941	999%	60,000	(55,000)
Staff Benefits	268,732	309,624	332,488	434,247	401,000	313,535	78%	423,500	(22,500)
TOTALS, PERSONNEL SVC	846,601	912,400	994,986	1,259,290	1,106,000	904,617	82%	1,219,173	(113,173)
OPERATING EXPENSE AND EQUIPMENT									
General Expense	53,024	42,122	34,923	48,858	81,000	33,329	41%	47,823	33,177
Printing	7,410	9,772	10,587	11,227	28,000	442	2%	19,882	8,118
Communication	5,297	6,228	5,986	7,072	21,000	4,589	22%	6,118	14,882
Postage	22,650	25,482	19,259	7,155	25,000	1,725	7%	7,511	17,489
Insurance	0	20	4,040	25	0	3,848	0%	5,130	(5,130)
Travel In State	36,347	15,163	5,210	13,115	30,000	6,362	21%	8,482	21,518
Training	450	0	0	7,088	9,000	0	0%	0	9,000
Facilities Operations	64,118	73,447	86,769	101,321	99,000	47,967	48%	103,083	(4,083)
C & P Services - Interdept.	0	38	49	52	24,000	70	0%	93	23,907
Attorney General	144,505	133,121	112,665	156,882	343,000	254,438	74%	346,551	(3,551)
Office Admin. Hearings	35,406	45,135	37,170	8,025	72,000	79,608	111%	106,147	(34,147)
C & P Services - External	104,386	82,277	71,696	73,529	98,000	42,050	43%	75,763	22,237
DCA Pro Rata	317,595	339,000	392,000	367,221	354,000	282,000	80%	354,000	0
DOI - Investigations	139,190	153,000	200,000	200,908	36,000	30,750	85%	36,000	0
Interagency Services	0	0	0	0	29,000	1,506	5%	2,009	26,991
IA w/ OPES	117,441	0	500	67,039	60,000	5,735	10%	16,254	43,746
Consolidated Data Center	484	3,258	195	4,971	17,000	443	3%	4,000	13,000
Information Technology	2,214	1,240	2,013	431	29,000	3,485	12%	54,615	(25,615)
Equipment	4,400	3,220	0	15,400	64,000	24,035	0%	85,706	(21,706)
Other Items of Expense			0	113,356	0	0	0%	0	0
Other (Vehicle Operations)			0		0	0	0%	0	0
TOTALS, OE&E	1,054,917	1,032,524	1,233,062	1,203,675	1,419,000	822,382	58%	1,279,169	139,831
TOTAL EXPENSE	1,901,518	1,944,924	2,228,048	2,462,965	2,525,000	1,727,000	68%	2,498,342	26,658
Sched. Reimb. - Fingerprints	(31,000)	(31,000)	(33,143)	(31,000)	(31,000)		0%	(31,000)	0
Sched. Reimb. - Other	(2,000)	(2,000)	(3,055)	(2,000)	(2,000)		0%	(2,000)	0
Unsched. Reimb. - Other	(30,846)	0	(17,398)		0	0	0%	0	0
NET APPROPRIATION	1,837,672	1,911,924	2,174,452	2,440,000	2,492,000	980,083	39%	2,302,121	26,658
SURPLUS/(DEFICIT):									1.06%

Speech-Language Pathology & Audiology & Hearing Aid Dispensers Board

LICENSES ISSUED	FY14/15	FY15/16	FY16/17	FY17/18	FY 18/19	FY 19/20	FY 20/21
							QTR 3
AU	89	48	53	77	63	63	63
DAU	UA	26	24	30	35	31	17
AUT	0	0	0	2	4	3	1
SLP	1,143	1,352	1,457	1,482	1,446	1,444	1,241
SPT	0	0	0	0	0	0	0
SLPA	550	606	501	558	602	615	388
RPE	836	834	897	945	977	1,059	914
AIDE	48	44	44	33	32	44	22
CPD	17	22	21	20	15	5	11
HAD Permanent	92	140	120	137	135	95	31
HAD Trainee	145	180	152	169	156	116	72
HAD Licensed in Another State	9	16	16	20	17	12	10
HAD Branch	426	407	315	341	333	312	175
TOTAL LICENSES ISSUED	3,355	3,675	3,600	3,814	3,815	3,799	2,945

LICENSEE POPULATION	FY14/15	FY15/16	FY16/17	FY17/18	FY 18/19	FY 19/20	FY 20/21
							*QTR 3
AU	612	556	698	720	831	837	842
DAU	988	1,045	1,211	1,246	1,334	1,384	1,374
<i>Both License Types</i>	<i>1,600</i>	<i>1,601</i>	<i>1,909</i>	<i>1,966</i>	<i>2,165</i>	<i>2,221</i>	<i>2,216</i>
AUT	0	0	0	2	4	7	8
SLP	13,967	14,860	18,024	19,161	21,374	22,527	23,216
SPT	0	0	0	0	0	0	0
SLPA	2,343	2,795	3,752	4,118	4,822	5,297	5,496
RPE	802	806	1,174	1,232	1,364	1,595	1,696
AIDE	124	133	235	216	245	273	290
HAD	948	996	1,179	1,266	1,380	1,407	1,398
HAD Trainees	160	158	238	204	214	237	253
HAD Licensed in Another State	7	18	18	28	31	42	49
HAD Branch Office	821	963	1,409	1,297	1,347	1,401	1,437
TOTAL LICENSEES	20,772	22,330	27,938	29,490	32,946	35,007	36,059

Speech-Language Pathology & Audiology & Hearing Aid Dispensers Board
Enforcement Report

	FISCAL YEAR 2016 - 2017		FISCAL YEAR 2017 - 2018		FISCAL YEAR 2018 - 2019		FISCAL YEAR 2019 - 2020		Quarter 3 2020 - 2021	
COMPLAINTS AND CONVICTIONS	HAD	SP/AU	HAD	SP/AU	HAD	SP/AU	HAD	SP/AU	HAD	SP/AU
Complaints Received	75	59	154	157	68	78	68	83	28	42
Convictions Received	15	84	24	101	31	90	12	91	3	33
Average Days to Intake	3	2	2	2	1	1	1	1	1	3

	FISCAL YEAR 2016 - 2017		FISCAL YEAR 2017 - 2018		FISCAL YEAR 2018 - 2019		FISCAL YEAR 2019 - 2020		Quarter 3 2020 - 2021	
INVESTIGATIONS Desk	HAD	SP/AU	HAD	SP/AU	HAD	SP/AU	HAD	SP/AU	HAD	SP/AU
Assigned	90	143	178	257	99	169	80	174	31	75
Closed	71	118	113	205	65	110	47	131	55	107
Average Days to Complete	132	91	201	73	164	137	270	216	391	370
Pending	45	39	104	89	139	142	122	169	92	135

	FISCAL YEAR 2016 - 2017		FISCAL YEAR 2017 - 2018		FISCAL YEAR 2018 - 2019		FISCAL YEAR 2019 - 2020		Quarter 3 2020 - 2021	
INVESTIGATIONS DOI	HAD	SP/AU	HAD	SP/AU	HAD	SP/AU	HAD	SP/AU	HAD	SP/AU
Assigned	11	9	10	7	2	8	5	4	0	0
Closed	5	6	8	9	7	4	2	7	2	6
Average Days to Complete	148	709	442	497	747	766	410	982	1008	756
Pending	11	12	13	10	8	14	12	13	10	6

	FISCAL YEAR 2016 - 2017		FISCAL YEAR 2017 - 2018		FISCAL YEAR 2018 - 2019		FISCAL YEAR 2019 - 2020		Quarter 3 2020 - 2021	
ALL TYPES OF INVESTIGATIONS	HAD	SP/AU	HAD	SP/AU	HAD	SP/AU	HAD	SP/AU	HAD	SP/AU
Closed Without Discipline	69	111	116	197	68	105	48	124	52	107
Cycle Time - No Discipline	125	69	210	73	212	145	282	238	367	373

	FISCAL YEAR 2016 - 2017		FISCAL YEAR 2017 - 2018		FISCAL YEAR 2018 - 2019		FISCAL YEAR 2019 - 2020		Quarter 3 2020 - 2021	
CITATIONS/CEASE & DESIST	HAD	SP/AU	HAD	SP/AU	HAD	SP/AU	HAD	SP/AU	HAD	SP/AU
Issued	8	8	9	12	5	11	6	4	2	3
Avg Days to Complete Cite	98	44	7	169	138	162	266	393	538	414
Cease & Desist Letter	1	1	2	1	1	1	0	0	1	1

Speech-Language Pathology & Audiology & Hearing Aid Dispensers Board
Enforcement Report

