



## 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, October 7, 2021 beginning at 1:00 p.m., and continuing on  
Friday, October 8, 2021 beginning at 9:00 a.m.***

**NOTE:** Pursuant to the provisions of Government Code section 11133, neither Board member locations nor a public meeting location are provided. Public participation may be through teleconferencing as provided below. 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, October 7, 2021 WebEx Link:**

<https://dca-meetings.webex.com/dca-meetings/j.php?MTID=m804d37503df4c1bb4c3b24b7d770ddd8>

#### **Friday, October 8, 2021 WebEx Link:**

<https://dca-meetings.webex.com/dca-meetings/j.php?MTID=mbc0da643c5c03a245c759f2a08be90d2>

Due to potential technical difficulties, please consider submitting written comments by 5:00 pm, October 5, 2021, to [speechandhearing@dca.ca.gov](mailto:speechandhearing@dca.ca.gov) for consideration.

**Action may be taken on any agenda item.**

### **Board Members**

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

***Thursday, October 7, 2021 starting at 1:00 p.m.***

### **Speech-Language Pathology Practice Committee Meeting Agenda**

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

2. Public Comment for Items not on the Agenda *(The Committee 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))*
3. Discussion and Possible Action Regarding Continuing Professional Development Requirements for Speech-Language Pathologists and Speech-Language Pathology Assistants (As Stated in Title 16, CCR sections 1399.160 through 1399.160.13 and Title 16, CCR section 1399.170.14)

**Hearing Aid Dispensers Committee Meeting Agenda**

1. Call to Order / Roll Call / Establishment of Quorum
2. Public Comment for Items not on the Agenda *(The Committee 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))*
3. Discussion Regarding Continuing Education Course Content Requirements for Hearing Aid Dispensers and Dispensing Audiologists (As Stated in Title 16, CCR section 1399.140.1)
4. Discussion Regarding Continuing Education Requirements for Hearing Aid Dispensers and Dispensing Audiologists (As Stated in Title 16, CCR sections 1399.140)

***Friday, October 8, 2021***

**Full Board Meeting Agenda**

**OPEN SESSION**

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))*
3. Review and Possible Approval of the August 12-13, 2021, Board Teleconference Meeting Minutes
4. Board Chair's Report
  - a. 2021 Board and Committee Meeting Calendar
  - b. Board Committee Updates and Reports
5. Executive Officer's Report
  - a. Administration Update
  - b. Budget Report
  - c. Regulations Report
  - d. Licensing Report
  - e. Practical Examination Report
  - f. Enforcement Report
6. DCA Update – DCA Board and Bureau Relations

7. 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
  
8. Discussion and Possible Action on the Board's 2022 Sunset Review:
  - a. Discussion and Possible Action on the Following Items Regarding the Board's 2016 Sunset Review:
    - i. Status of Long-Term Fund Condition
    - ii. Board Staffing Levels to Meet Performance Goals
    - iii. Training and Examination for Hearing Aid Dispensers
    - iv. English Language Literacy Testing for Foreign Trained Speech-Language Pathologists
    - v. Elimination of the Speech-Language Pathology Aide Designation
    - vi. Addressing the Workforce Shortage in Audiology
    - vii. Addressing the Workforce Shortage in Speech-Language Pathology
    - viii. Status of BreEZe Implementation
    - ix. Addressing Consumer Protection Issues with Locked Hearing Aids
    - x. Technical Statutory Clean-up Issues
  - b. Discussion and Possible Action on the Following Items Regarding the Board's 2022 Sunset Review:
    - i. Creating Speech-Language Pathology and Audiology Aide Renewal and Continuing Professional Development Requirements
    - ii. Audiology Licensing Requirements – Required Clinical and Professional Experience
    - iii. Hearing Aid Dispensers Committee Membership
    - iv. Persons Deemed to Meet Requirements – Updating Audiology Requirements to Allow Qualifications Deemed Equivalent to Include Certificate of Clinical Competence in Audiology and American Board of Audiology Certificate
    - v. Elimination of the Nonoperative Grandfather Clause for Speech-Language Pathology Aides that Allowed Aide Experience to Count Towards Speech-Language Pathology Assistant Licensure That Ended on June 1, 2003 in Business and Professions Code Section 2532.7
    - vi. Technical Statutory Clean-up Issues
    - vii. Including Violations of Business and Professions Code Section 650 in the Board's Definition of Unprofessional Conduct for Enforcement Purposes

**BREAK FOR LUNCH (TIME APPROXIMATE)**

9. Regulatory Report: Update, Review, and Possible Action on Board Regulation Packages
  - a. Update and Discussion of Implementation of Speech-Language Pathology and Audiology Fees (As Stated in 16 California Code of Regulations (CCR) sections 1399.157, 1399.170.13, and 1399.170.14)

- b. Discussion and Possible Action to Amend or Adopt Regulations Regarding Speech-Language Pathology Assistants Requirements (As Stated in Title 16, CCR section 1399.170 through 1399.170.20.1)
  - c. Discussion and Possible Action to Adopt Regulations Regarding Uniform Standards Related to Substance-Abusing Licensees as Title 16, CCR section 1399.131.1 and 1399.155.1
  - d. Discussion and Possible Action to Initiate a Rulemaking and Amend or Adopt Title 16, CCR sections 1399.153 and 1399.153.3 Regarding Required Professional Experience Direct Supervision Requirements and Remote or Tele Supervision
  - e. Discussion and Possible Action to Adopt Regulations Regarding Dispensing Audiologist Examination Requirement (As Stated in Title 16, CCR section 1399.152.4)
  - f. Discussion and Possible Action to Amend Regulations Regarding Board Location and Processing Times (As Stated in Title 16, CCR section 1399.101, 1399.113, 1399.150.1, 1399.151.1 and 1399.160.6 )
10. 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
    - i. AB 435 (Mullin) Hearing aids: locked programming software: notice
  - c. Bills with Active Positions Taken by the Board
    - i. AB 29 (Cooper) State bodies: meetings
    - ii. AB 107 (Salas) Licensure: veterans and military spouses
    - iii. AB 225 (Gray) Department of Consumer Affairs: boards: veterans: military spouses: licenses
    - iv. AB 555 (Lackey) Special education: assistive technology devices
    - v. AB 885 (Quirk) Bagley-Keene Open Meeting Act: teleconferencing
    - vi. AB 1026 (Smith) Business licenses: veterans
    - vii. AB 1361 (Rubio) Childcare and developmental services: preschool: expulsion and suspension: mental health services: reimbursement rates
    - viii. SB 772 (Ochoa Bogh) Professions and vocations: citations: minor violations
  - d. Bills with Recommended Watch Status
    - i. AB 361 (Rivas) Open Meetings: State and Local Agencies: Teleconferences
    - ii. AB 457 (Santiago) Protection of Patient Choice in Telehealth Provider Act
    - iii. AB 468 (Friedman) Emotional Support Dogs
    - iv. AB 486 (Committee on Education) Elementary and secondary education: omnibus bill
    - v. AB 646 (Low) Department of Consumer Affairs: boards: expunged convictions
    - vi. AB 1221 (Flora) Consumer Warranties: Service Contracts: Cancellation: Disclosures
    - vii. AB 1236 (Ting) Healing arts: licensees: data collection
    - viii. AB 1291 (Frazier) State Bodies: Open Meetings
    - ix. AB 1308 (Ting) Arrest and Conviction Record Relief
    - x. SB 607 (Min) Professions and vocations
    - xi. SB 731 (Durazo) Criminal records: relief
11. 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)
12. Discussion and Possible Action on the Executive Officer Salary or Executive Officer Level Increase
13. Future Agenda Items

## **CLOSED SESSION**

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

## **OPEN SESSION**

15. Adjournment

*Agendas and materials can be found on the Board's website at [www.speechandhearing.ca.gov](http://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.*

## WEBEX FEATURES FOR PARTICIPANTS

Note: The following features and functions reflect only those relative to participant end user interface and functionality. For programs who desire to moderate/co-moderate their own meetings, SOLID can provide training and materials to reflect features and functions associated with these roles.

### Joining a Webex Event

Navigate to the WebEx event using the link provided by the DCA entity via an internet browser. Webex will, in some instances, auto-populate name fields upon sign-in. As a result, some individuals may be automatically logged into the meeting with a Webex generated name (examples below).



*Note: It is important for individuals to update the name fields when logging in to correctly reflect their identity to assist the moderator in identifying meeting participants. While we do not require the public to identify themselves, this is particularly important for staff, members, and presenters.*

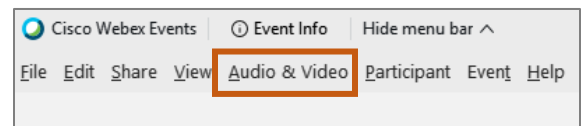
The event password will be entered automatically. If you alter the password by accident, close the browser and click the event link provided again. Click on “Join Now” (do not click “Join by browser”).

### Audio

You can select to use either your computer speaker/microphone, a headset, or your phone for audio.

To utilize your phone:

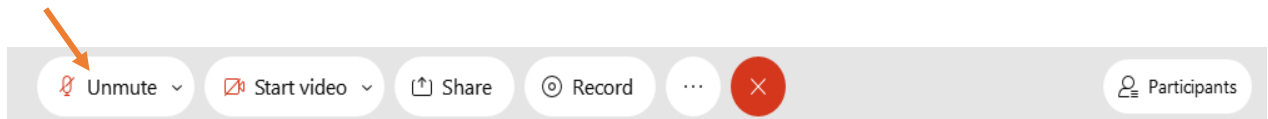
- Click on “Audio & Video” from the menu bar
- Select “Switch Audio”
- Select the “Call In” option and follow the directions



*Note: If you connected your audio through your phone, your mute and unmute button should be controlled from your computer or tablet. If you are having trouble unmuting yourself, you may be muted through your phone.*

### Microphone Indicators

Click on the microphone icon to mute and unmute yourself. You can also mute and unmute yourself using microphone icon next to your name from the participant panel.

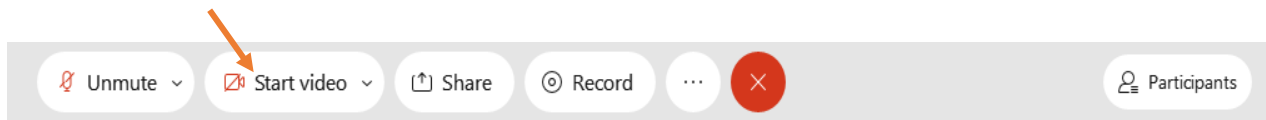


The green microphone indicates your microphone is open and meeting participants can hear you. If your microphone is red, you are muted.



## Camera Indicators

Click on the video icon to turn your camera on and off.

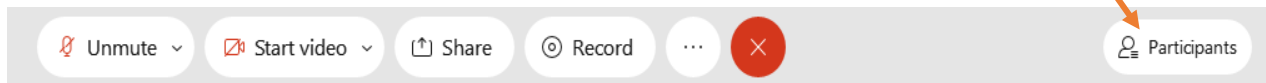


The green camera indicates your camera is on and meeting participants can see you. If your camera is red, your camera is off, and you cannot be seen.



## Meeting Participants

To see who is in the meeting, you can access the participant list by clicking on the participant icon on the command row.

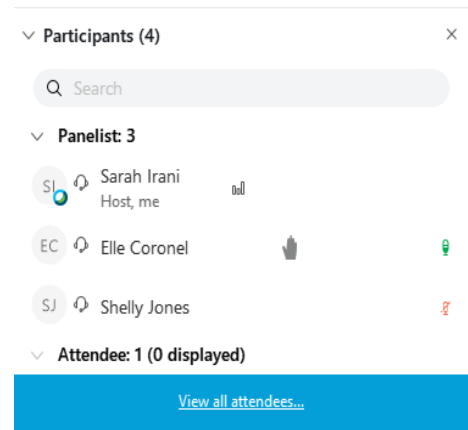


By clicking on this icon, it should display the participant list on the right side of your screen.