ATTORNEY GENERAL CASES	FISCAL YEAR 2016 - 2017		FISCAL YEAR 2017 - 2018		FISCAL YEAR 2018 - 2019		FISCAL YEAR 2019 - 2020		Quarter 3 2020 - 2021	
	HAD	SP/AU	HAD	SP/AU	HAD	SP/AU	HAD	SP/AU	HAD	SP/AU
Pending at the AG	8	6	7	11	6	12	5	13	5	5
Accusations Filed	2	3	3	2	0	4	2	7	1	1
SOI Filed	0	0	1	1	2	3	0	1	0	1
Acc Withdrawn, Dismissed, Declined	2	1	2	1	0	3	1	0	0	1
SOI Withdrawn, Dismissed, Declined	1	1	0	0	2	1	0	1	0	0
Average Days to Discipline	1260	979	780	723	745	449	0	730	1504	847

ATTORNEY GENERAL FINAL OUTCOME	FISCAL YEAR 2016 - 2017		FISCAL YEAR 2017 - 2018		FISCAL YEAR 2018 - 2019		FISCAL YEAR 2019 - 2020		Quarter 3 2020 - 2021	
	HAD	SP/AU	HAD	SP/AU	HAD	SP/AU	HAD	SP/AU	HAD	SP/AU
Probation	6	7	2	1	1	2	0	5	1	0
Surrender of License	3	1	1	2	0	0	0	0	0	3
License Denied (SOI)	0	0	0	0	0	0	2	0	0	3
Suspension & Probation	0	0	0	0	0	0	0	0	0	0
Revocation-No Stay of Order	0	2	1	0	0	0	1	2	0	1
Public Reprimand/Reproval	0	0	0	1	0	0	0	0	0	0



MEMORANDUM

DATE	May 5, 2021
TO	Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board
FROM	Paul Sanchez, Executive Officer
SUBJECT	Agenda Item 12: Overview of the Disciplinary Process – Health Quality Enforcement Section, Attorney General’s Office

Senior Assistant Attorney General Gloria Castro, and Deputy Attorney General Rose Luzon both from the Health Quality Enforcement (HQE) Section, Civil Division of the Attorney General’s (AG) Office will be presenting an overview of the disciplinary process. Ms. Castro oversees the HQE Section and Ms. Luzon is the Board’s Liaison to the HQE Section of the AG’s Office. The purpose of the overview will be to provide an overview of the disciplinary process. Our goal is to better understand the the role and responsibility of Board members and the AG’s office in the disciplinary process as it relates to the Board's licensees.

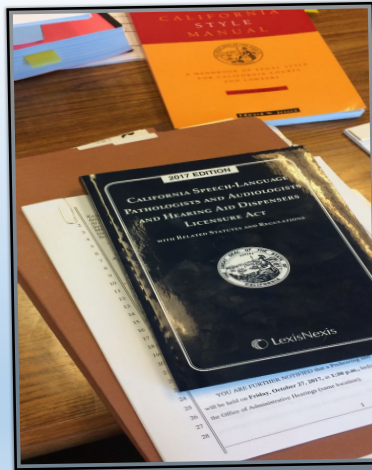
Overview of the Disciplinary Process

Presented by the
Health Quality Enforcement Section



**Business and
Professions Code, §
2530, et. seq.**

**Speech-Language
Pathologists and
Audiologists and
Hearing Aid
Dispensers Licensure
Act**



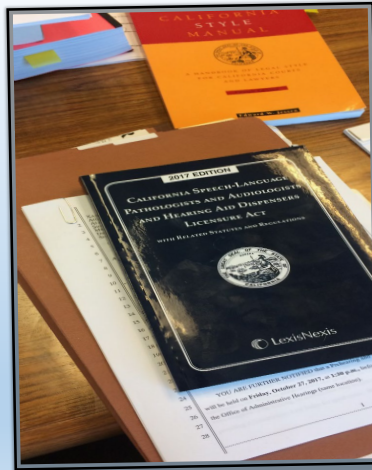
Agenda Item 12 - Attachment

Section 2531.02: Public Protection Priority

Protection of the public shall be the highest priority for the Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board in exercising its licensing, regulatory, and disciplinary functions. Whenever the protection of the public is inconsistent with other interests sought to be promoted, the protection of the public shall be paramount.

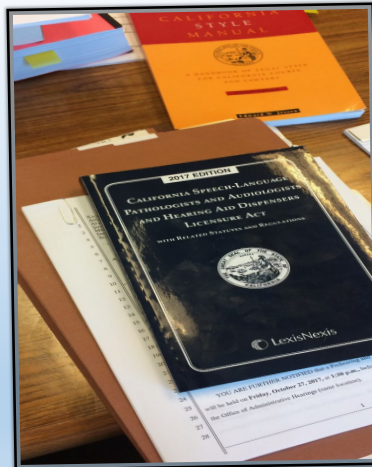


California Code of Regulations, tit. 16, Division 13.3 & Disciplinary Guidelines 1997
Hearing Aid Dispensers Regulations & Guidelines



Agenda Item 12 - Attachment

**California Code of
Regulations, tit. 16,
Division 13.4
&
Disciplinary
Guidelines 2004
Speech-Language
Pathology and Audiology
Regulations &
Guidelines**



Disciplinary Process

- **INVESTIGATION BY DCA/DOI**
- Referral to AGO for Legal Review
- Accusation
- Discovery
- Settlement or Default
- Administrative Hearing
- Decision
- Post-Decision



Investigation

- Complaint received.
- Board staff reviews complaint.
- Board staff refers case for investigation by investigator.
- Board staff retains expert to review evidence gathered and provide opinion on whether there has been unprofessional conduct.

Disciplinary Process

- Investigation by DCA/DOI
- **REFERRAL TO AGO FOR LEGAL REVIEW**
- Accusation
- Discovery
- Settlement or Default
- Administrative Hearing
- Decision
- Post-Decision





Referral to the Attorney General's Office

- Attorney General's Office, California Department of Justice.
- Deputy Attorneys General of the Health Quality Enforcement Section serve as the Board's prosecutors.

Disciplinary Process

- Investigation by DCA/DOI
- Referral to AGO for Legal Review
- **EVIDENCE REVIEW AND LEGAL ASSESSMENT**
- Accusation
- Discovery
- Settlement or Default
- Administrative Hearing
- Decision
- Post-Decision





Ettinger v. Med. Bd. (1982)



“Since it is apparent that the underlying purpose of disciplining both attorneys and physicians is protection of the public [...] the proper standard of proof in an administrative hearing to revoke or suspend a doctor’s license should be *clear and convincing proof to a reasonable certainty* and not a mere *preponderance of the evidence*.”



Ettinger v. Med. Bd. (1982)



“Generally, proof in civil cases is required by preponderance of the evidence. However, in a number of situations, a greater degree of proof, usually clear and convincing evidence, is required. [. . .]

The purpose of an administrative proceeding concerning revocation or suspension of a license is not to punish the individual; the purpose is to protect the public from dishonest, immoral, disreputable or incompetent practitioners.”



Evaluation of Evidence to Determine Recommendation for Prosecution

- Sufficient evidence to prove unprofessional conduct?
- Burden: “clear and convincing evidence to a reasonable certainty.”

Burden of Proof

Levels of Proof

Preponderance of evidence (51%)



Clear and convincing evidence (75%)



Beyond a reasonable doubt (95%)



Disciplinary Process

- Investigation by DCA/DOI
- Referral to AGO for Legal Review
- Evidence Review and Legal Assessment
- **ACCUSATION**
- Discovery
- Settlement or Default
- Administrative Hearing
- Decision
- Post-Decision



Accusation

A document that notifies the licensee (**Respondent**) of the charges that are being brought against his or her license.



Statement of Issues

A document that notifies a license applicant of the charges that are being brought against him or her to deny a license.



Accusation: Charging Licensee with Unprofessional Conduct

- DAG recommends filing of an Accusation by accepting the case for prosecution.
- DAG drafts the Accusation listing the charges that are being brought against the Respondent based on the evidence. Reviewed by SDAG.
- The Executive Officer of the Board (Complainant) reviews the Accusation. If acceptable, he signs it.
- A copy of the Accusation is sent to the Respondent and is published online (BreEZe.ca.gov).

Charging Licensee with Unprofessional Conduct (Bus. & Prof. Code, § 2533)

- Quality of Care: Gross Negligence, Repeated Negligent Acts and/or Incompetence
- Conviction of a crime
- Fraud or deceit in procurement of license
- Self-administration of controlled substance
- Excessive or dangerous use of drugs and/or alcohol
- Dishonesty or fraud

Charging Licensee with Unprofessional Conduct (Bus. & Prof. Code, § 2533)

- Endangerment to public health, welfare, and safety
- False or misleading advertising in violation of Business and Professions Code section 17500
- Violation of consumer warranties under Civil Code section 1793.02
- Violation of Board probation order or conditional license
- Unauthorized use by hearing aid dispenser of the terms “doctor,” “physician,” “clinic,” or “audiologist”
- Discipline by another state or jurisdiction

Incompetence, Gross Negligence, and Repeated Negligent Acts

Standard of Care:

The degree of care that a reasonably prudent practitioner would provide under the same or similar circumstances.



Disciplinary Process

- Investigation by DCA/DOI
- Referral to AGO for Legal Review
- Evidence Review and Legal Assessment
- Accusation
- **DISCOVERY**
- **SETTLEMENT OR DEFAULT**
- Administrative Hearing
- Decision
- Post-Decision



Disciplinary Process

- Investigation by DCA/DOI
- Referral to AGO for Legal Review
- Evidence Review and Legal Assessment
- Accusation
- Discovery
- Settlement or Default
- **ADMINISTRATIVE HEARING**
- Decision
- Post-Decision



Questions?





MEMORANDUM

DATE	May 4, 2021
TO	Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board
FROM	Cherise Burns, Assistant Executive Officer
SUBJECT	Agenda Item 13: Update on DCA Waiver Requests Submitted by the Board related to the COVID-19 State of Emergency

Background

Pursuant to the Governor's Executive Order [N-39-20](#), during the State of Emergency, the director of the Department of Consumer Affairs (DCA) may waive any statutory or regulatory requirements with respect to a professional license issued pursuant to Division 2 of the Business and Professions Code. In addition, pursuant to Executive Order [N-40-20](#), the director of DCA may waive any statutory or regulatory requirements with respect to continuing education for licenses issued pursuant to Division 3 of the Business and Professions Code.

After the issuance of the Governor's Executive Orders, Board staff worked quickly to identify waivers necessary for applicants and licensees and developed and submitted waiver request proposals for review and consideration by the DCA Director. Note, waiver requests submitted by the Board may differ from the final waiver language approved by DCA. During the pandemic, DCA has worked with the Board to ensure that all approved waivers that are still needed are extended.

Below is an update on the waivers that affect Board licensees.

a. Waivers Approved by DCA

- i. **Modification of Continuing Education Requirements for All Licensees (DCA-21-134)** – Originally approved March 31, 2020 and extended on July 1, August 27, October 22, December 15 of 2020, and on February 26 and March 30 of 2021. This waived CE or examination requirements for renewal for 6 months from the date of each order (through September 30, 2021) and applied only to Active licensees that expire between March 31, 2020 and May 31, 2021. NOTE: These waivers do not waive the live CE/CPD requirement.

- ii. **Modification of Reactivation Requirements for Speech-Language Pathologists (DCA-20-91)** – Originally approved March 31, 2020 and extended on September 17, and December 15, 2020. This waived the continuing education (CE) and fees associated with reactivation for Speech-Language Pathologists who have been in a Retired, Inactive, or Cancelled status for no longer than five (5) years. The reactivation of licenses under this waiver is valid until July 1, 2021.
- iii. **Modification of the Direct Monitoring Requirements for Required Professional Experience (RPE) Licenses and the Direct Supervision Requirements for Speech-Language Pathology Assistant (SLPA) Licenses (DCA-21-150)** – Originally approved May 6, 2020 and extended on July 1, August 27, October 22, and December 15 of 2020, and February 26 and April 30 of 2021. This waived the in-person supervision requirements for Required Professional Experience (RPEs) and Speech-Language Pathology Assistants (SLPAs) through June 30, 2021.
- iv. **Modification of the Limitations on Renewing of Hearing Aid Dispenser (HAD) Temporary Licenses and HAD Trainee Licenses (DCA-21-147)** – Originally approved May 29, 2020 and extended on September 17, and December 15 of 2020, and February 26 and April 30 of 2021. This waived the statutory limitations on renewing Hearing Aid Dispenser (HAD) Temporary Licenses and the limitation on the number of times a HAD Trainee license can be renewed. Specifically, this waiver removes the limitation that HAD Temporary Licenses cannot be renewed in Business and Professions Code (BPC) section 2538.27(b) and removes the limitation that HAD Trainee Licenses cannot be renewed more than twice in BPC section 2538.28(c). DCA-20-16 authorizes the Board to extend the expiration date of HAD Temporary Licenses and HAD Trainee Licenses by six (6) months for eligible licensees. This waiver only applies to HAD Temporary Licenses that expire between March 31, 2020 through June 30, 2021 and HAD Trainee Licenses that have been renewed twice and expire between March 31, 2020 through June 30, 2021.
- v. **Modification of Limitations and Requirements for Extension of RPE Licenses (DCA-20-98)** – Originally approved July 17, 2020 and extended on September 17, and December 15 of 2020, and February 26 and April 30 of 2021. This waived the limitation that an RPE License cannot be reissued for more than 12 months in Title 16 California Code of Regulations (CCR) section 1399.153.10(a) and waives the associated fee. The waiver also removes the limitation that a Speech-Language Pathology or Audiology RPE License cannot be reissued or extended due to the licensee's inability to take and pass the licensing

examinations in 16 CCR section 1399.153.10(a). The waiver authorizes the Board to extend an already reissued RPE License for an additional six (6) months without paying the \$35 application fee and to approve an RPE License reissuance for the purposes of taking and passing the respective licensing examinations in Speech-Language Pathology and Audiology. The 6-month extension and fee waiver allowed by this waiver for an already reissued RPE License only applies to RPEs who have a reissued RPE License that would expire between March 31, 2020 and June 30, 2021. The allowance for RPE Licenses to be reissued due to the RPE License holder's inability to take and pass the licensing examinations applies to all RPE License holders who have not already had their RPE License reissued before June 30, 2021.

b. Waivers Denied by DCA

- i. Modification of the 12-Month Fulltime Professional Experience Requirement for Licensure as an Audiologist** – This waiver would have waived the requirement that Audiology applicants submit evidence of no less than 12 months of supervised professional full-time experience for licensure (as stated in Business and Professions Code Section 2532.25). This waiver was denied on May 12, 2020 as the Department did not believe that waiving pre-licensure requirements, such as experience or competency exams, at this time is in the best interests of consumer protection.
- ii. Modification of Board Continuing Education Requirements to Remove Self-Study Restrictions** – This waiver would have waived the limitations on self-study continuing education (CE) and continuing professional development (CPD) for the purposes of renewal in Title 16 California Code of Regulations (CCR) sections 1399.140 and 1399.160. This would allow licensees to accrue all CE and CPD through self-study during the COVID-19 pandemic. This waiver was denied on December 30, 2020 as the Department had provided waivers of CE requirements for licensees of the Board and believed it would be unreasonable to allow licensees to complete all CE requirements via self-study as this would weaken consumer protections by not requiring some training be provided by a type of classroom or lecture type training that is verified.

Action Requested

This item is for informational purposes only, no action is required.



MEMORANDUM

DATE	May 3, 2021
TO	Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board
FROM	Heather Olivares, Legislation/Regulation Analyst
SUBJECT	Agenda Item 14: Legislative Report: Update, Review, and Possible Action on Proposed Legislation

a. 2021 Legislative Calendar and Deadlines

- May 7, 2021 – Last day for policy committees to meet and report bills in the house of origin
- May 21, 2021 – Last day for fiscal committees to meet and report bills in the house of origin
- June 4, 2021 – Last day for each house to pass bills out of the house of origin
- July 14, 2021 – Last day for policy committees to meet and report bills in the second house
- August 27, 2021 – Last day for fiscal committees to meet and report bills in the second house

b. Board-Sponsored Legislation for the 2021 Legislative Session

- **AB 435 (Mullin) Hearing aids: locked programming software: notice**

Status:

This bill passed in the Assembly without any formal opposition. It is now in the Senate Rules Committee waiting for referral to the policy committee.

Summary:

This bill will require hearing aid dispensers and dispensing audiologists to provide a purchaser with a written notice if the hearing aid being purchased uses proprietary or locked programming software. The written notice must be signed by the purchaser and the licensee must retain a copy consistent with current record retention requirements.

- **Proposed Legislation to Revise Business and Professions Code Section 2532.25 Relative to Audiology Licensing Requirements**

Status:

This legislative proposal was not able to be included in the Business and Professions omnibus bill and will now be included as part of the Board's Sunset Review process in 2022.

Summary:

This proposal would modify the 12-month professional experience requirement for licensure to allow students to count hours from clinical experiences or rotations occurring prior to the Required Professional Experience (RPE) professional experiences combined with the RPE experiences to meet the licensing requirement.

c. Board-Specific Legislation for the 2021 Legislative Session

- **AB 486 (Committee on Education) Elementary and secondary education: omnibus bill**

Status:

This bill is currently in the Assembly Appropriations Committee.