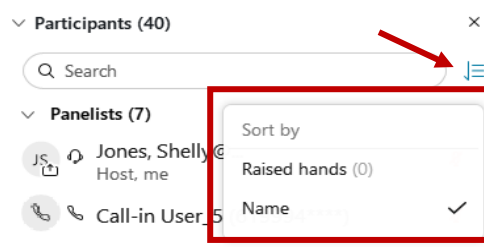
*This is an example of a participant list that will display on the right side of your screen.*

*Icons will appear next to individual names to indicate if they are muted, speaking or background noise, or have their hand raised.*

*This is helpful to distinguish who is speaking or who is trying to contribute to the conversation. In addition, it is helpful if you state your name before speaking.*

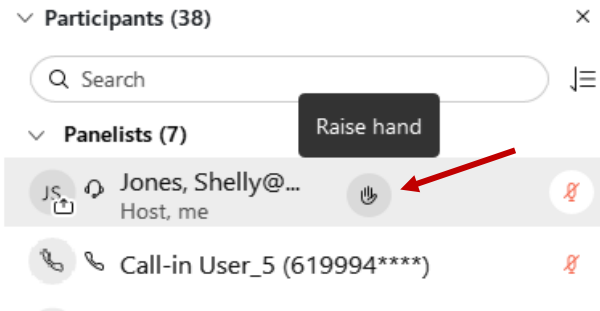


The panelist list has a “sort” feature, which can be located to the right of the search field in the participant panel. Clicking on the sort icon allows the list of panelists to be sorted by either name or raised hands. This feature can be particularly useful for programs who utilize the hand raise feature for discussion.



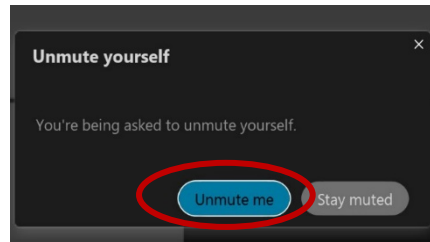
## Hand Raise Feature

The hand raise feature is now located next to each participant's name in Webex, both for panelists and attendees. Participants can click the hand icon next to their name to raise and lower their hand.



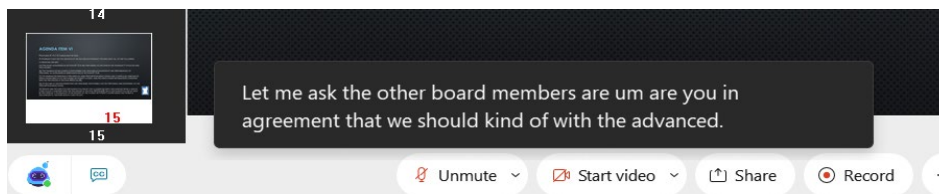
## Unmuting Microphones

When the moderator unmutes a participant's microphone, Webex will prompt the participant to unmute themselves. The participant must click the displayed "Unmute me" button to unmute their microphone.

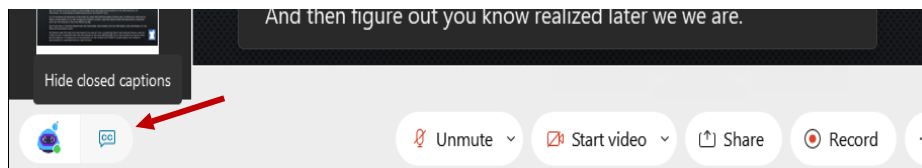


## Closed Captioning

Webex provides real-time closed captioning that are displayed in a dialog box within the Webex screen. Participants can click on the dialog box and drag it to any location on the Webex screen.



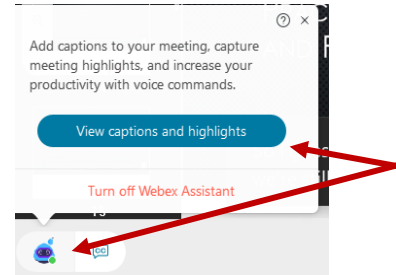
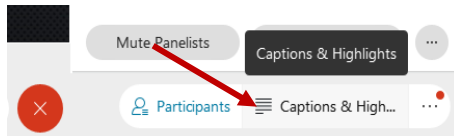
The closed captioning can be hidden from view by clicking on the closed captioning icon. You can repeat this action to unhide the dialog box.



Closed captioning can be viewed in a transcript style that displays the captions by speaker. You can enable and disable this feature through either the participant panel or the Webex Assistant.

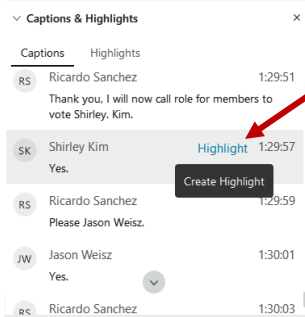


- To access this feature via that participant panel, click on the 3 dots at the bottom of the participant panel and select Captions and Highlights
- To use the Webex Assistant, hover over the robot icon on your screen and select either View or Hide captions and highlights.



“Highlighting” is a feature of Webex closed captioning that provides a valuable tool for program staff by allowing quick and easy access to important information, such as motions, votes, action items, or any other caption that contains pertinent information that the program may need to revisit or reference.

To highlight a caption, hover over the caption and click Highlight.



You can also undo a highlight by hovering over a previously highlighted caption and clicking Unhighlight.



# MEMORANDUM

DATE	October 7, 2021
TO	Hearing Aid Dispensing Committee
FROM	Cherise Burns, Assistant Executive Officer
SUBJECT	Agenda Item 3: Discussion Regarding Continuing Education Course Content Requirements (As Stated in Title 16, CCR section 1399.140.1)

## **Background**

In October of 2016, the Board finalized regulations that revised the CE course content requirements and increased the number of hours of self-study continuing education (CE) that were allowed for Hearing Aid Dispensers and Dispensing Audiologists.

In May of 2021, the Board reviewed current CE requirements for Hearing Aid Dispensers and Dispensing Audiologists and determined that additional revisions to these requirements were merited and delegated the review of these requirements to the Hearing Aid Dispensing Committee (Committee).

Currently, CE course content requirements for Hearing Aid Dispensers and Dispensing Audiologists are defined in Title 16, CCR section 1399.140.1 as follows:

### **Continuing Education Course Content.**

(a) The content of a continuing education course shall pertain to direct, related, or indirect patient/client care. Course content shall not focus on equipment, devices, or other products of a particular publisher, company, or corporation.

(1) Direct client care courses cover current practices in the fitting of hearing aids.

(2) Indirect patient/client care courses cover practical aspects of hearing aid dispensing (e.g., legal or ethical issues (including the ethics of advertising and marketing), consultation, record-keeping, office management, and managed care issues).

(3) Courses that are related to the discipline of hearing aid dispensing may cover general health condition or educational course offerings including, but not limited to, social interaction, cultural and linguistic diversity as it applies to service delivery for diverse populations, service delivery models, interdisciplinary case management issues, or medical pathologies that also result in hearing difficulties.

(b) Examples of courses that are considered outside the scope of acceptable course content include: personal finances and business matters, marketing and sales, and office operations that are not for the benefit of the consumer.

From a regulatory perspective, CE requirements are intended to protect California consumers by ensuring that licensees stay current with their skills, knowledge, and the new technologies required to dispense hearing aids safely and competently. Through CE licensees can also learn to maintain ethical practices and enhance services provided to consumers.

Considering the intent of CE requirements while also recognizing that current CE requirements may unintentionally limit the number and types of learning opportunities Hearing Aid Dispensers need in order to best enhance services to consumers, staff has developed some discussion questions for the Committee's consideration to help guide development of amendments to the CE course content requirements in Title 16, CCR section 1399.140.1.

### **Discussion Questions**

1. Is the restriction to "not focus courses on equipment, devices, or other products" overly broad? Does this limit Hearing Aid Dispensers and Dispensing Audiologists ability to get continuing education credit for obtaining additional training on the programming and post-fitting adjustment of specific hearing aids that could directly benefit consumers by maximizing the benefit of the hearing aid to individual consumers' hearing needs. While there may be a need to exclude demonstration, sales and advertising meetings from being counted as CE, is the language of the current language overly restrictive?
2. Are there additional areas of direct client care that should be added to the definition of direct client care courses? Is the definition specific enough to delineate direct client care courses from related to the discipline of hearing aid dispensing courses?
3. Since the purpose of CE requirements is to protect California consumers and maintain ethical practice, should legal or ethical issues (including the ethics of advertising and marketing) be included in the indirect patient/client care coursework definition? Especially considering that related or indirect client care continuing education is limited to three (3) of the 12 hours required (Title 16, CCR section 1399.140) and consumer complaints received by the Board often center around legal or ethical issues with the dispensing of hearing aids. For this reason, should legal or ethical issues be in a standalone category?
4. Are there additional hearing loss and hearing related health issues that are not named in the definition of "courses that are related to the discipline of hearing aid dispensing" that should be added to the definition?

5. Are there additional course subjects that should be identified as outside the scope of acceptable course content?

**Action Requested**

Staff recommends that the Committee provide staff with policy direction on the discussion questions identified above to guide staff's development of proposed amendments to Title 16 CCR section 1399.140.1 for consideration at the next Committee meeting.



# MEMORANDUM

DATE	October 7, 2021
TO	Hearing Aid Dispensing Committee
FROM	Cherise Burns, Assistant Executive Officer
SUBJECT	Agenda Item 4: Discussion Regarding Continuing Education Requirements for Hearing Aid Dispensers and Dispensing Audiologists (As Stated in Title 16, CCR section 1399.140)

## **Background**

In October of 2016, the Board finalized regulations that revised the CE course content requirements and increased the number of hours of self-study continuing education (CE) that were allowed for Hearing Aid Dispensers and Dispensing Audiologists.

In May of 2021, the Board reviewed current CE requirements for Hearing Aid Dispensers and Dispensing Audiologists and determined that additional revisions to these requirements were merited and delegated the review of these requirements to the Hearing Aid Dispensing Committee (Committee).

Currently, CE requirements for Hearing Aid Dispensers are defined in Title 16, CCR section 1399.140 as follows:

### **Continuing Education Required.**

(a) Any hearing aid license that expires on or after July 1, 2017, is required to complete at least twelve (12) hours of continuing education from a provider approved under Section 1399.141 during each annual renewal period.

(1) No more than three (3) hours of continuing education may be credited in related or indirect client care courses as provided in Section 1399.140.1.

(2)(A) No more than six (6) hours of the required continuing education may be credited for self-study or correspondence-type coursework, e.g., recorded courses, home study materials, or computer courses.

(B) Self-study does not include live courses. 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 affords participants the opportunity to interact with an instructor and/or other course participants.

(b) Records showing completion of each continuing education course shall be maintained by the dispenser for two (2) years following the renewal period in which it was earned.

(c) Each dispenser renewing his or her license under the provisions of Section 2538.53 of the Code shall be required to submit proof satisfactory to the Board of compliance with the provisions of this article. Records shall be provided to the Board in response to a compliance audit.

(d) Verification of compliance shall be documented at the time of license renewal on a form provided by the Board.

(e) This article shall not apply to any dispenser who is renewing a license for the first time following the issuance of an initial permanent license.

(f) Any person whose hearing aid dispenser's license has been expired for two years or more shall complete the required hours of approved continuing education for the prior two years before such license may be restored.

From a regulatory perspective, CE requirements are intended to protect California consumers by ensuring that licensees stay current with their skills, knowledge, and the new technologies required to dispense hearing aids safely and competently. Through CE licensees can also learn to maintain ethical practices and enhance services provided to consumers.

Considering the intent of CE requirements, staff has developed some discussion questions for the Committee's consideration to help guide development of amendments to the CE requirements for Hearing Aid Dispensers in Title 16, CCR section 1399.140.

### **Discussion Questions**

1. Is the limitation of three (3) hours of CE in related or indirect client care courses too restrictive? While the focus on direct client care is critical, this rule essentially requires that 75 percent of CE be focused on direct client care. Where this may certainly be helpful or even necessary for newly licensed Hearing Aid Dispensers, both those that have attained additional education and training and those that have been licensed for many years may benefit from more flexibility to tailor their CE to their educational needs. Should the limitation on related or indirect client care CE courses be lowered to 50 percent to ensure adequate direct client care coursework for newer Hearing Aid Dispensers while allowing greater flexibility for more experience Hearing Aid Dispensers?
2. If the Committee determined that legal or ethics courses should have their own category, should they be included in the limitations placed on related and indirect client care or have their own standalone limitation?
3. Currently, there are very limited options for "live" CE courses for Hearing Aid Dispensers. If the Committee determined in Agenda Item 3 that programming and post-fitting adjustment of specific hearing aids should be allowable CE courses in direct client care, would this increase the availability of "live" CE courses for Hearing Aid Dispensers?