Summary:

This education omnibus bill includes a provision regarding the assessment of a pupil's language and speech disorders in school settings. Specifically, this bill will update terminology to require a speech-language pathologist to determine that a pupil's difficulty in understanding or using spoken language results from speech sound disorder, voice disorder, fluency disorder, language disorder, or hearing impairment or deafness.

Staff Recommendation: Watch

This provision of the bill is sponsored by the California Speech-Language-Hearing Association (CSHA) and will bring the Education Code up to date. This provision is limited in scope to only apply to speech-language pathologists practicing in elementary and secondary schools.

- **AB 555 (Lackey) Special education: assistive technology devices**

Status:

This bill is currently in the Assembly Education Committee.

Summary:

This bill will authorize a local education agency or special education local plan area to retain, sell, or dispose of an assistive technology device, including hearing aids, if the market value of the device is less than \$5,000 and it is not needed for another individual with exceptional needs.

Staff Recommendation: Oppose Unless Amended

The Author’s intent is that students who have been provided with an assistive technology device will be allowed to keep the device when they age out of the education system. However, the bill’s language authorizing a local education agency or special education local plan area to sell a hearing aid is problematic.

Although Business and Professions Code section 2530.5(c) states the practice of speech-language pathology or audiology cannot be restricted or prevented when performed by school personnel holding a credential from the Commission on Teacher Credentialing (CTC), this bill will expand the scope of this exemption. Specifically, this bill will authorize school personnel with a CTC credential to retain, sell, or dispose of hearing aids, rather than simply “providing” them.

Additionally, if the local education agency or special education local plan decides to retain a hearing aid and provide it to another student, the hearing aid will need to be fit for that student. This bill does not specify that the hearing aid must be fit by a licensed hearing aid dispenser, dispensing audiologist, or school personnel holding an appropriate CTC credential.

Recommended Motion Language:

I motion that the Board take an Oppose Unless Amended position on AB 555 and request the author amend the bill to clarify that the hearing aid must be fitted by an appropriately licensed or credentialed individual.

- **AB 1361 (Rubio) Childcare and developmental services: preschool: expulsion and suspension: mental health services: reimbursement rates**

Status:

This bill is currently in the Assembly Appropriations Committee.

Summary:

This bill will require specific actions to be taken prior to disenrolling or suspending a child due to a behavior issue and will require the use suspension or expulsion only as a last resort in responding to a child’s behavior. This bill includes a provision that will authorize a person with at least a master’s degree in speech and language pathology to provide early childhood mental health consultation services.

Staff Recommendation: Oppose Unless Amended

The provision authorizing a person with at least a master's degree in speech and language pathology to provide early childhood mental health consultation services is problematic. First, this bill does require this person to hold a valid license or CTC credential, only that they have at least two years of experience working with children zero to five years of age. Additionally, this bill defines early childhood mental health consultation services as a mental health service that develops the capacity of programs to serve and benefit a child enrolled in a childcare and development program. Mental health services are outside of the scope of practice for speech-language pathology.

Recommended Motion Language:

I motion that the Board take an Oppose Unless Amended position on AB 1361 and suggest the bill be amended to remove the authority for individuals with at least a master's degree in speech and language pathology from providing early childhood mental health consultation services.

d. Healing Arts Legislation for the 2021 Legislative Session

- **AB 1236 (Ting) Healing arts: licensees: data collection**

Status:

This bill is currently in the Assembly Appropriations Committee.

Summary:

This bill will require healing arts boards to request specified workforce data from its licensees at the time of electronic application for a license and license renewal or at least biennially from a scientifically selected random sample of licensees. The Board will be required to report the data collected on a biennial basis and post it on the Board's website. The Board will also be required to provide the data annually to the Office of Statewide Health Planning and Development.

Staff Recommendation: Oppose

Since the Board does not currently have the IT capabilities to collect the data required by this bill, Board staff will need to create a manual process. Board staff will need to change all of the application forms for each license type to collect this data at application and develop a form to be sent with the renewal reminder notices to collect this information every renewal cycle. This will significantly increase the Board's workload.

Recommended Motion Language:

I motion that the Board take an Oppose position on AB 1236.

e. DCA-Wide Legislation for the 2021 Legislative Session

- **AB 29 (Cooper) State bodies: meetings**

Status:

This bill is currently on the suspense file in the Assembly Appropriations Committee.

Summary:

This bill will require the Board to make all writings and materials for publicly noticed meetings available on the Board's website and provided to any person requesting such materials in writing at least 72 hours prior to the meeting or on the same day the writings and materials are provided to Board members, whichever is earlier. This bill will also prohibit the Board from discussing or acting on any items not provided in advance of the meeting as required.

Staff Recommendation: Oppose

This bill may result in the Board being unable to discuss and act on agenda items if the materials cannot be provided in advance of the meeting as required. The Board strives to get all materials posted on its website prior to Board meetings. Occasionally, Board materials require last minute updates and changes. Additionally, the Board does not currently have the ability to update its own website and must use DCA's Internet Team to post meeting materials on the website, requiring a good amount of lead time for processing. This bill may limit Board discussion and prevent some agenda items from being discussed at all.

Recommended Motion Language:

I motion that the Board take an Oppose position on AB 29.

- **AB 107 (Salas) Licensure: veterans and military spouses**

Status:

This bill is currently in the Assembly Appropriations Committee.

Summary:

This bill will require boards to issue a temporary license within 30 days to applicants currently licensed in another state who are married to or in a domestic partnership with an active duty member of the military currently stationed in California, if the criminal background check does not show grounds for denial. This temporary license will expire 12 months after issuance or upon issuance of a permanent license, whichever occurs first. This bill will remove current provisions that allow a temporary license to expire upon the denial of an application.

Additionally, this bill will require the Board to track applications and licensing statistics for military personnel and spouses.

Staff Recommendation: Oppose Unless Amended

This bill will remove current provisions that allow a temporary license to become invalid if the application for a permanent license is denied. The Board already has a process in place to expedite applications for military personnel and spouses, so the Board rarely issues this temporary license. However, since this bill eliminates a provision making a temporary license invalid upon the denial of an application, this bill could allow unqualified individuals authority to practice under a temporary license for 12 months.

Recommended Motion Language:

I motion that the Board take an Oppose Unless Amended position on AB 107 and request the author amend the bill to keep the provision that makes a temporary license invalid upon the denial of an application.

- **AB 225 (Gray) Department of Consumer Affairs: boards: veterans: military spouses: licenses**

Status:

This bill is currently in the Assembly Appropriations Committee.

Summary:

This bill will expand current law requiring a temporary license for applicants currently licensed in another state who are married to or in a domestic partnership with an active duty member of the military currently stationed in California to also apply to applicants who are veterans discharged within the previous 6 months and active duty military personnel who will be separating from the military within 90 days.

Additionally, this bill will remove current provisions that allow a temporary license to expire upon the denial of an application. This bill will also extend the timeframe that a temporary license is valid from 12 months to 18 months.

Staff Recommendation: Oppose Unless Amended

This bill will remove current provisions that allow a temporary license to become invalid if the application for a permanent license is denied. The Board already has a process in place to expedite applications for military personnel and spouses, so the Board rarely issues this temporary license. However, since this bill eliminates a provision making a temporary license invalid upon the denial of an application, this bill could allow unqualified individuals authority to practice under a temporary license for 18 months.

Recommended Motion Language:

I motion that the Board take an Oppose Unless Amended position on AB 225 and request the author amend the bill to keep the provision that makes a temporary license invalid upon the denial of an application.

- **AB 646 (Low) Department of Consumer Affairs: boards: expunged convictions**

Status:

This bill is currently on the suspense file in the Assembly Appropriations Committee.

Summary:

This bill will require boards that post information on their website about a revoked license due to a criminal conviction to post the expungement order if the person reapplies for licensure or remove the initial posting if the person does not reapply for licensure, within 90 days of the board receiving an expungement order related to the conviction. The Board may charge a fee not exceeding the reasonable cost of administering this provision.

Staff Recommendation: Watch

This bill will require the Board to create a new process for license verifications. License verifications are critical when reporting prior discipline to other state licensing boards and since this bill only removes the conviction from the public website and does not remove the Board's ability to report to other state licensing entities that the license was revoked, the Board would need to make a process change in how these verifications are prepared by stopping usage of the public DCA license search and instead using the Board's internal IT system. The workload for this new process will be minor and absorbable.

- **AB 885 (Quirk) Bagley-Keene Open Meeting Act: teleconferencing**

Status:

This bill is currently in the Assembly Governmental Organization Committee.

Summary:

This bill will amend current law regarding public meetings held by teleconference to only require the agenda to include a primary physical meeting location where the public may physically attend and participate. Board members attending the meeting via teleconference or physically at the primary physical meeting location will count toward establishing a quorum. This bill will require public meetings held by teleconference to include both an audible and visual means of participation.

Staff Recommendation: Support

The Board has experienced difficulty in the past finding locations available to the public for Board meetings held via teleconference. This bill will alleviate this issue by only requiring one location where the public may physically attend and participate. Additionally, due to the COVID-19 pandemic the Board already has a process that allows the public to participate remotely in meetings held via teleconference and this technology has the ability to allow for both audible and visual means of participation.

Recommended Motion Language:

I motion that the Board take a Support position on AB 885.

- **AB 1026 (Smith) Business licenses: veterans**

Status:

This bill is currently scheduled for hearing on May 5th in the Assembly Appropriations Committee.

Summary:

This bill will require boards to grant a 50-percent fee reduction for an initial license for military veterans who provide satisfactory evidence with their application. This bill defines satisfactory evidence as a driver's license or identification card with "Veteran" printed on its face.

Staff Recommendation: Watch

The Board has a small licensing population of military personnel and spouses. On average, the Board receives less than 50 applications from military personnel or spouses per year. The revenue loss from reducing the initial license fee for military veterans would be minimal.

- **SB 607 (Roth) Professions and vocations**

Status:

This bill is scheduled for hearing on May 10th in the Senate Appropriations Committee.

Summary:

This bill will, among other things, require boards to waive all fees associated with the application and initial license for applicants currently licensed in another state who are married to or in a domestic partnership with an active duty member of the military currently stationed in California.

Staff Recommendation: Watch

The Board has a small licensing population of military personnel and spouses. On average, the Board receives less than 50 applications from military personnel or spouses per year. The revenue loss from waiving fees for military spouses would be minimal.

- **SB 731 (Durazo) Criminal records: relief**

Status:

This bill is scheduled for hearing on May 3rd in the Senate Appropriations Committee.

Summary:

This bill will expand criminal record relief by way of petition to any felony conviction, specifically those that are punishable by a term of incarceration in state prison. This bill will also expand automatic arrest record relief for specified convictions.

Staff Recommendation: Watch

This bill will expand upon recent criminal justice reforms by creating further mechanisms for conviction dismissal. Current law already requires the Department of Justice to exclude records of arrest and conviction that were granted relief starting July 1, 2022. This bill will expand upon the types of arrests and convictions that must be excluded.

- **SB 772 (Ochoa Bogh) Professions and vocations: citations: minor violations**

Status:

This bill is currently in Senate Business, Professions, and Economic Development Committee.

Summary:

This bill will prohibit the assessment of an administrative fine for minor violations if the licensee corrects the violation within 30 days. Minor violations are defined as those that do not pose a serious health or safety threat, are not willful, do not occur while on probation, and are not violations that the licensee has a history of committing.

Staff Recommendation: Oppose

The Board often uses its authority to issue citations and assess an administrative fine for “minor” violations of the practice act. Examples of activities which the Board has issued citations and fines for include unlicensed activity, false advertising, and not cooperating with a Board investigation. These administrative fines serve the purpose of preventing future violation, protecting consumers, and support the the cost of the investigation leading up to the citation. Over the past 3 years the Board has issued an average of \$12,983 per year in cite and fine charges. All of these cite and fine charges fall within the definition of minor violation in this bill, preventing the Board from assessing an administrative fine for these violations.

Recommended Motion Language:

I motion that the Board take an Oppose position on SB 772.

Agenda Item 14 – Attachment

Agenda Item 14 Attachments are Bill Text and Fact Sheets for the following bills. Since this content was not available in an ADA accessible format, please contact the Board at speechandhearing@dca.ca.gov to obtain an electronic copy of this content.

- 1 - AB 435 Bill Language
- 2 - AB 435 Fact Sheet
- 3 - AB 486 Bill Language
- 4 - AB 555 Bill Language
- 5 - AB 555 Fact Sheet
- 6 - AB 1361 Bill Language
- 7 - AB 1361 Fact Sheet
- 8 - AB 1236 Bill Language
- 9 - AB 1236 Fact Sheet
- 10 - AB 29 Bill Language
- 11 - AB 29 Fact Sheet
- 12 - AB 107 Bill Language
- 13 - AB 225 Bill Language
- 14 - AB 225 Fact Sheet
- 15 - AB 646 Bill Language
- 16 - AB 885 Bill Language
- 17 - AB 885 Fact Sheet
- 18 - AB 1026 Bill Language
- 19 - SB 607 Bill Language
- 20 - SB 731 Bill Language
- 21 - SB 772 Bill Language
- 22 - SB 772 Fact Sheet



MEMORANDUM

DATE	April 29, 2021
TO	Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board
FROM	Heather Olivares, Legislation/Regulation Analyst
SUBJECT	Agenda Item #16: Discussion and Possible Action regarding Required Professional Experience Direct Supervision Requirements and Remote or Tele Supervision (As Stated in Title 16, CCR, sections 1399.153 and 1399.153.3)

Background

At the February 20, 2020 meeting, the Board discussed this regulatory proposal and made changes to the definitions of direct supervision and tele supervision. Additionally, the Board adopted language to provide Required Professional Experience (RPE) supervisors with discretion to determine if conditions exist that make tele supervision inappropriate.

In preparing the required regulatory documents for the formal rulemaking process, Board staff identified necessary changes to the definition of required professional experience. Specifically, the current definition of required professional experience includes an inaccurate reference to the requirement for applicants to submit evidence of supervised professional experience. Additionally, the definition doesn't currently include a reference to Business and Professions Code section 2532.25, which provides the licensure requirements for audiologists that became effective January 1, 2008.

Action Requested

Included in your materials are revisions to California Code of Regulations (CCR) section 1399.153. Please review the revisions to the definition of required professional experience and discuss if any additional changes are necessary.

Staff recommends the Board approve the regulatory language, move to start the formal rulemaking process, and delegate authority to the Executive Officer to make any technical and non-substantive changes that may be required to complete the rulemaking file.

Attachment: RPE Direct Supervision Revised Regulatory Text

DEPARTMENT OF CONSUMER AFFAIRS
**TITLE 16. SPEECH-LANGUAGE PATHOLOGY AND AUDIOLOGY
AND HEARING AID DISPENSERS BOARD**

PROPOSED REGULATORY LANGUAGE
**Required Professional Experience Direct Supervision Requirements and Remote
or Tele Supervision**

Legend:	Added text is indicated with an <u>underline</u> . Omitted text is indicated by (* * * *) Deleted text is indicated by strikeout .
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Amend section 1399.153 of Division 13.4 of Title 16 of the California Code of Regulations to read as follows:

§ 1399.153 Definitions

As used in this article, the term:

(a) “Required professional experience” or “RPE” means the supervised practice of speech-language pathology or audiology for the purpose of meeting the requirements for licensure in accordance with Sections 2530.5, subdivision (f), ~~and 2532.2~~, subdivision (~~dc~~), and 2532.25, subdivision (b)(2) of the Code and these regulations.

(b) “Required professional experience supervisor” or “RPE supervisor” means a person who is licensed as a speech-language pathologist or audiologist in the field for which licensure is sought, or has qualifications deemed equivalent by the Board.
“Qualifications deemed equivalent by the Board” include a supervisor who holds legal authorization to practice in the state where the experience is being obtained in the field for which licensure is sought if the required professional experience is obtained in a setting which is exempt from the licensure requirements of the Act or out of state.

(c) “Required professional experience temporary license holder” or “RPE temporary license holder” means a person who has complied with Section 1399.153.2 of these regulations.

(d) “Direct supervision” means in person, one-on-one audiovisual observation, and guidance, as needed by the RPE supervisor of activities related to the practice of speech-language pathology or audiology.

(e) “Tele supervision” means synchronous, one-on-one audiovisual observation, and guidance, as needed through electronic video monitoring by the RPE supervisor of activities related to the practice of speech-language pathology or audiology while care is being provided to the patient.

Note: Authority cited: Section 2531.95, Business and Professions Code.
Reference cited: Sections 2530.5, 2532.2, and 2532.25, Business and Professions Code.

Amend section 1399.153.3 of Division 13.4 of Title 16 of the California Code of Regulations to read as follows:

§ 1399.153.3 Responsibilities of RPE Supervisors

An RPE supervisor's responsibilities shall include, but are not limited to:

(a) Legal responsibility for the health, safety and welfare of the patients treated by the RPE temporary license holder.