4. Does the committee believe the definition for self-study is still appropriate or should it be reevaluated or updated? Currently the definition allows all live courses, however live is not defined. Should live be defined as synchronous instruction and learning where the course instruction and licensee participation in the course are occurring simultaneously?

**Action Requested**

Staff recommends that the Committee provide staff with policy direction on the discussion questions identified above to guide staff's development of proposed amendments to Title 16 CCR section 1399.140 for consideration at the next Committee meeting.



# MEMORANDUM

DATE	October 7, 2021
TO	Speech-Language Pathology Practice Committee
FROM	Cherise Burns, Assistant Executive Officer
SUBJECT	Agenda Item 3: Discussion and Possible Action Regarding Continuing Professional Development Requirements (As Stated in Title 16, CCR sections 1399.160 through 1399.160.13 and Title 16, CCR section 1399.170.14)

## **Background**

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

In August of 2021, the Speech-Language Pathology Practice Committee (Committee) reviewed the Board approved CPD regulatory revisions from 2016 and determined that additional revisions were necessary to update the definition of self-study and to potentially increase the percentage of self-study allowed for Speech-Language Pathologists. In August of 2021, the Audiology Practice Committee also reviewed the Board approved CPD regulatory revisions from 2016 and determined revisions to the definition of self-study were necessary but that the ability to use self-study for 50 percent of the required CPD hours was adequate.

In accordance with the direction of the Committee, staff has developed revised regulatory language for the Committee's consideration.

## **Action Requested**

Staff recommends that the Speech-Language Pathology Practice Committee review the additional revisions to the CPD regulatory requirements, and if the Committee finds these proposed revisions acceptable, recommend the proposed revisions for consideration by the full Board. Please note, revisions are identified with double strikethrough or double underline and highlighted for readability.

Attachment: Proposed Revisions to Board Approved 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 “Asynchronous Continuing Professional Development 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 an participatory interaction between the licensee and the instructor during the instructional period where course instruction and licensee participation in the course do not occur simultaneously.~~ 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 self-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) “Synchronous Continuing Professional Development” means any form of systematic learning where the course instruction and licensee participation in the course are occurring simultaneously.

(d) 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.

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

(f) 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.

(g) “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).~~
- (ba) 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.
- (cb) 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~~ 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.~~

~~(12)~~ 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).

~~(23)~~ 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) N~~o 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 of 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~~ 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.



## MEMORANDUM

DATE	September 29, 2021
TO	Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board
FROM	Maria Liranzo, Legislation/Regulation/Budget Analyst
SUBJECT	Agenda Item 3: Review and Possible Approval of the August 12-13, 2021 Board Teleconference Meeting Minutes

### **Background**

Attached is a draft of the meeting minutes from the August 12-13, 2021 Board Teleconference Meeting.

### **Action Requested**

Please review and discuss whether there are necessary corrections or additional information needed. If not, make a motion to approve the August 12-13, 2021 Board Meeting minutes.

Attachment: August 12-13, 2021 Board Meeting Minutes



**BOARD MEETING MINUTES – DRAFT**  
**Teleconference Meeting**  
**August 12-13, 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.

**Audiology Practice Committee**

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

Dr. Marcia Raggio, Board Chair, called the Audiology Practice Committee meeting to order at 9:01 a.m. Dr. Raggio called roll; two members of the Committee were present and thus a quorum was not established.

Committee Members Present

Marcia Raggio, AuD, Board Chair  
Karen Chang, Public Board Member

Staff Present

Paul Sanchez, Executive Officer  
Cherise Burns, Assistant Executive Officer  
Lisa Snelling, Licensing Coordinator  
Tenisha Ashford, Enforcement Coordinator  
Heather Olivares, Legislation/Regulation Analyst  
Maria Liranzo, Legislation/Regulation/Budget Analyst  
Michael Kanotz, DCA Legal Counsel  
Karen Halbo, DCA Regulations Counsel  
Mike Sanchez, DCA Web Cast  
Sarah Irani, DCA Web Cast

Guests Present

Jody Winzelberg, AuD  
Joanne Slater, AuD  
Carolyn Bower, AuD  
Michele Linares

2. Public Comment for Items not on the Agenda

There were no comments from the public, outside agencies, or associations.



### 3. Discussion and Possible Action Regarding Audiology Licensing Requirements Related to Supervised Clinical/Professional Experience (As Stated in Business and Professions Code Sections 2532.2 and 2532.25 and Title 16, California Code of Regulations (CCR) section 1399.152.2)

Dr. Marcia Raggio provided a summary on audiology licensing requirements related to supervised clinical/professional experience. Dr. Raggio stated the current statute restricts students from completing the audiology doctoral program and the Board will be proposing at its next Sunset Review a legislative proposal to amend the statute. Dr. Raggio further stated that discussions on the regulatory changes to accompany the statutory changes are needed.

Dr. Raggio stated that many individuals are requesting for clinical hours prior to the required professional experience (RPE) year to be counted toward their RPE hours. Dr. Raggio further stated that programs have clinical rotations in which the students are fully supervised during the first year of their program. Dr. Raggio suggested to count clinical rotation prior the official RPE year up to approximately up to 40%.

Dr. Jody Winzelberg, Coordinator of Clinical Training at San Jose State University, commented her support for Dr. Raggio suggestion. Dr. Winzelberg shared that her program does not count shift hours for on-campus clinics but only direct clinical hours, which are supervised hours with direct patient contact. Dr. Winzelberg further stated shift hours are only counted when students are out in the community on an internship rotation.

Dr. Raggio asked for clarification on the hours that are counted at San Jose State University. Dr. Winzelberg stated clinical hours are supervised, simulations hours are also supervised, but lab hours may not be supervised.

Dr. Raggio asked if the program at San Jose State University starts any type of rotation during the first year. Dr. Winzelberg stated external rotations do not start in the first year but clinical rotations at the campus clinic starts in the spring of the first year.

Dr. Raggio asked if there should be limitations on the number of hours counted. Dr. Winzelberg stated she doesn't understand why there would be limitations if the hours are fully supervised and would be happy to have further discussion on the topic. Dr. Raggio shared that during earlier discussions there were concerns that true clinical learning occurs after a student has acquired all the didactics.

Dr. Raggio asked if audiology simulations should be counted. Dr. Winzelberg stated it can either be a simulation or lab depending on if the simulation is on an actual audiologic procedure. Dr. Winzelberg suggested a limitation to simulation hours on the total hours required.

Dr. Raggio asked the type of task that are included in the hours such as writing reports, calling hearing aid manufactures, or contacting physicians. Dr. Jody Winzelberg stated that once students are placed externally that these are functions of a practice which are

not part of a university setting; therefore, these are those tasks that should be counted towards the total hours as shift hours when the student is out in the community on rotation.

Dr. Raggio asked regarding out-of-state programs or students with federal visas. Dr. Winzelberg stated that program coordinators were considering a 11-month program instead of 12-month, while maintaining the time and clock hours requirement, to accommodate students with federal visas to complete the program and find a job. Cherise Burns shared that there are states that have doctoral programs with externship hours under California's required hours or no longer offer externship as part of the doctoral program. Dr. Winzelberg stated her program is new and haven't come across this issue but would be happy to reach out to her faculty regarding it.

Dr. Marcia Raggio asked if student need to hold RPE license for early clinical hours. Jody Winzelberg stated that she wouldn't want those students license until their RPE as they are fully supervised by the program on campus.

Dr. Marcia Raggio asked regarding a prior discussion on removing RPE requirements. Cherise Burns shared that it was considered and turned down as it was a good transition to full licensure. Dr. Winzelberg also shared that once students begin their externship, the program doesn't have direct oversight of the day-to-day activities and therefore a temporary RPE license would be good to have for consumer protection.

Dr. Raggio provided a summary of the discussion and issues to look at in the future to develop the regulatory language. Karen Chang asked if the Board has contact information to program directors/coordinators and suggested if the questions asked today can be sent to them as a survey. Ms. Burns stated the Board staff can complete this task.

#### 4. Discussion and Possible Action Regarding Continuing Professional Development Requirements for Audiologists (As Stated in Title 16, CCR sections 1399.160 through 1399.160.13)

Dr. Marcia Raggio provided a summary on continuing professional development (CPD) requirements for audiologists. Dr. Raggio stated the Committee is reviewing the previously approved regulatory language on self-study, in particular the definition of self-study and the percentage of hours to include for the CPD requirements.

Cherise Burns read the current proposed regulatory language on the definition of self-study. Dr. Raggio stated she does not have experience in self-study and can't speak too much on the matter as she prefers in-person courses. Karen Chang commented that from her experience self-study does not provide a genuine experience compared to an in-person course.

Paul Sanchez shared that the previous Board felt having a percentage of hours on self-study was important to still encourage interactive learning as part of CPD requirement. Dr. Raggio stated the consensus in the Audiology community is that face-to-face, hands-on is the preferred method and expressed concerns that if all the hours were for self-

study that an individual may wait to the last minute to complete all their continuing education (CE) hours.

Dr. Joanne Slater, Continuing Education Administrator with Audiology Online, commented that participant engagement may be the same at both a virtual or in-person course; and due to time restriction at an in-person event, many participants are listening rather than engaging with speakers. Dr. Slater further commented that the availability of in-person events may limit the licensee's availability to their patients due to the date and location of the event. Dr. Slater also commented that there are many different types of learners with different experience with online or other self-study materials that the Board should consider. Ms. Burns shared her experiences as a CE Auditor in her prior position and suggested changes to the proposed language to include participant/instructor interaction and possibly include a definition to synchronous and asynchronous.

Dr. Raggio asked if the 50% self-study hours was approved by the Board. Mr. Sanchez and Ms. Burns stated that it was. Dr. Raggio commented that the only decision that needs to be made is if self-study should be an interactive experience and sought for Karen Chang's feedback. Ms. Chang stated she is comfort with the proposed language. Mr. Sanchez asked for clarification on the meaning of face-to-face and in-person events. Ms. Burns suggested to use the terms recorded and pre-recorded to clarify any definitions.

Dr. Carolyn Bower, President of California Academy of Audiology (CAA), clarified that the CAA conference will only be in-person as it is costly to provide both in-person and virtual format. Dr. Raggio asked what the CAA's position on the delivery method for self-study. Dr. Bower stated the consensus is the CAA can provide training in both virtual and in-person format. Dr. Raggio asked if the CAA's board members expressed any personal preference on the delivery method of self-study. Dr. Bower stated there is a wide variety of preference, with no preference to one, on the delivery method of self-study.

Dr. Slater suggested the Board to align their definition to what is being publicly used in education such as synchronous and asynchronous. Dr. Slater commented increase hours of self-study may provide individuals the opportunity to attend courses on areas related to their daily practice and not an interest. Dr. Slater further commented to look at other boards CE requirements as the proposed requirement is a little stringent compare to other Audiology boards.

Michele Linares, Chair for the California Speech Language Hearing Association, commented to keep into consideration different learners and expressed concerns of making decision based on individuals who wait to the last minute to complete all their CE hours.

Ms. Chang asked for clarification on the meeting material Attachment B on California CE/CPD Requirements. Ms. Burns clarified that none under the self-study limitations column means there are no limitations to the self-study. Ms. Chang proposed to change the language to synchronous and asynchronous.

Dr. Raggio asked for further comments regarding the percentage of self-study CE requirement. Mr. Sanchez commented that the Board has taken into consideration different learning styles while ensuring consumer protection.

Dr. Raggio provided a summary of the discussion and noted changes to the previously approved regulatory language to include publicly used terms.

The meeting adjourned at 10:30 a.m.

### **Speech-Language Pathology Practice Committee**

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

Holly Kaiser, Board Vice Chair, called the Speech-Language Pathology Practice Committee meeting to order at 10:40 a.m. Ms. Kaiser called roll; three members of the Committee were present and thus a quorum was established.

#### Committee Members Present

Holly Kaiser, SLP, Board Vice Chair  
Gilda Dominguez, SLP, Board Member  
Debbie Snow, Public Board Member

#### Staff Present

Paul Sanchez, Executive Officer  
Cherise Burns, Assistant Executive Officer  
Lisa Snelling, Licensing Coordinator  
Tenisha Ashford, Enforcement Coordinator  
Heather Olivares, Legislation/Regulation Analyst  
Maria Liranzo, Legislation/Regulation/Budget Analyst  
Michael Kanotz, DCA Legal Counsel  
Karen Halbo, DCA Regulations Counsel  
Mike Sanchez, DCA Web Cast  
Sarah Irani, DCA Web Cast

#### Guests Present

Michele Linares

#### 2. Public Comment for Items not on the Agenda

There were no comments from the public, outside agencies, or associations.

#### 3. Discussion and Possible Action Regarding Continuing Professional Development Requirements for Speech-Language Pathologists and Speech-Language Pathology Assistants (As Stated in Title 16, CCR sections 1399.160 through 1399.160.13 and Title 16, CCR section 1399.170.14)

Holly Kaiser provided a summary on continuing professional development (CPD) requirements for Speech-Language Pathologists (SLP) and Speech-Language Pathology Assistants (SLPA). Ms. Kaiser stated the Committee is reviewing the previously approved regulatory language on self-study, in particular the definition of self-study and the percentage of self-study hours to include in the CPD requirements. Ms. Kaiser commented on the advancements of online self-study which has been more pronounced since the COVID-19 pandemic and received comments from individuals who expressed their concerns of the proposed hours as still too restrictive.

Gilda Dominguez stated the need for further discussion on the inclusion of the terms synchronous and asynchronous in the proposed regulatory language. Ms. Kaiser asked if she had any comments on the number or percentage of self-study hours. Ms. Dominguez commented the need to take into consideration issues raised such as availability of courses, monetary barriers, and convenience of self-study.

Debbie Snow stated that further discussion on the definition of self-study is needed and the need for more flexibility for self-study and online learning.

Michele Linares, Chair for the California Speech Language Hearing Association, commented on the need to allow for continual education to be accessible by many different means and suggested removing all restrictions to self-study hours.

Ms. Kaiser asked about the rulemaking process timeline. Paul Sanchez provided a summary of the timeline if the current proposed language moves forward and a timeline if major changes are made. Cherise Burns noted that if there are deviations in the language between the two Committees that the proposed language may need to be separated.

Ms. Kaiser commented that this Committee is in alignment with the Audiology on the definition of self-study but may consider removing number of hours limitations. Ms. Dominguez complimented the meeting material Attachment B on California CE/CPD Requirements as it was informative to see other healing arts board's requirements.

Ms. Kaiser provided a summary of the discussion and the Committee's actions to update the self-study definition to include the terms synchronous and asynchronous and considerations to increasing the number of self-study hours.

#### 4. Discussion and Possible Action Regarding Maximum Number of Support Personnel of Speech-Language Pathologists (As Stated in Title 16, CCR section 1399.170.16)

Holly Kaiser provided a summary on maximum number of support personnel of SLPs. Ms. Kaiser stated the Committee is reviewing whether it is appropriate to allow greater flexibility to SLPs to meet the speech therapy needs of their consumers by allowing part-time equivalence in the limitation.

Gilda Dominguez shared comments provided from a phone meeting held on June 16, 2021 with leaders from the California Speech Language Hearing Association (CSHA) echoing concerns in the number of support personnel with no part-time equivalence and the barriers it creates to employment.

Debbie Snow commented that she defers to the other Board members who are in the profession but asked if there is a differentiation in the level of supervision needed. Ms. Kaiser stated in regulation there are supervision requirement during the first 90 days although the SLP will always be responsible of the SLPA work. Ms. Dominguez commented the caseload must be manageable by the SLP and the support personnel cannot have their own caseload.

Ms. Kaiser asked about different settings and the number of support personnel. Ms. Dominguez stated a challenge in acute hospitals settings.

Michele Linares commented the challenges of private practices to employ career SLPAs when there are no SLP to supervise them, the lack of part-time equivalence, and the shortages of SLPs overall. Ms Linareas also expressed concerns in the restrictions in the number of support personnel that isn't found in other healing arts boards.

Ms. Kaiser asked whether the level of supervision required of SLPAs with a certain level of experience should be different. Ms. Linares commented that she had career SLPAs who can complete tasks within their scope and don't need the level of supervision that a new SLPAs out of a program would need. Ms. Linares further commented that settings, such as university or hospital, plays a role in level of experience.

Ms. Kaiser asked what would be required to change the number of support personnel while considering the level of experience and work settings regarding enforcement. Cherise Burns stated enforcing the number of support personnel is generally a cap or a cap and its equivalent for part-time. Ms. Burns further stated to implement enforcement for the level of experience may be more challenging and noted that the Board will have a discussion at the full-board meeting on the SLPA regulations which will include discussing the first 90 days supervision requirement. Paul Sanchez noted the discussion is on reducing barriers to the number of personnel and not creating restriction. Mr. Sanchez cautioned on creating enforcement workload on the different intricacies on the hours or working settings involved.

Ms. Kaiser stated that she is open to include language on part-time equivalence with a maximum limitation. Ms. Dominguez agreed to consider full-time equivalent (FTE) with the possibility of increasing the total number of support personnel. Ms. Dominguez also requested data on other healing arts boards' number of support personnel to be available at the next discussion.

Ms. Snow commented that there appears to be a need to increase the number of support personnel but to also include in the discussion reducing SLPAs working out of their scope of practice. Mr. Sanchez noted the issue was more about flexibility in support personnel

than the actual number. Ms. Burns also noted the changes can be made to not specify the type of personnel to the total number of support personnel. Ms. Kaiser agreed that including language on FTE and removing language that specify the type of personnel are the two points to consider moving forward. Ms. Dominguez also agreed and commented that increasing the number of support personnel may be too much to manage.

Ms. Kaiser provided a summary of the discussion and recommends to the Board to add language on FTE and removing language that “not more than two support personnel can be SLPAs.” Mr. Sanchez asked about the suggestion to add language on the number of hours for FTE. Ms. Kaiser confirmed that she suggested the FTE by part-time. Ms. Burns agreed with Ms. Kaiser that it would be easier to implement and enforce if it is written out in those terms.

Ms. Linares commented that the language should align with current employment practices and the number of support personnel to other healing arts boards. Ms. Linares further commented on the employment issue of SLPAs employment being contingent on someone else. Ms. Kaiser agreed and recommended future discussion should be defining FTE while considering employment practices and looking at what other healing arts boards are doing.

The meeting adjourned at 11:49 a.m.

## **Board 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 12:01 p.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 Board Chair  
Tod Borges, HAD, Board Member  
Karen Chang, Public Board Member  
Gilda Dominguez, SLP, Board Member  
Debbie Snow, Public Board Member

#### **Staff Present**

Paul Sanchez, Executive Officer  
Cherise Burns, Assistant Executive Officer  
Lisa Snelling, Licensing Coordinator  
Tenisha Ashford, Enforcement Coordinator  
Heather Olivares, Legislation/Regulation Analyst  
Maria Liranzo, Legislation/Regulation/Budget Analyst  
Michael Kanotz, DCA Legal Counsel

Karen Halbo, DCA Regulations Counsel  
Brianna Miller, DCA Executive Office  
Mike Sanchez, DCA Web Cast  
Shelly Jones, DCA Web Cast  
Cesar Victoria, DCA Web Cast

Guests Present

Melanie Gilbert  
Michele Linares  
David M. Lechuga, Ph.D  
Nancy Brison-Moll, Ph.D.  
Ann Tran-Lien, JD  
Mario Espitia, DSW  
James Hiramoto, Ph.D.  
Douglas Beck, Au.D  
Linda Pippert

2. Public Comment for Items not on the Agenda

Melanie Gilbert, Board Member for the California Academy of Audiology, raised a concern regarding the California Department of Health Care Services list of providers for their pediatric hearing aid program, and noted there are providers listed that are no longer licensed nor have the necessary training to serve the pediatric population.

3. Petition for Reduction of Penalty – Michael Trythall

A petition for reduction of penalty was heard with Administrative Law Judge Thomas Heller presiding. The people were represented by Deputy Attorney General Brian Lee. The petitioner, Michael Trythall, was represented by Robert Weinberg.

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.

The Board met in closed session and subsequently adjourned for the day.

5. 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 9:01 a.m. Dr. Raggio called roll; six members of the Board were present and thus a quorum was established.

6. Public Comment for Items not on the Agenda

There were no comments from the public, outside agencies, or associations.



7. Review and Possible Approval of the May 13-14, 2021, Board Teleconference Meeting Minutes

**M/S/C Kaiser/Snow**

**Motion to approve the May 13-14, 2021 Board meeting minutes. The motion carried 6-0.**

8. Board Chair's Report

Dr. Marcia Raggio discussed the 2021 Board and Committee Meeting Calendar and noted the next meetings are on October 7-8, 2021 and November 5, 2021. Dr. Raggio inquired about the purpose of the November meeting as it is scheduled soon after a board meeting. Cherise Burns explained the November 5, 2021 meeting will be for changes to the Sunset Review Report after the October meeting and can be cancelled if additional Board approval is not needed.

Dr. Raggio provided an update on the Audiology Practice Committee and noted further discussions are needed on the two items discussed. Dr. Raggio stated the proposed regulation language regarding supervised clinical/professional experience were voted on in the past which would allow students to use earlier clinical rotation as part of their Required Professional Experience requirements; however, there are many aspects of the regulatory language in need of further development that the Committee will reach out to the community for input through a survey. Dr. Raggio also stated the Committee accepted the 50 percent self-study hours as part of the continuing professional development requirements and will be working on updating the proposed regulatory language in a future meeting.

Holly Kaiser provided an update on the Speech-Language Pathology Practice Committee and noted further discussion is needed to finalize the proposed regulatory language for self-study hours. Ms. Kaiser stated the Committee discussed removing regulatory language on restrictions to support personnel, changing the number of support personnel, and defining any new terms.

Michele Linares, Chair for the California Speech Language Hearing Association, commented on differentiating new and career Speech-Language Pathology Assistants (SLPA) in the regulatory language.

Dr. Raggio inquired about the amount of supervision required depending on the activity of SLPA. Ms. Kaiser stated this can be discussed as part of the Regulatory Report, Agenda Item 14.

9. Executive Officer's Report

a. Administration Update

Paul Sanchez provided an update on the Business Modernization Project and the office's COVID-19 pandemic response plan.

Mr. Sanchez announced the hiring of Maria Liranzo to fill the vacancy for a Legislation and Regulation position. Mr. Sanchez also announced the Board has filled a vacancy for an Enforcement position.

b. Budget Report

Paul Sanchez provided an overview of the budget report provided by the DCA Budget Office. Mr. Sanchez stated the SFY 20/21 budget is expected to be expended.

c. Regulations Report

Paul Sanchez provided an overview of the regulations report. Mr. Sanchez noted the items listed are either in the initial review process or being noticed.

d. Licensing Report

Paul Sanchez provided an overview of the licensing report. Mr. Sanchez stated the licensing processing time has increased due to an increase of applications.

e. Practical Examination Report

Paul Sanchez provided an overview of the practical exam report. Mr. Sanchez highlighted the statistics of the April 2021 examination.

f. Enforcement Report

Paul Sanchez provided an overview of the enforcement report. Mr. Sanchez reported a decrease in the number of complaints and investigations during SFY 20/21 which may be due to COVID. Mr. Sanchez highlighted the data are displayed by licensing type as requested by the Board and data on disciplinary actions adopted by the Board is also available in the report.

Mr. Sanchez noted the California Attorney General, Rob Bonta, issued a consumer alert on hearing aids sold online or over the counter.

Holly Kaiser inquired about the meaning of "SPT" on licenses issued table. Cherise Burns stated it is temporary license.

## 10. Overview of the Sunset Review Process and Timeline

Paul Sanchez provided an overview of the Sunset Review process and timeline. Mr. Sanchez stated the draft report will be presented to the Board at the October meeting and if there are any changes to the report after the October meeting, the November meeting

will be held to finalize the report. Mr. Sanchez further stated the report will be presented to the Legislature in Spring 2022.

Holly Kaiser inquired about what the sunset hearing entails. Mr. Sanchez explained that the Board Chair, Board Vice Chair or designated representative, and himself will need to attend the hearing to provide a brief presentation and answer any questions.

#### 11. DCA Update – DCA Board and Bureau Relations

Brianna Miller with the DCA Executive Office provided a Department update including Board vacancies, new and current statewide response to the COVID-19 pandemic, and required board member training.

Dr. Marcia Raggio inquired about the Governor's order on in-person meeting. Ms. Miller stated the governor order is effective through September 30, 2021 but it may change as the deadline approaches. Ms. Miller further stated the Department will notify boards of any changes.