(b) ~~Insuring~~ Ensuring that the extent, kind, and quality of functions performed by an RPE temporary license holder under the supervisor's supervision is in compliance with these regulations and is consistent with the RPE temporary license holder's education and training.

(c) ~~Insuring~~ Ensuring that such supervision consists of direct ~~monitoring~~ supervision for a minimum of eight (8) hours per month for each full-time RPE temporary license holder and four (4) hours per month for each part-time RPE temporary license holder.

(1) Tele supervision of the RPE temporary license holder may be utilized in lieu of direct supervision if it meets the following requirements:

(A) Tele supervision is limited to no more than four (4) hours per month for each full-time RPE temporary license holder, and limited to no more than two (2) hours per month for each part-time RPE temporary license holder.

(B) The RPE supervisor informs the patient about the use of tele supervision and obtains verbal or written consent from the patient for the use of the tele supervision. The consent shall be documented by the RPE supervisor.

(C) The RPE supervisor evaluates the functions to be performed by the RPE temporary license holder while tele supervision will occur, and based on the RPE supervisor's professional judgement of the individual RPE temporary license holder's ability, the RPE supervisor determines that there is no need to be physically present with the RPE temporary license holder.

(D) The RPE supervisor evaluates the functions to be demonstrated while tele supervision will occur, and based on the RPE supervisor's professional judgement of the individual RPE temporary license holder's ability, the RPE supervisor determines that there is no need to be physically present with the RPE temporary license holder.

(E) The RPE temporary license holder is physically present with the patient while being tele supervised by the RPE supervisor.

(F) The RPE supervisor determines, based on their professional judgement, if other issues or conditions exist that make the use of tele supervision inappropriate in that given situation.

(d) “~~Direct monitoring supervision~~” of the RPE temporary license holder may consist of ~~the personal observation of~~ the following:

- (1) evaluation and assessment procedures;
- (2) treatment procedures;
- (3) record keeping, evaluation or assessment reports, correspondence, plans for management, and summaries of case conferences;
- (4) participation in case conferences.

(5) At least 50% of the supervisor's ~~observation~~ direct supervision shall be of the RPE temporary license holder's evaluation, assessment and treatment procedures.

(e) Reviewing and evaluating the RPE temporary license holder's performance on a monthly basis for the purpose of improving his or her professional expertise. The RPE supervisor shall discuss the evaluations with the RPE temporary license holder and maintain written documentation of these evaluations and reviews. The written evaluations shall be signed by both the RPE supervisor and the RPE temporary license holder. If the supervisor determines the RPE temporary license holder is not minimally competent for licensure, the RPE temporary license holder shall be so notified orally and in writing. A written statement documenting the basis for the supervisor's determination shall be submitted with the final verification of experience to the Board.

(f) Reviewing and countersigning all evaluation and assessment reports, treatment plans, progress and discharge reports drafted by the RPE temporary license holder.

(g) A “Required professional experience supervisor” must have completed not less than six (6) hours of continuing professional development in supervision training prior to assuming responsibility as a RPE supervisor, and three (3) hours of continuing professional development in supervision training every four years thereafter. If the continuing professional development in supervision training is obtained from a Board-approved provider as defined in Section 2532.6 subdivision (e) of the Code, the hours may be applied towards the continuing professional development requirement for licensees set forth in Section 1399.160.3 of the California Code of Regulations.

Note: Authority cited: Sections 2531.95, 2532.2, and 2532.6, Business and Professions Code.

Reference cited: Sections 2532.2 and 2532.6, Business and Professions Code.



MEMORANDUM

DATE	May 5, 2021
TO	Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board
FROM	Cherise Burns, Assistant Executive Officer
SUBJECT	Agenda Item 17: Discussion and Possible Action Regarding Audiology Licensing Requirements (As Stated in Business and Professions Code Sections 2532.2 and 2532.25 and Title 16, CCR sections 1399.152.2)

Background

Business and Professions Code (BPC) Section 2532.25(b)(2) requires the submission of evidence of no less than 12 months of satisfactorily completed supervised professional full-time experience (RPE) or its part-time equivalent obtained under the supervision of a licensed audiologist. ” This experience shall be completed under the direction of a board-approved audiology doctoral program. The RPE shall follow completion of the didactic and clinical rotation requirements of the audiology doctoral program.

For current hearing and balance healthcare training this statutory requirement creates restrictive aspects for program completion, thereby creating hardships for audiology doctoral students and programs that may not support adequate consumer protection for audiology and balance services.

At the Board’s November 2020 Board Meeting, the Board approved a 2021 legislative proposal with the following statutory revisions to BPC Section 2532.25:

Business and Professions Code Section 2532.25

(a) An applicant seeking licensure as an audiologist shall possess a doctorate in audiology earned from an educational institution approved by the board. The board may, in its discretion, accept qualifications it deems to be equivalent to a doctoral degree in audiology. The board shall not, however, accept as equivalent qualifications graduation from a master’s program that the applicant was enrolled in on or after January 1, 2008.

(b) In addition to meeting the qualifications specified in subdivision (a), an applicant seeking licensure as an audiologist shall do all of the following:

(1) Submit evidence of the satisfactory completion of supervised clinical practice with individuals representative of a wide spectrum of ages and audiological disorders. The board shall establish by regulation the required number of clock hours of supervised clinical practice necessary for the applicant. The clinical practice shall be under the direction of an educational institution approved by the

board.

- (2) Submit evidence of no less than 12 months of satisfactorily completed supervised professional full-time experience or its part-time equivalent obtained under the supervision of a licensed audiologist or an audiologist having qualifications deemed equivalent by the board. This experience shall be completed under the direction of a board-approved audiology doctoral program and may be obtained by participation in supervised clinical rotations or experiences that are held throughout the duration of the program and during the Required Professional Experience. Acceptable types of the clinical rotations or experiences shall be defined by the board through regulation. ~~The required professional experience shall follow completion of the didactic and clinical rotation requirements of the audiology doctoral program.~~
- (3) Pass an examination or examinations approved by the board. The board shall determine the subject matter and scope of the examination or examinations and may waive an examination upon evidence that the applicant has successfully completed an examination approved by the board. Written examinations may be supplemented by oral examinations as the board shall determine. An applicant who fails an examination may be reexamined at a subsequent examination upon payment of the reexamination fee required by this chapter.
- (c) This section shall apply to applicants who graduate from an approved educational institution on and after January 1, 2008.

This legislative proposal was not able to be included in the Senate Business, Professions and Economic Development Committee's Omnibus bill and will now be included as part of the Board's Sunset Review process in 2022.

Action Requested

Since this proposal will be included in the Board's 2022 Sunset Review, staff recommends the Board refer this issue to the Audiology Practice Committee, where they can review the updated statutory language and work with stakeholders to develop the associated regulatory revisions so that the regulatory package can be submitted after the Board's Sunset Review and associated statutory changes are completed in Fall 2022.

Specifically, the Audiology Practice Committee should meet to address the following issues and their associated regulatory provisions:

- What types of clinical rotations can be counted towards the "12 months of satisfactorily completed supervised professional full-time experience or its part-time equivalent"?
 - Should the types of clinical rotations that can be counted depend on the type and level of supervision received during the experience?
 - Should the experiences be limited to certain years of the program, such as the 2nd or 3rd year?
 - Should there be any limitations or should this be at the discretion of program training directors?
- What types of clinical clock hours can be counted, i.e. direct patient contact hours, shift hours, audiology simulation hours?
- Are there any considerations for students from out-of-state programs or with federal visa that should be taken into account?
- Do students need to hold an RPE license when accruing pre-graduation hours?



MEMORANDUM

DATE	April 29, 2021
TO	Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board
FROM	Heather Olivares, Legislation/Regulation Analyst
SUBJECT	Agenda Item #18: Regulatory Report: Update, Review, and Possible Action on Board Regulation Packages

- a. Discussion and Possible Action regarding Speech-Language Pathology and Audiology Fees (As Stated in 16 CCR sections 1399.157, 1399.170.13, and 1399.170.14)

The Board initially posted this regulatory proposal for a 45-day public comment period on August 7, 2020. This posting started the one-year formal rulemaking process, with a deadline to submit the completed rulemaking package to the Office of Administrative Law (OAL) by August 6, 2021. The Board met this deadline by submitting the completed rulemaking package to OAL on April 7, 2021. Normally OAL has 30 working days to review and approve regulations; however, due to COVID-19 this timeframe has been extended by 120 days. At this time, the Board is still waiting for OAL to complete the review of this regulatory proposal.