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

Cherise Burns provided an update on the waivers approved by DCA including the modification of continuing education requirements for all licensees, modification of reactivation requirements for speech-language pathologists, modification of the direct monitoring requirements for Required Professional Experience (RPE) licenses and the direct supervision requirements for Speech-Language Pathology Assistant (SLPA) licenses, modification of the limitations on renewing of Hearing Aid Dispenser (HAD) temporary licenses and HAD trainee licenses, and modification of limitations and requirements for extension of RPE licenses. Ms. Burns stated the Board staff is working with the Department to extend the waivers as long as there are needed and will notify licensees of any changes.

Michele Linares, Chair for the California Speech Language Hearing Association, expressed gratitude for the waivers and inquired about making the changes permanent. Ms. Burns stated the Board can't waive its own regulations and that is why the executive orders were needed. Ms. Burns further stated everything will return to the current state under the current regulations that are adopted and promulgated as soon as the waivers expire. Ms. Burns noted these types of changes would need to go through the formal rulemaking process. Paul Sanchez further noted that changes should be brought to the Board as a discussion if the community is interested in making type of changes.

#### 13. Discussion of Cognitive Screenings and Assessments and Audiologists' Scope of Practice

Dr. Marcia Raggio stated the Board was asked to look into cognitive screenings as a scope of practice for audiologists. A panelist made up of mental health professionals who

are subject matter experts on cognitive screenings and assessments and national audiology experts presented their findings to the Board.

Dr. David Lechuga provided a presentation on cognitive screening tools by healthcare professionals covering the six purposes of neuropsychological evaluations, variables that may impact a screening, training and expertise of psychologists, screening measures and approaches, tools, and triage.

Dr. Nancy Brison-Moll stated that cognitive screenings and assessments are dependent on the scope of practice and competence to practice ethically and the individuals training. Dr. Brison-Moll echoed what Dr. Lechuga stated all therapist or psychologist are trained to do a basic mental status exam and are expected to perform as part of their scope of practice. Dr. Brison-Moll further stated many individuals go on to complete additional training in order to add additional assessment tools to their scope of practice. Ann Tran-Lien noted the Attorney General's opinion clarifies the ability to perform psychological as part of a Marriage and Family Therapists' scope of practice.

Dr. Mario Espitia provided a presentation on screening and evaluating for cognitive decline covering the Alert and Oriented x4, Mini-Cog, Mini-Mental State Exam (MMSE), Montreal Cognitive Assessment (MoCA), other important information to collect, knowing the early signs of dementia, and assessing for mental health concerns on the geriatric depression scale.

Dr. James Hiramoto stated that cognitive ability and intelligence test would not be something audiologist would perform as part of their scope of practice as they are not screenings tools. Dr. Hiramoto further stated the importance of repeatability of the testing to document the decline in cognitive ability and communicating with family members to gather information on the patients decline. Dr. Hiramoto suggested monitoring the person's adaptive behavior as a screening process such as their reading skills, completing a simple math problem, or problem solving, which can raise a red flag as an indicator for referral.

Dr. Douglas Beck stated the most common complaint audiologist receive from their patients is the inability to understand speech or noise. Dr. Beck further stated that audiologist already perform screenings through the use of speech-in-noise test, which stresses the auditory system. Dr. Beck explained that if an individual performs poorly on the speech-in-noise test, this could be an indicator to perform a cognitive test. He further explained to refer the individual to a professional if they perform poorly on the cognitive test. Dr. Beck noted that 37 billion people in the United States with hearing loss on an audiogram while 26 million experience no hearing loss but have supra-threshold hearing. Dr. Beck further noted that Dr. Arlene Pietranton, Executive Director of American Speech-Language-Hearing Association (ASHA), stated that it's a holistic approach to patient centered care for audiologist to perform cognitive screenings and is part of ASHA's scope of practice for Audiologist.

Dr. Raggio inquired about screenings and licensure requirement. Dr. David Lechuga stated that it depends on the training to perform the screening and it is important that the individuals understand the benefits and limitations of the screenings before performing them on their patients. Dr. Douglas Beck also stated the importance of training prior to performing any screenings.

Dr. Raggio inquired about the number of audiologists performing cognitive screenings. Dr. Douglas Beck stated there is no official number but estimates it to be at least 250 audiologists based on feedback from his lecture attendance and published work.

Dr. Raggio inquired about the training of the audiologist performing cognitive screenings. Dr. Beck stated he is not aware of anyone who would not seek the appropriate training to perform these screenings, and these are licensed audiologist who understand the scope of practice.

Dr. Raggio inquired about screening tools audiologist should avoid. Dr. Lechuga stated that audiologist should avoid screenings such as the RBANS and other screenings that required advanced training or expertise. Dr. Lechuga further stated that if an individual purchase a test from a test publisher they must attest to have a background, expertise, and training in order to use the test purchased by a test publisher.

Dr. Raggio inquired about approaching a patient on performing a cognitive screening. Dr. Beck stated the importance of communicating to the patient the relationship of the brain and sounds, and audiologist should never tell the patient they failed a cognitive screening but instead referred them to a professional for further evaluation. Dr. Lechuga also stated screenings require informed consent from the patient and well-thought-out response to the screening findings. Dr. Espitia stated he provides patients and their family an overview of the process and not diagnosis as that was already provided by their physician.

Karen Chang inquired about training for cognitive screenings. Dr. Beck stated he is not familiar with all the training requirements but trainings for MoCA are provided online on various sites in order to obtain a certificate for use and Cognivue was recently approved by the U.S. Food and Drug Administration and may have training for their product. Dr. Beck further stated he is not aware of the formal training for the MMSE or Mini-Cog, but stressed the importance of training an audiologist should completed before using any screenings on their patients.

Holly Kaiser inquired about cognitive screening as part of the clinical/doctoral program. Dr. Beck stated that this is often covered in those programs but do vary from program to program.

Dr. Raggio inquired about cognitive screenings as part of Speech-Language Pathologist's scope of practice. Holly Kaiser stated that screening for attention, memory, problem solving, and executive functioning has been a scope of practice for many years for Speech-Language Pathologists. Gilda Dominguez also stated that cognitive screening is

part of the scope of practice for Speech-language pathologists and she and her staff are familiar and trained for using MoCA as a cognitive screening.

Dr. Raggio stated changes to the Audiologists' Scope of Practice to include cognitive screenings would require legislative changes to the Business and Professions Code Section 2530.2(k) and therefore the Board cannot not take a position on this issue.

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

Heather Olivares provided an update on Board regulations and noted the changes to the report which includes a visual timeline to show where a package is in the process.

- a. Update and Discussion of Implementation of Speech-Language Pathology and Audiology Fees (As Stated in 16 CCR sections 1399.157, 1399.170.13, and 1399.170.14)

Heather Olivares provided an update on the Speech-Language Pathology and Audiology Fees regulatory proposal. Ms. Olivares stated the regulatory package has been approved by the Office of Administrative Law (OAL) on June 29, 2021 and the Board staff is currently working with the Department to implement the fee increase which includes changes to the Information Technology (IT) systems, forms, and renewal notices.

Dr. Marcia Raggio inquired about the completion of the fee increase implementation. Cherise Burns stated they are determining a date with the IT and Accounting Office for a date certain to ensure the renewal notices reflect the updated fees as those are sent out to licensees a few months in advance.

- b. 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)

Heather Olivares provided an update on the Required Professional Experience Direct Supervision Requirements and Remote or Tele Supervision regulatory proposal. Ms. Olivares stated the regulatory package is in the Department's pre-review process and the Board staff received and incorporated feedback from the Legal Office.

- c. Discussion and Possible Action Regarding Speech-Language Pathology Assistants Requirements (As Stated in Title 16, CCR section 1399.170 through 1399.170.20.1)

Heather Olivares provided an update on the Speech-Language Pathology Assistants Requirements regulatory proposal. Ms. Olivares stated the regulatory package is still being developed and Board staff worked with legal on the regulatory language which requires the review and approval of the Board.

Ms. Olivares provided a summary of the changes legal made on the previously approved regulatory language. Dr. Marcia Raggio inquired about the regulatory language on supervisory requirements depending on situation of the Speech-Language Pathology Assistants (SLPA). Ms. Olivares stated the Board needs to provide clarification on the standards that will be used to determine qualifications equivalency in who serves as a SLPA program director and SLPA supervisor. Linda Pippert, a member from the public, commented that she knows most of the SLPA program directors in California's community colleges and is not aware of any who are not licensed in California. She further stated that many program directors are California native, therefore the regulatory language is not necessary. The Board agree to remove the regulatory language "qualifications deemed equivalent by the Board" in Sections 1399.170.(j) and 1399.170.4.(b)

Ms. Kaiser inquired about the changes on the form and suggested to change "clear credential license number" to "clear credential document number" on the supervisor information in Part B. The Board agree to make the changes.

Ms. Olivares inquired the Board about requirements on supervision during the first 90 days of work. Ms. Kaiser stated the Speech-Language Pathology (SLP) is directly responsible for the work of the SLPA; therefore, if the SLPA has more than one, each SLP should supervise 20 percent of the time during the first 90 days of work. Gilda Dominguez inquired about the time as individual or collaborated. Ms. Kaiser stated that each SLP need direct contact with the SLPA instead of collaborating the time with one lead SLP. Tod Borges and Ms. Dominguez inquired about which individual's time is being used to determine the 20 percent. Ms. Kaiser stated it would be the SLPA's time, not the SLP, and suggested to change the regulatory language to make it clearer. Linda Pippert, a member from the public, commented that there is confusion with the regulatory language as it is not clear in which situation this would apply and commended the Board for the robust discussion. Dr. Raggio inquired about how common it is for SLPA to have more than one supervisor. Ms. Kaiser stated she is not aware how common it is for SLPA to have more than one supervisor but SLPA will have a specific SLP supervisor assigned to them. The Board agree to clarify the twenty (20) percent per week will be of the SLPA's work schedule and add a new sentence to clarify that the lead supervisor will be responsible of the SLPA to meet the requirement in Sections 1399.170.2.(d) and 1399.170.15.(b)(4). The Board agreed to change Section 1399.170.17 to reflect the lead supervisor who will be responsible of the SLPA to meet the twenty (20) percent per week supervision requirement in Section 1399.170.2.(d).

Ms. Olivares inquired the Board about the timeframe a SLPA should receive a copy of the Responsibility Statement for Supervision of a SLPA form. Ms. Pippert, a member from the public, commented that it would matter to some people more than others and by having the regulatory language it may give leverage to SLPA in the event they find themselves in a situation where they haven't received a copy of their form. The Board agreed to maintain the regulatory language in Section 1399.170.15.(c)(1). Cherise Burns suggested to add similar regulatory language to Section 1399.170.18 to specific when a

SLPA should receive a copy of the Notice of Termination. The Board agreed with the changes.

Ms. Olivares inquired the Board on what the number of support personnel that a SLP can supervise. Ms. Burns provided data on the number of support personnel that other healing arts boards have. Ms. Pippert, a member from the public, commented that other healing arts boards allow for flexibility in staffing by not registering assistants to a particular supervisor. Ms. Dominguez inquired about accommodating part-time SLPA. Ms. Burns suggested adding a maximum number in the regulatory language to include a combination of SLPA and Speech-Language Pathology Aide (SLP Aide). Lisa Snelling stated the Board rarely processes SLP Aide license applications. Ms. Kaiser inquired about removing regulatory language specifying SLPA to make it more general to support personnel. Ms. Burns confirmed that it can be stated this way as long as the sentence that defines support personnel remains. Ms. Dominguez inquired about the number of SLPA. Ms. Pippert commented that aides are rarely use as they are not billable and require complete supervision. She further commented that the community would be delighted to have more than two SLPA as many SLPA only work part-time and adding regulatory language for full-time equivalent (FTE) would be appreciated as it will help serve many more clients in the community. Dr. Raggio inquired about three FTE to mean a total of six people or only stipulating the maximum number of personnel in the regulatory language. Paul Sanchez confirmed the regulatory language can define FTE if it is clearly written. Ms. Kaiser inquired about the number of hours that constitutes part-time. Ms. Pippert commented that there are hours stated on the Required Professional Experience (RPE) applications that specify the number of hours for part-time and full-time. Ms. Burns stated that the Board generally stay out of employment law, but the language is there for RPE if the Board would like to adopt something similar for this proposed regulation. The Board agreed to no more than three full-time equivalent support personnel, not to exceed six support personnel, at any time. Ms. Olivares noted that changes will need to be made to Section 1399.170.16 and, on the Duties, and Responsibilities of Supervisor, Item 13, on the Supervisor SLPA form.

Ms. Kaiser inquired on adding regulatory language to exclude experienced SLPA from this requirement. Mr. Sanchez stated this could give the appearance of a different type of license that the Board should be careful. Ms. Pippert, a member from the public, commented that it is not clear on what the 90 days mean. Dr. Raggio stated that it would be 90 days from the start of the SLPA's employment and suggested if the regulatory language should state for initial licensees which excludes experienced/seasoned SLPA from this requirement. Ms. Kaiser stated that SLPA will always have supervision beyond the 90 days as there are certain tasks that require direct supervision and other tasks that require indirect supervision. Michele Linares, Chair for the California Speech Language Hearing Association, commented on issues that arises when supervisors have to leave their position and have SLPA assigned to them. Ms. Pippert commended the Board on their effort to distinguish the 90 days. The Board agreed to change the regulatory language to say 90 days after initial licensure.



Ms. Kaiser inquired about the language on Item 11 of the form and stated that it should be consistent with the regulation language. Ms. Olivares stated language on the form can be changed to be similar with regulation.

Mr. Sanchez inquired about defining full-time equivalent (FTE). Ms. Olivares suggested to add the definition to Section 1399.170 instead of Section 1399.170.16. The Board agree to define FTE under Section 1399.170 so that it applies to the division.

Ms. Kaiser suggested to define full-time as at least 30 hours per week and part-time 15-29 hours per week. Ms. Burns inquired about SLPA working less than 10 hours. The Board agreed to not define part-time but only define full-time. Ms. Linares, commented on the number of hours to define full-time and allow flexibility for a SLPA to work 30 hours in a 40-hour position. Ms. Burns stated that the proposed regulatory language defines the minimum hours of full-time with no maximum hours. Karen Halbo inquired if there is a desire to include a maximum hour of full-time. Dr. Raggio inquired if it is common for SLPA to work more than 40 hours. Ms. Linares commented there are many different types of positions employers offer and there are some SLPA who do work more than 40 hours. Ms. Burns stated that not all employment issues may be address with this regulation as issues of employment status and pay fall under labor laws. Mr. Sanchez suggested full-time to be defined as 30 to 40 hours per week. Ms. Cherise inquired if the regulatory language needs to specify 40 hours since it is out of the Board prevue. The Board agree to define full-time as at least 30 hours per week for the purposes of this division.

#### **M/S/C Raggio/Snow**

**Motion to approve the proposed regulatory language regarding Speech-Language Pathology Assistants Requirements in Sections 1399.170 through 1399.170.20.1, and Responsibility Statement form to be incorporated by reference, as amended, and delegate authority to the Executive Officer to make any technical and non-substantive changes that may be required to move forward with the formal rulemaking process. The motion carried 6-0.**

- d. Discussion and Possible Action to Adopt Uniform Standards Related to Substance-Abusing Licensees as Title 16, CCR section 1399.131.1 and 1399.155.1

Heather Olivares provided an update on the Uniform Standards Related to Substance-Abusing Licensees regulatory proposal. Ms. Olivares stated the regulatory package is still being developed and Board staff worked with Legal on the regulatory language which requires the review and approval of the Board.

Ms. Olivares further stated the Board has the opportunity to adopt the Uniform Standards as part of the Board's disciplinary guidelines, a separate document, or incorporate by reference the Department's document. Examples of Uniform Standards from other healing arts boards and a draft regulatory language that incorporates by reference the Department's document were provided for the meeting.

Dr. Marcia Raggio commented that the Board should adopt the Uniform Standards as it owns regulatory proposal and handle the disciplinary guidelines as another regulatory proposal. Karen Halbo with the DCA Legal Office suggested the Board should adopt the Uniform Standards as model orders similar to the Dental Board.

Holly Kaiser requested if someone could explain what other healing arts boards did using the examples provided for the meeting. Ms. Olivares explained each example provided for the meeting from the simplest required action to most complex.

Paul Sanchez stated that Sunset Review and has been long delayed for various reasons and that this issue may come up during the Sunset Review. Mr. Sanchez further stated the Board's disciplinary guidelines are outdated and will require a long process to review and prepare it for the regulatory process. Dr. Raggio inquired about revisiting the Uniform Standards when the Board reviews the disciplinary guidelines. Mr. Sanchez stated the plan is to bring up disciplinary guidelines in a future meeting to review and make any necessary changes.

Gilda Dominguez commented in supporting the proposed regulatory language and revisit the Uniform Standards in the future for further discussion when the Board reviews the disciplinary guidelines. Ms. Olivares, Cherise Burns, and Mr. Sanchez noted the Department's Uniform Standards is not model orders and can pose some difficulty in enforcing terms and conditions of probationary orders. Karen Halbo further noted that it will provide clarity to licensees but can pose enforcement issues without model orders.

The Board agreed to adopt the proposed regulatory language to incorporate by reference the Department's Uniform Standards document.

### **M/S/C Raggio/Kaiser**

**Motion to adopt the proposed regulatory language regarding Uniform Standards as amended to replace "stand-alone document" with "Uniform Standards Regarding Substance-Abusing Healing Arts Licensees, March 2019" in Sections 1399.131.1 and 1399.151.1, and delegate authority to the Executive Officer to make any technical and non-substantive changes that may be required to move forward with the formal rulemaking process. The motion carried 6-0.**

- e. Discussion and Possible Action Regarding Audiology Licensing Requirements Related to Supervised Clinical/Professional Experience (As Stated in Business and Professions Code Sections 2532.2 and 2532.25 and Title 16, CCR section 1399.152.2)

Heather Olivares provided an update on Audiology Licensing Requirements Related to Supervised Clinical/Professional Experience regulatory proposal. Ms. Olivares stated the regulatory package is still being developed.

Cherise Burns provided further update from the discussion that occurred at the Audiology Practice Committee meeting on August 12, 2021. Ms. Burns stated the Committee is still considering options about what kind of clinical rotations and experiences can count toward the 12 months of satisfactory completion of supervised clinical/professional experience and the Board staff will help create a survey to solicit input from audiology programs.

Michele Linares, Chair for the California Speech Language Hearing Association, commented on the need of including businesses as providers of training sites in the discussion. Dr. Marcia Raggio stated that the Board works with the audiology programs which should be working with their training site providers and the Board welcomes any businesses to participate in Board meetings to provide their input.

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

##### a. 2021 Legislative Calendar and Deadlines

Heather Olivares provided an update on the legislative session thus far and on upcoming legislative deadlines. Ms. Olivares reported the Legislature will return from Summer Recess on August 16, 2021, fiscal committees have until August 27, 2021 to meet and report bills, the last day for any bill to be passed by both House is on September 10, 2021, and the Governor will have until October 10, 2021 to sign/veto any bills passed on September 10, 2021.

##### b. Board-Sponsored Legislation for the 2021 Legislative Session

###### i. AB 435 (Mullin) Hearing aids: locked programming software: notice

Heather Olivares provided an overview of the bill's proposed requirements and where it is at in the legislative process. Ms. Olivares reported this bill is expected to pass as it is currently on the Senate floor with no formal opposition.

##### c. Bills with Active Positions Taken by the Board

Ms. Olivares provided an overview on the status of bill with active positions taken by the Board and recommended no changes to the Board's position or adopt any new position.

###### i. AB 29 (Cooper) State bodies: meetings

Ms. Olivares reported the Board has an approved Oppose position on this bill and it is a two-year bill as it was held under submission by Assembly Appropriations Committee.

###### ii. AB 107 (Salas) Licensure: veterans and military spouses

Ms. Olivares reported the Board has an approved Oppose Unless Amended position on this bill and it is scheduled for hearing on August 16, 2021 in the Senate Appropriations Committee.

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

Ms. Olivares reported the Board has an approved Oppose Unless Amended position on this bill and it is a two-year bill because it was not heard in the Senate Business, Professions and Economic Development Committee.

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

Ms. Olivares reported the Board has an approved Oppose Unless Amended position on this bill and it is a two-year bill because it was not heard in the Assembly Education Committee.

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

Ms. Olivares reported the Board has an approved Support position on this bill and it is a two-year bill because it was not heard in the Assembly Governmental Organization Committee.

- vi. AB 1026 (Smith) Business licenses: veterans

Ms. Olivares reported the Board has an approved Support position on this bill and it is a two-year bill as it was held under submission by Assembly Appropriations Committee.

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

Ms. Olivares reported the Board has an approved Oppose Unless Amended position on this bill and it is a two-year bill as it was held under submission by Assembly Appropriations Committee.

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

Ms. Olivares reported the Board has an approved Oppose position on this bill and it is a two-year bill because it was not heard in the Senate Business, Professions and Economic Development Committee.

#### d. Bills with Recommended Watch Status

Ms. Olivares noted the following are new bills with recommended watch status:

- i. AB 457 (Santiago) Protection of Patient Choice in Telehealth Provider Act
- ii. AB 468 (Friedman) Emotional Support Dogs

- iii. AB 1221 (Flora) Consumer Warranties: Service Contracts: Cancellation: Disclosures
- iv. AB 1308 (Ting) Arrest and Conviction Record Relief

#### 16. Legislative Items for Future Meeting

Dr. Marcia Raggio solicited legislative items for future meeting. Heather Olivares noted the Board staff has no additional items. No additional items were provided from the Board or public.

#### 17. Future Agenda Items

Dr. Marcia Raggio solicited future agenda items. Tod Borges requested discussion on continuing education hours for the hearing aid dispensers. Paul Sanchez stated it can be added to a future agenda item and the Board staff can work on the details on Hearing Aid Dispensers Committee quorum as Board membership can change in the future.

#### 18. The Board will Meet in Closed Session Pursuant to Government Code Section 11126(a)(1) to Conduct its Annual Evaluation of its Executive Officer

The Board met in closed session and subsequently adjourned for the day.



# MEMORANDUM

DATE	October 8, 2021
TO	Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board
FROM	Marcia Raggio, Board Chair
SUBJECT	Agenda Item 4: Board Chair's Report

The Board Chair will provide a verbal update on Board and Committee activities.

## a. 2021 Board Meeting Calendar

MEETING CALENDAR/ AGENDAS/ MINUTES					
Meeting Date	Location	Agenda	Meeting Materials	Minutes	Webcast
<b>2021</b>					
November 5, 2021 Board Meeting	Teleconference				
October 7-8, 2021 Board Meeting	Teleconference	<a href="#">Agenda</a>			<a href="#">Live Webcast</a>
August 12-13, 2021 Board Meeting	Teleconference	<a href="#">Agenda</a>	<a href="#">Materials</a>		<a href="#">Aug 12 Webcast, Part 1</a> <a href="#">Aug 12 Webcast, Part 2</a> <a href="#">Aug 13 Webcast, Part 1</a> <a href="#">Aug 13 Webcast, Part 2</a>
May 13-14, 2021 Board Meeting	Teleconference	<a href="#">Amended Agenda</a>	<a href="#">Materials</a> <a href="#">Hand Carry - Agenda Item 9</a> <a href="#">Hand Carry - Attachment</a> <a href="#">Agenda Item 21</a>	<a href="#">Minutes</a>	<a href="#">Webcast Part 1</a> <a href="#">Webcast Part 2</a>
February 5, 2021 Board Meeting	Teleconference	<a href="#">Agenda</a>	<a href="#">Materials</a> <a href="#">Hand Carry Materials</a>	<a href="#">Minutes</a>	<a href="#">Webcast</a>

## b. Board Committee Updates and Reports

The Speech-Language Pathology Practice Committee and Hearing Aid Dispensing Committee will provide verbal reports regarding their October 7 teleconference meetings.

A list of current committees is provided below.

### STANDING COMMITTEES

Standing Committee composition and leadership are determined by the Board President and are fully within the scope of the Open Meetings Act. Standing Committee meetings are often held in conjunction with regularly scheduled Board Meetings.