- b. Update, Discussion and Possible Action regarding Regulations as a result of AB 2138 Licensing Boards: Denial of Application: Revocation or Suspension of Licensure: Criminal Conviction (As Stated in 16 CCR sections 1399.132, 1399.133, 1399.134, 1399.156.1, 1399.156.2, and 1399.156.3)

The Board initially posted this regulatory proposal for a 45-day public comment period on March 6, 2020. This posting started the one-year formal rulemaking process, with a deadline to submit the completed rulemaking package to OAL by March 5, 2021. The Board met this deadline by submitting the completed rulemaking package to OAL on November 18, 2020. Normally OAL has 30 working days to review and approve regulations; however, due to COVID-19 this timeframe has been extended by 120 days. The Board anticipates receiving approval or denial of this regulatory proposal soon.



MEMORANDUM

DATE	May 5, 2021
TO	Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board
FROM	Cherise Burns, Assistant Executive Officer
SUBJECT	Agenda Item 19: Discussion and Possible Action Regarding Continuing Education/Continuing Professional Development Requirements (As Stated in Title 16, CCR sections 1399.140 et seq. and 1399.160 et seq.)

Background

In November of 2015, the Board approved revisions to the current Continuing Education (CE)/Continuing Professional Development (CPD) Requirements. These revisions would allow up to half of the required CE/CPD hours to be accrued through self-study courses. Since that time, the Board has reviewed those regulations again in May of 2016 and made additional changes (see Attachment for final Board Approved CE/CPD Regulatory Revisions).

Since that time, there has been considerable advancements in online self-study and online interactive (live) CE/CPD opportunities. Additionally, this issue became more pronounced during the COVID-19 pandemic, where CE/CPD requirements have been temporarily waived through DCA waivers, but not the limitation on self-study hours which have been more difficult to obtain.

CE/CPD requirements are intended to protect California consumers by ensuring licensees continue to increase their professional knowledge and skills to maintain competency and enhance consumer services. Prior to the Board Approved CE/CPD Regulatory Revisions being submitted to the Office of Administrative Law, the Board should review the proposed language again and determine whether the current language best protects California consumers or whether there are alternatives that incorporate new advances in online learning that would equally protect California consumers.

Action Requested

Staff recommends that the Board Approved CE/CPD Regulatory Revisions be referred to each of the respective Practice Committees to determine if additional revisions to the CE/CPD requirements are merited.

Attachment: Board Approved CE/CPD Regulatory Revisions

**SPEECH-LANGUAGE PATHOLOGY AND AUDIOLOGY AND HEARING AID
DISPENSERS BOARD**

**Title 16, Division 13.4
SPEECH-LANGUAGE PATHOLOGY AND AUDIOLOGY
Article 11. Continuing Professional Development
Proposed Language**

Amend Sections 1399.160, 1399.160.1, 1399.160.2, 1399.160.3, 1399.160.4, and 1399.160.7 of Article 11 of Division 13.4 of Title 16 as follows:

§ 1399.160. Definitions.

As used in this article:

(a) A continuing professional development “course” means a form of systematic learning at least one hour (60 minutes) in length including, but not limited to, academic studies, extension studies, lectures, conferences, seminars, workshops, and self-study courses.

(b) A “Self-study ~~course~~” means a form of systematic learning ~~performed at a licensee's residence, office, or other private location including that does not offer participatory interaction between the licensee and the instructor during the instructional period. These include, but are~~ not limited to, ~~viewing or listening to~~ recorded courses ~~or participating in “self-assessment testing” delivered via the Internet, or CD-ROM/DVD, correspondence, or home study and which require completing and passing an assessment or examination of the course content. (open-book tests that are completed by the licensee, submitted to the provider, graded, and returned to the licensee with correct answers and an explanation of why the answer chosen by the provider was the correct answer A self-study course does not mean a course taken at an accredited university towards a degree, nor does it include any interactive courses offered via electronic media where the course offering affords participants the opportunity to interact with an instructor and/or other course participants.~~

(c) A continuing professional development “provider” means an accredited institution of higher learning, a nonprofit education association, a nonprofit professional association, an individual, or other organization that offers continuing professional development courses and meets the requirements contained in this article.

(d) A “renewal period” means the ~~two-year~~ period that spans from a license's expiration date to the licensee's next expiration date.

(e) An “operational plan” means a detailed, written description, which contains information that explains how the provider intends to conduct business, advertise its courses, provide educational services, and meet the minimum standards established in this article.

(f) “Professional development” shall have the same meaning and effect as the term “continuing education” when interpreting the provisions in this Article.

Note: Authority cited: Sections 2531.95 and 2532.6(a), Business and Professions Code.

Reference: Section 2532.6(b), (c)(1), (e) and (f), Business and Professions Code.

§ 1399.160.1. License Renewal Requirements.

(a) Except as provided in Section 1399.160.2, a licensee ~~whose license expires in the year 2001,~~ shall certify in writing, when applying to renew their license for ~~license renewal~~ the first time, by signing a statement under penalty of perjury that during the preceding renewal period the licensee ~~has~~ completed twelve (12) hours of continuing professional development ~~courses~~.

- (b) Except as provided in Section 1399.160.2, a licensee who holds both a speech-language pathology license and an audiology license ~~that expire in the year 2001~~, shall certify in writing, when applying [to renew both licenses](#) for the [first time](#), by signing a statement under penalty of perjury that during the preceding renewal period the licensee ~~has~~ completed eight (8) hours of continuing professional development ~~courses~~ for each license for a total of sixteen (16) hours.
- (c) Except as provided in Section 1399.160.2, a licensee shall certify in writing, when applying for license renewal, by signing a statement under penalty of perjury that during the preceding renewal period the licensee ~~has~~ completed twenty-four (24) hours of continuing professional development ~~courses~~.
- (d) Except as provided in Section 1399.160.2, a licensee who holds both a speech-language pathology license and an audiology license, shall certify in writing, when applying [to renew both licenses for license renewal](#), by signing a statement under penalty of perjury that during the preceding renewal period the licensee ~~has~~ completed sixteen (16) hours of continuing professional development ~~courses~~ for each license for a total of thirty-two hours.
- (e) A licensee who falsifies or makes a material misrepresentation of fact when applying for license renewal or who cannot verify the completion of the continuing professional development requirement by producing a record of course completion, upon request by the Board, is subject to disciplinary action under Section 2533(e) of the Code.

Note: Authority cited: Sections 2531.95 and 2532.6(a), Business and Professions Code.
Reference: Sections 2532.6(b), (c) (d) and 2533(e), Business and Professions Code.

§ 1399.160.2. Exemptions from Continuing Professional Development.

~~(a) An initial licensee shall complete at least twelve (12) hours of continuing professional development, of which no more than four (4) hours may be earned through the following activities prior to his or her first license renewal:~~

~~(1) No more than (2) hours of self-study activities,~~

~~(2) No more than (2) hours from courses related to the discipline of speech-language pathology or audiology as defined in Section 1399.160.4(c)(4), or in indirect client care courses as defined in Section 1399.160.4(c)(3).~~

~~(b)~~ (a) A licensee is exempt from the continuing professional development requirement if his or her license is inactive pursuant to Sections 703 and 704 of the Code.

~~(c)~~ (b) A licensee may submit a written request for exemption from the continuing professional development requirement for any of the reasons listed below. The Board will notify the licensee, within thirty (30) working days after receipt of the request for exemption, whether the exemption was granted. If the request for exemption is denied, the licensee is responsible for completing the full amount of continuing professional development required for license renewal. The Board shall grant the exemption if the licensee can provide evidence, satisfactory to the Board, that:

(1) For at least one year during the licensee's previous license renewal period the licensee was absent from California due to military service;

(2) For at least one year during the licensee's previous license renewal period the licensee resided in another country; or

(3) During the licensee's previous renewal period, the licensee or an immediate family member, where the licensee has primary responsibility for the care of that family member, was suffering from or suffered a disability. A disability is a physical or mental impairment that substantially limits one or more of the major life activities of an individual. The disability shall be verified by a licensed physician or psychologist with special expertise in the area of disability. Verification of the disability shall include:

(A) the nature and extent of the disability;

- (B) an explanation of how the disability hinders the licensee from completing the continuing professional development requirement; and
- (C) the name, title, address, telephone number, professional license or certification number, and original signature of the licensed physician or psychologist verifying the disability.

Note: Authority cited: Sections 2531.95 and 2532.6(a), Business and Professions Code.
Reference: Section 2532.6(d), Business and Professions Code.

§ 1399.160.3. Continuing Professional Development Requirements.