<b>SLP PRACTICE COMMITTEE</b> <i>Addresses changes in practice patterns and recommends position statements and/or scope of practice amendments for consideration.</i>		
Name	Position	Profession
Holly Kaiser	Chair	SLP
Gilda Dominguez	Member	SLP
Debbie Snow	Member	Public
<b>AUDIOLOGY PRACTICE COMMITTEE</b> <i>Addresses changes in practice patterns and recommends position statements and/or scope of practice amendments for consideration.</i>		
Name	Position	Profession
Marcia Raggio	Chair	DAU
VACANT	Member	DAU
VACANT	Member	ORL/Public
Karen Chang	Member	Public
<b>HEARING AID DISPENSING COMMITTEE</b> <i>Provides policy and regulatory guidance with respect to HAD practices and recommends scope of practice amendments for consideration.</i>		
Name	Position	Profession
Tod Borges	Chair	HAD
VACANT	Member	HAD
Marcia Raggio	Member	DAU
VACANT	Member	DAU
VACANT	Member	ORL/Public
Karen Chang	Member	Public

### AD HOC COMMITTEES

Ad Hoc Committees may be established by the Board President as needed. Composition and leadership will be appointed by the Board President. Ad Hoc Committees may include the appointment of non-Board members at the Board President's discretion. Ad Hoc Committees are not fully within the scope of the Open Meetings act, however all recommendations made by Ad Hoc Committees must be reviewed and voted on by the Board in a public Board Meeting.

<b>SUNSET REVIEW AD HOC COMMITTEE</b> <i>Develop for the Board's review the Board's Sunset Review Report to the California Legislature</i>		
<b>Name</b>	<b>Position</b>	<b>Profession</b>
Marcia Raggio	Chair	AU
Holly Kaiser	Member	SLP
<b>ENFORCEMENT AD HOC COMMITTEE</b> <i>Review and recommend to the Board proposed revisions to the laws, regulations, and policies related to the Board's enforcement of the Boards Practice Act.</i>		
<b>Name</b>	<b>Position</b>	<b>Profession</b>
Debbie Snow	Chair	Public
Holly Kaiser	Member	SLP
<b>LEGISLATIVE AD HOC COMMITTEE</b> <i>Review and recommend to the Board proposed positions on legislation impacting the Board, its licensees, and the Board's Practice Act</i>		
<b>Name</b>	<b>Position</b>	<b>Profession</b>
Karen Chang	Chair	Public
Marcia Raggio	Member	DAU

**Legend:**

- DAU - Dispensing Audiologist
- SLP - Speech-Language Pathologist
- ORL/ENT - Otolaryngologist/Ear, Nose & Throat
- HAD - Hearing Aid Dispenser
- AU - Dispensing Audiologist





# MEMORANDUM

DATE	October 8, 2021
TO	Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board
FROM	Paul Sanchez, Executive Officer
SUBJECT	Agenda Item 9: Executive Officer Report

**This report will be provided prior to the Board meeting.**

**Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board - 0376**  
**FY 2021-22 BUDGET REPORT**  
 October 7-8, 2021 Board Meeting

FM 1

OBJECT DESCRIPTION	FY 2017-18	FY 2018-19	FY 2019-20	FY 2020-21	FY 2021-22				
	ACTUAL EXPENDITURES (MONTH 13)	ACTUAL EXPENDITURES (MONTH 13)	ACTUAL EXPENDITURES (MONTH 13)	ACTUAL EXPENDITURES (Prelim FM13)	GOVERNOR'S BUDGET 2021-22	CURRENT YEAR EXPENDITURES 07.31.2021	PERCENT SPENT	PROJECTIONS TO YEAR END	UNENCUMBERED BALANCE
<b>PERSONNEL SERVICES</b>									
Salary & Wages (Staff)	478,930	525,967	601,545	599,726	756,000	0	0%	575,746	180,254
Statutory Exempt (EO)	91,296	94,944	98,268	92,318	82,000	0	0%	95,177	(13,177)
Temp Help	8,446	224	64,729	38,449	1,000	0	0%	34,467	(33,467)
Board Member Per Diem	5,100	4,700	4,600	1,700	6,000	0	0%	3,667	2,333
Overtime/Flex Elect	19,003	36,663	55,901	54,620	5,000	0	0%	49,061	(44,061)
Staff Benefits	309,624	332,488	434,247	418,932	468,000	0	0%	395,222	72,778
<b>TOTALS, PERSONNEL SVC</b>	<b>912,400</b>	<b>994,986</b>	<b>1,259,290</b>	<b>1,205,746</b>	<b>1,318,000</b>	<b>0</b>	<b>0%</b>	<b>1,153,340</b>	<b>164,660</b>
<b>OPERATING EXPENSE AND EQUIPMENT</b>									
General Expense	42,122	34,923	48,858	67,144	81,000	0	0%	50,308	30,692
Printing	9,772	10,587	11,227	19,251	28,000	0	0%	13,688	14,312
Communication	6,228	5,986	7,072	7,482	21,000	0	0%	6,847	14,153
Postage	25,482	19,259	7,155	1,725	25,000	0	0%	9,380	15,620
Insurance	20	4,040	25	158	0	0	0%	1,408	(1,408)
Travel In State	15,163	5,210	13,115	9,148	30,000	0	0%	9,158	20,842
Training	0	0	7,088	0	9,000	0	0%	2,363	6,637
Facilities Operations	73,447	86,769	101,321	82,568	99,000	0	0%	90,219	8,781
C & P Services - Interdept.	38	49	52	70	75,000	0	0%	57	74,943
Attorney General	133,121	112,665	156,882	298,782	143,000	0	0%	134,000	9,000
Office Admin. Hearings	45,135	37,170	8,025	128,785	22,000	0	0%	57,993	(35,993)
C & P Services - External	82,277	71,696	73,529	79,957	768,000	0	0%	75,061	692,939
DCA Pro Rata	339,000	392,000	367,221	355,665	536,000	0	0%	371,629	164,371
DOI - Investigations	153,000	200,000	200,908	32,198	119,000	0	0%	144,369	(25,369)
Interagency Services	0	0	0	2,196	29,000	0	0%	732	28,268
IA w/ OPES	0	500	67,039	24,264	60,000	0	0%	30,601	29,399
Consolidated Data Center	3,258	195	4,971	14,553	17,000	0	0%	6,573	10,427
Information Technology	1,240	2,013	431	5,210	171,000	0	0%	2,551	168,449
Equipment	3,220	0	15,400	30,670	5,000	0	0%	15,357	(10,357)
Other Items of Expense		0	113,356	2,553	0	0	0%	38,636	(38,636)
Other (Vehicle Operations)		0	0	0	0	0	0%	0	0
<b>TOTALS, OE&amp;E</b>	<b>1,032,524</b>	<b>1,233,062</b>	<b>1,203,675</b>	<b>1,162,379</b>	<b>2,238,000</b>	<b>0</b>	<b>0%</b>	<b>1,144,262</b>	<b>1,093,738</b>
<b>TOTAL EXPENSE</b>	<b>1,944,924</b>	<b>2,228,048</b>	<b>2,462,965</b>	<b>2,368,125</b>	<b>3,556,000</b>	<b>0</b>	<b>0%</b>	<b>2,297,603</b>	<b>1,258,397</b>
Sched. Reimb. - Fingerprints	(31,000)	(33,143)	(31,000)	(45,276)	(31,000)	0	0%	(31,000)	0
Sched. Reimb. - Other	(2,000)	(3,055)	(2,000)	0	(2,000)	0	0%	(2,000)	0
Unsched. Reimb. - Other	0	(17,398)		(18,705)	0	0	0%	0	0
<b>NET APPROPRIATION</b>	<b>1,911,924</b>	<b>2,174,452</b>	<b>2,429,965</b>	<b>2,304,144</b>	<b>3,523,000</b>	<b>0</b>	<b>0%</b>	<b>2,264,603</b>	<b>1,258,397</b>
<b>SURPLUS/(DEFICIT):</b>									<b>35.39%</b>

Speech-Language Pathology & Audiology & Hearing Aid Dispensers Board

LICENSES ISSUED	FY15/16	FY16/17	FY17/18	FY 18/19	FY 19/20	FY 20/21	FY 21/22
							QTR 1*
AU	48	53	77	63	63	71	37
DAU	26	24	30	35	31	23	4
AUT	0	0	2	4	3	1	0
SLP	1,352	1,457	1,482	1,446	1,444	1,621	490
SPT	0	0	0	0	0	0	0
SLPA	606	501	558	602	615	505	173
RPE	834	897	945	977	1,059	1,039	430
AIDE	44	44	33	32	44	22	9
PDP	22	21	20	15	5	13	7
HAD Permanent	140	120	137	135	95	55	16
HAD Trainee	180	152	169	156	116	93	38
HAD Licensed in Another State	16	16	20	17	12	11	3
HAD Branch	407	315	341	333	312	249	32
<b>TOTAL LICENSES ISSUED</b>	<b>3,675</b>	<b>3,600</b>	<b>3,814</b>	<b>3,815</b>	<b>3,799</b>	<b>3,703</b>	<b>1,239</b>

LICENSEE POPULATION	FY15/16	FY16/17	FY17/18	FY 18/19	FY 19/20	FY 20/21	FY 21/22
							QTR 1*
AU	556	698	720	831	837	830	859
DAU	1,045	1,211	1,246	1,334	1,384	1,375	1,381
<i>Both License Types</i>	<i>1,601</i>	<i>1,909</i>	<i>1,966</i>	<i>2,165</i>	<i>2,221</i>	<i>2,205</i>	<i>2,240</i>
AUT	0	0	2	4	7	8	8
SLP	14,860	18,024	19,161	21,374	22,527	23,309	23,770
SPT	0	0	0	0	0	0	0
SLPA	2,795	3,752	4,118	4,822	5,297	5,538	5,650
RPE	806	1,174	1,232	1,364	1,595	1,626	1,767
AIDE	133	235	216	245	273	290	293
HAD	996	1,179	1,266	1,380	1,407	1,398	1,409
HAD Trainees	158	238	204	214	237	243	267
HAD Licensed in Another State	18	18	28	31	42	47	48
HAD Branch Office	963	1,409	1,297	1,347	1,401	1,411	1,420
<b>TOTAL LICENSEES</b>	<b>22,330</b>	<b>27,938</b>	<b>29,490</b>	<b>32,946</b>	<b>35,007</b>	<b>36,075</b>	<b>36,872</b>

\* Data as of September 28, 2021

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

**This statistical report will be provided, prior to the Board meeting.**



# MEMORANDUM

DATE	October 8, 2021
TO	Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board
FROM	Cherise Burns, Assistant Executive Officer
SUBJECT	Agenda Item 7: 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.

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.

Board staff have been informed that the DCA Waivers will be gradually ending and staff will provide more definitive information regarding the below DCA waivers verbally at the Board Meeting.

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-21-194)** – Originally approved March 31, 2020 and extended on July 1, August 27, October 22, December 15 of 2020, and on February 26, March 30, June 3, July 26, and September 28 of 2021. This waived CE or examination requirements for renewal for 6 months from the date of each order (currently through March 28, 2022) and applied only to Active licensees that expire between March 31, 2020 and October 31, 2021. NOTE: These waivers do not waive the self-study restrictions in the Board's CE/CPD requirement.

- ii. **Modification of Reactivation Requirements for Speech-Language Pathologists (DCA-21-165)** – Originally approved March 31, 2020 and extended on September 17 and December 15, 2020, July 1, and August 31, 2021. 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 November 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-21-192)** – Originally approved May 6, 2020 and extended on July 1, August 27, October 22, and December 15 of 2020, and February 26, April 30, July 1, and August 31 of 2021. This waived the in-person supervision requirements for Required Professional Experience (RPEs) and Speech-Language Pathology Assistants (SLPAs) through October 31, 2021.
- iv. **Modification of the Limitations on Renewing of Hearing Aid Dispenser (HAD) Temporary Licenses and HAD Trainee Licenses (DCA-21-188)** – Originally approved May 29, 2020 and extended on September 17, and December 15 of 2020, and February 26, April 30, July 1, and August 31 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 October 31, 2021 and HAD Trainee Licenses that have been renewed twice and expire between October 31, 2020 through August 31, 2021.
- v. **Modification of Limitations and Requirements for Extension of RPE Licenses (DCA-21-171)** – Originally approved July 17, 2020 and extended on September 17, and December 15 of 2020, and on February 26, April 30, July 1, and August 31 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 October 31, 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 October 31, 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	October 8, 2021
TO	Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board
FROM	Cherise Burns, Assistant Executive Officer
SUBJECT	Agenda Item 8: Discussion and Possible Action on the Board's 2022 Sunset Review

## **Background**

Board staff received the questions for the 2022 Sunset Review Report from the Assembly Business and Professions Committee and the Senate Business, Professions, and Economic Development Committee on September 13, 2021.