- (a) A licensee, ~~whose license expires in the year 2001~~ applying to renew their license for the first time, shall accrue at least twelve (12) hours of continuing professional development courses as defined in Section 1399.160.4. A licensee may accrue no more than ~~four (4) hours~~ six (6) of the required hours of continuing professional development ~~courses through~~ by way of self-study ~~courses~~ during this renewal period.
- (b) A licensee who holds both a speech-language pathology license and an audiology license, applying to renew both licenses for the first time, ~~that expire in the year 2001~~, shall accrue at least eight (8) hours of continuing professional development courses as defined in Section 1399.160.4 for each license. A licensee may accrue no more than ~~two (2)~~ four (4) of the required hours of continuing professional development ~~courses through~~ by way of self-study ~~courses~~ for each license.
- (c) A licensee who holds a speech-language pathology or non-dispensing audiology license (not applying for initial renewal) shall accrue at least twenty-four (24) hours ~~during a single renewal period~~ of continuing professional development per renewal period ~~courses~~ as defined in Section 1399.160.4. A licensee may accrue ~~no more than eight (8) hours of~~ continuing professional development ~~courses~~ through the following activities during ~~a single~~ each renewal period:
 - (1) No more than ~~six (6)~~ twelve (12) of the twenty-four (24) required hours by way of self-study ~~activities~~.
 - (2) No more than four (4) hours from courses related to the discipline of speech-language pathology or audiology, as defined in Section 1399.160.4(c)(4) or in indirect client care courses as defined in Section 1399.160.4(c)(3).
 - (3) Not more than 50% of the continuing professional development hours required of a licensed non-dispensing audiologist, may be in hearing aid courses, ~~but~~ and shall not be obtained from courses where the content focuses on equipment, devices, or other products of a particular manufacturer publisher, or company, ~~or corporation~~.
- (d) A licensee who holds both a speech-language pathology license and an audiology license shall accrue at least sixteen (16) hours of continuing professional development per renewal period ~~courses~~ as defined in Section 1399.160.4 for each license. A licensee may accrue ~~no more than five (5) hours of~~ continuing professional development through the following activities for each license
 - (1) No more than eight (8) of the required hours by way of self-study.
 - (2) No more than two and one-half (2.5) hours from courses related to the discipline of speech-language pathology or audiology, as defined in Section 1399.160.4(c)(4) or in indirect client care courses as defined in Section 1399.160.4(c)(3).
- (e) A licensed audiologist authorized to dispense hearing aids as provided by Section 2539.1 of the Code shall accrue at least twelve (12) hours of continuing professional development per annual renewal period as defined in Section 1399.160.4 ~~annually~~. A licensed audiologist authorized to dispense hearing aids may accrue ~~no more than (3) hours of~~ continuing professional development ~~courses~~ through the following activities during ~~a single~~ each renewal period:

- (1) No more than six (6) of the required hours by way of self-study activities,
- (2) No more than one and ~~a one-half~~ (1.5) hours from courses related to the discipline of audiology, as defined in Section 1399.160.4(c)(4) or in indirect client care courses as defined in Section 1399.160.4(c)(3).
- (3) Exactly 50% of the continuing professional development hours required of a licensed audiologist authorized to dispense hearing aids, shall be obtained from courses related to hearing aid dispensing but shall not be obtained from courses where the content focuses on the equipment, devices, or other products of a particular manufacturer or company. The remaining 50% of the continuing professional development hours required of a dispensing audiologist shall be relevant to the practice of audiology as defined in Section 2530.2(k) and shall not be obtained from hearing aid dispensing courses as provided for in this section.
- (f) A licensee who holds both a speech-language pathology license and a dispensing audiology license shall accrue:
- (1) At least sixteen (16) hours of continuing professional development courses in speech-language pathology biennially; ~~of which no more than four (4) hours of the continuing professional development and which~~ may be accrued through the following activities during a single each renewal period:
- (A) No more than ~~two and one-half (2.5)~~ eight (8) of the required hours by way of self-study activities.
- (B) No more than ~~one (1)~~ two and one-half (2.5) hours from courses related to the discipline of speech- language pathology as defined in Section 1399.160.4(c)(4) or in indirect client care courses as defined in Section 1399.160.4(c)(3).
- (2) At least eight (8) hours of continuing professional development courses in dispensing audiology as defined in Section 1399.160.4 and 1399.160.3(e)(3) annually, ~~of which no more than two (2) hours of continuing professional development courses and which~~ may be accrued through the following activities during a single each renewal period:
- (A) No more than ~~one (1)~~ four (4) of the required hours by way of self-study activities.
- (B) No more than one (1) hour from courses related to the discipline of speech-language pathology as defined in Section 1399.160.4(c)(4) or in indirect client care courses as defined in Section 1399.160.4(c)(3).
- (g) If a licensee teaches a course offered by a provider registered with the Board or an entity listed in Section 2532.6 of the Code, the licensee may claim credit for the same course ~~only~~ once per renewal period, receiving the same amount of hours of continuing professional development credit as a licensee who attended the course.
- (h) A licensee may not claim credit for the same course more than once per renewal period for hours of continuing professional development.
- (i) A licensee who takes a continuing professional development course as a condition of probation resulting from disciplinary action by the Board may not apply the course as credit towards the continuing professional development requirement.

Note: Authority cited: Sections 2531.95 and 2532.6(a), Business and Professions Code.
Reference: Section 2532.6(b), (c) and (e), Business and Professions Code.

§ 1399.160.4. Continuing Professional Development Course Content.

- (a) A licensed speech-language pathologist shall determine that the content and learning outcomes of a course are relevant to the practice of speech-language pathology as defined in Section 2530.2(d).
- (b) A licensed audiologist shall determine that the content and learning outcomes of a course are relevant to the practice of audiology as defined in Section 2530.2(k).

- (c) The content of a course shall pertain to direct, related, or indirect patient/client care.
- (1) Examples of direct patient/client care courses for the practice of speech-language pathology include, but are not limited to: fluency disorders, voice disorders, motor disorders of speech, dysphagia, speech science, oral and written language disorders, aphasia and neurogenic disorders of language and cognition, augmentative and alternative communication, phonological/articulatory disorders, language science, and patient/client counseling to facilitate recovery from, or adjustment to, a communication disorder.
- (2) Examples of direct patient/client care courses for the practice of audiology include, but are not limited to: auditory and vestibular assessment, auditory habilitation/rehabilitation, hearing assistive technology, industrial audiology/hearing conservation, and hearing science.
- (3) Indirect patient/client care courses cover pragmatic aspects of speech-language pathology or audiology practice (e.g., legal or ethical issues, consultation, record-keeping, office management, managed care issues, research obligations, technological applications related to assessment/diagnosis or intervention).
- (4) Courses that are related to the discipline of speech-language pathology or audiology may cover general medical or educational offerings including, but not limited to, social interaction, cultural and linguistic diversity as it applies to service delivery for diverse populations, professional service delivery models, interdisciplinary case management issues, or medical pathologies related to neurological disorders that also result in communication difficulties.
- (d) A provider shall ensure that a course has specific objectives that are measurable.
- (e) Upon completion of a course, a licensee shall evaluate the course through some type of evaluation mechanism.
- (f) Courses considered outside the scope of continuing professional development include, but are not limited to, those in the following areas:
- (1) money management, the licensee's personal finances or personal business matters;
 - (2) general physical fitness or the licensee's personal health;
 - (3) presentations by political or public figures or other persons that do not deal primarily with the practice of either speech-language pathology or audiology;
 - (4) tort liability;
 - (5) courses that address increased office production or computerization, financial planning, employee benefits, marketing or motivational topics to increase productivity or profitability; and
 - (6) courses in which the primary beneficiary is the licensee, not the consumer.

Note: Authority cited: Sections 2531.95 and 2532.6(a), Business and Professions Code.
Reference: Section 2532.6(b), (c) and (e), Business and Professions Code.

§ 1399.160.7. Board-Approved Providers.

- (a) A continuing professional development provider shall meet the Board's course content and instructor qualifications criteria, as provided under this article, to qualify to become a Board - approved provider.
- (b) ~~An applicant for A~~ continuing professional development provider applicant shall submit a completed ~~Continuing Professional Development Provider A~~ application, on a form prescribed by the Board (form no. 77A-50, new 1/99), hereby incorporated by reference, remit the appropriate fees, submit a complete operational plan, and obtain a continuing professional provider number from the Board to become a Board-approved provider.
- (c) A provider approval issued under this section shall expire twenty-four months after the ~~approval~~ issue date. To renew an unexpired provider approval, the provider shall, on or before the expiration date of the approval, pay the biennial renewal fee set forth in Section 1399.157 of these regulations.

- (d) A provider approval that is not renewed by the expiration date may not be renewed, restored, reinstated, or reissued thereafter, but the provider may apply for a new approval.
- (e) Board-approved provider status is not transferable.

Note: Authority cited: Sections 2531.95 and 2532.6(a), Business and Professions Code.
Reference: Section 2532.6(e)(1) and (e)(2), Business and Professions Code.