Board staff have been working with the Sunset Review Ad Hoc Committee to develop responses to the Sunset Review Report for the Board's review. Due to the policy nature and statutory revisions that can be recommended in Section 11 – Board Action and Response to Prior Sunset Issues and Section 12 – New Issues, the Sunset Review Ad Hoc Committee would like to the Board to review and discuss these issues prior to final review and approval of the full Sunset Review Report at the November 5, 2021 Board Meeting.

## **Action Requested**

Review and discuss the policy issues and proposed statutory changes in Sections 11 and 12 of the Sunset Review Report (Attached). Any revisions needed to be made will be completed by staff after the meeting and presented with the full Sunset Review Report for Board review and approval at the November 5, 2021 Board Meeting.



## Section 11 – Board Action and Response to Prior Sunset Issues

Include the following:

1. Background information concerning the issue as it pertains to the Board.
2. Short discussion of recommendations made by the Committees during prior sunset review.
3. What action the Board took in response to the recommendation or findings made under prior sunset review.
4. Any recommendations the Board has for dealing with the issue, if appropriate.

### BUDGET ISSUES

#### **ISSUE #1:** *What is the status of the long term fund condition?*

**Staff Recommendation:** *The Board should advise the Committee of its long-term expectations for its fund, especially in light of proposed licensing fee increases. If such increases are not adopted, does the Board project insolvency before the next sunset review? DCA revenue projections show falling revenue and increasing expenditures, yet the Board does not predict insolvency?*

**Board Response:** Since 2012, the Board’s revenue has exceeded its expenditures. This is reflected in the fund balance which shows each of the past three years increasing from \$1.2 million to \$1.8 million. With the increased licensing population, the Board’s revenue is expected to continue to increase steadily. Based on these factors, the Board’s fund condition is relatively healthy and will continue to be solvent through the next sunset reporting period.

While the status of the Board’s fund condition is relatively healthy based on its current expenditure authority, staffing levels have not kept up with the increasing licensing population. To maintain acceptable service levels to consumers, applicants, and licensees; the Board will need to increase its staffing and resources. The increase in staff will require a fee increase to prevent a fiscal structural imbalance and ensure solvency in the coming years.

At its June 2015 meeting, the Board approved a fee increase to support additional staffing and prevent the need for drastic spending cuts that could impact enforcement, licensing, and examinations. The last increase in renewal fees for speech-language pathologists and audiologists was in 2001. The fee increase will allow for much needed growth in resources and staff so that the Board can continue making strides in enforcement and licensing. The Board anticipates completion of the fee increase regulations in early 2018.

#### UPDATE:

The Board does not predict insolvency in its fund in the future because the Board successfully promulgated regulations to increase the licensing and renewal fees for audiologists, speech-language pathologists, speech-language pathology assistants, and license verification fees for those licensees. These regulations were approved on June 29, 2021, became effective July 1, 2021, and will be implemented November 1, 2021

The Board works closely with the DCA Budget Office to monitor the Board’s expenditures and long term fund condition.

## LICENSING ISSUES

### **ISSUE #2: *Does the Board need more staff in order to meet its performance goals?***

**Staff Recommendation:** *The Board should advise the Committee whether it feels that current levels of staff are sufficient to adequately provide oversight to its licensee population. Additionally, now that staff is fully trained and focused on their normal job duties, without additional staff, will the Board begin to face continued backlogs in licensing and enforcement?*

**Board Response:** The Board is funded for 9.6 staff positions and is responsible for all aspects of licensing, examinations, enforcement, regulations, continuing education (CE) approval, and CE audits as part of the oversight of over 23,000 licensees. The Board's staffing level has not kept up with the growth of its licensing population and the growing demand for licensure and enforcement in the three professions regulated by the Board. The Board has utilized temporary personnel and borrowed staff from DCA to eliminate backlogs and Board staff works overtime to provide timely management of services. The Board's workload has grown in all areas including the administration of the Hearing Aid Dispensers Practical Examination. It takes considerable resources in terms of staff preparation and time and can involve pulling staff from other essential and time-sensitive activities.

In FY 2015-16, at the request of the Board's Executive Officer, CPS HR Consulting conducted an independent analysis of the Board's workload and staffing. The report identified that the Board was understaffed in the areas of administration and licensing and included a comparison of the Board staffing levels with other small to medium sized DCA Boards. The Board was successful in attaining one additional licensing position through a budget change proposal in 2015-16, but was denied additional positions in 2016-17. The Board deftly does more with a staff that is frankly inadequate, given the disparate needs of regulating three separate professions and practices.

Without additional staff the Board will face delays in licensing thus creating a backlog and reducing the number of examinations offered to hearing aid dispenser (HAD) applicants. The Board will submit a request in 2017 through the budget process to increase staff to address workload needs and prevent future backlogs in licensing and enforcement.

**UPDATE:**

While the Board's staff has increased by two positions since the Board's last Sunset Review, the growth in staffing levels has not been able to keep pace with the exponential growth in the Board's application workload and licensee population. For this reason, the Board continues to utilize temporary help, borrowed staff from DCA, and staff work substantial overtime to meet the workload demands on the Board.

**ISSUE #3: *Is the current training and examination for Hearing Aid Dispensers limiting access to the profession?***

**Staff Recommendation:** *The Board should advise the Committees of whether it feels that access is being limited to the hearing care profession, particularly hearing aid dispensers and dispensing audiologists, by the low pass rate of the licensing examination and the absence of a training manual. Does the Board feel that the examination continues to be an accurate assessment of the skills and knowledge necessary to practice in this field? What evaluations has the Board pursued of this issue and of the examination itself? When does the Board anticipate completing its handbook?*

**Board Response:** The Board strives to ensure that licensing standards are met that protect consumers while permitting reasonable access into the professions. To support its strategic goal, the Board increased access to HAD profession by increasing the number of practical examinations held annually (based on demand). The Board held two examinations in 2013-14, six in 2014-15, and eight in 2016-17, greatly increasing the capacity of the examination for those who wish to enter the HAD profession.

In order to apply for the HAD examinations, there are no formal training or education requirements in statute. The only requirement is that the applicant must be 18 years of age and possess a high school diploma or GED. An applicant may work as a trainee under supervision, but that is not required as a condition for taking the HAD examination. In comparison, candidates for Speech-Language Pathology or Audiology examinations must possess either a Masters or a Doctoral degree in their required field of study, specified hours of clinical practice, and a year of required professional experience under supervision of a licensed professional. Based on the diversity of examination candidates, the results of the examination can vary. According to the Office of Professional Examination Services, the pass rates for the Board's written and practical examinations are comparable to pass rates for other examinations requiring no formal education or training requirements.

To ensure the examinations are an accurate assessment of the knowledge and skills necessary to practice safely and competently, the Board conducts ongoing evaluation of both the written and practical examinations with the help of licensed subject matter experts and DCA's Office of Professional Examination Services (OPES). Statistical analyses are conducted by OPES after each examination to ensure the test questions are functioning within expected parameters. The next occupational analysis, a comprehensive study of hearing aid dispenser practice, is scheduled during the 2018/2019 fiscal year.

Based on its evaluations, the Board recently redesigned the hearing aid dispensing practical examination, which launched in February 2017. Improvements were made streamlining the testing process that included eliminating information already tested in the written examination and clarifying instructions to candidates during the examination.

Written guides are currently available for both the written and practical examinations on the Board's website. These guides identify specific areas which are tested on the examinations. The Board will continue to develop and update the examination guides it currently makes available to applicants. In the coming year, the Board will revisit the proposed training manual issue and explore other solutions including the implementation of national training guidelines and hearing aid dispenser trainee/apprenticeships in California.

UPDATE:

The Board ensures that examinations are an accurate assessment of the knowledge and skills necessary to practice safely and competently, the Board conducts ongoing evaluation of both the written and practical examinations with the help of licensed subject matter experts and OPES. Statistical analyses are conducted by OPES after each examination to ensure the test questions are functioning within expected parameters. The occupational analysis, a comprehensive study of hearing aid dispenser practice, was completed in June of 2020 and implemented after the report was completed.

The Board redesigned the hearing aid dispensing practical examination in February 2017. In 2017, improvements were made to streamline the testing process including eliminating information already tested in the written examination and clarifying instructions to candidates during the examination.

Written guides are available for both the written and practical examinations on the Board's website. These guides identify specific areas which are tested on the examinations. The Board continues to develop and update the examination guides it currently makes available to applicants.

Therefore, the Board believes these issues are no longer a concern due to the improvements made to the examinations and the associated written guides.

**ISSUE #4: *Is the Board pursuing English literacy testing for foreign trained Speech-Language Pathologists?***

***Staff Recommendation:*** *The Board should advise the Committees of how it currently evaluates foreign-trained applicants for speech language and whether it would require additional staff to change the current standards used in licensing. The Board should also consult with counsel and report to the Committees on whether there is precedent for this type of evaluation and potential litigation concerns. In addition, the Board should provide any evidence of insufficient care or services arising from a lack of English proficiency provided by licensees who have not been examined for such.*

**Board Response:** The Board is not proposing changes in how it assesses or evaluates foreign-trained applicants. Based on its current statutory authority, the Board evaluates equivalencies in education and experience of foreign-trained applicants. The Board is asking for statutory authority to determine English proficiency as a requirement for licensure for foreign-trained applicants.

The American Speech-Language-Hearing Association (ASHA), consisting of 185,000+ members, is the national organization that certifies speech-language pathologists to practice in the United States. ASHA follows strict guidelines for certifying applicants who are trained in non-English speaking countries.

The 2014 ASHA Certification Standards for Speech-Language Pathologists states all applicants must meet Standard V: Skills Outcomes Standard V-A: The applicant must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice.

Implementation: Individuals are eligible to apply for certification once they have completed all graduate-level academic course work and clinical practicum and been judged by the graduate program as having acquired all of the knowledge and skills mandated by the current standards.

The applicant must have demonstrated communication skills sufficient to achieve effective clinical and professional interaction with clients/patients and relevant others. For oral communication, the applicant must have demonstrated speech and language skills in English, which, at a minimum, are consistent with ASHA's current position statement on students and professionals who speak English with accents and nonstandard dialects. In addition, the applicant must have demonstrated the ability to write and comprehend technical reports, diagnostic and treatment reports, treatment plans, and professional correspondence in English (bold added).

It is the Board's intention to be consistent with our national organization's requirements for minimal English proficiency. To assure this is the case, the Board is seeking a statutory amendment to grant authority to require a demonstration of English proficiency similar to the Physical Therapy Board (Business and Professions Code 2653 (b) *Demonstrate proficiency in English by achieving a score specified by the board on the Test of English as a Foreign Language administered by the Educational Testing Services or such other examination as may be specified by the board by regulation.* Then the Board would be able to promulgate regulations to set the minimum requirements on the Test of English as a Foreign Language (TOEFL). Completing the TOEFL would not require additional staff, as the applicant would be required to provide TOEFL results as part of the application process.

The issue of concern is consumer protection. Speech therapy for children with an articulation disorder involves teaching the sound, modeling the production of the sound, and providing corrective feedback to the child. These tasks would be very challenging for a speech-language pathologist who cannot produce those sounds correctly and cannot discriminate whether the sounds are accurately produced, because the sounds are not in their primary language and they do not have minimal English proficiency. Likewise, if a child has difficulties producing grammar or producing sentences with accurate word ordering, a speech-language pathologist who is unfamiliar with native English grammar would not have learned to produce these grammatical forms and order words in sentences accurately if they were not present in the therapist's native language. As a result of these potential therapeutic difficulties, the Board has received reports from employers and school district personnel of insufficient care and services being provided by current licensees who are not being examined for English proficiency in schools, clinics, and hospitals throughout California because we have no current statute or regulations to require minimal English proficiency.

The Board consulted with DCA counsel regarding precedent and potential litigation concerns. This proposal is similar to what has existed in the Physical Therapy Practice Act since 2014. To our knowledge there has been no litigation as a result of the statutory change. Proposed regulations would still require approval from the Office of Administrative Law.

**UPDATE:**

The Board determined that its review of foreign educated and trained applicants is sufficient to ensure applicants meet the minimal qualifications for licensure. Also, the Board considers this issue to no longer be a concern due to the lack of consumer complaints regarding insufficient care.

**ISSUE #5: Is it necessary to eliminate the Speech-Language Pathology Aide designation?**

**Staff Recommendation:** *The Board should further explain to the Committees how it proposes to eliminate the pathology aide designation while protecting continuity of care. Does the Board have a plan to provide support or cross-training for current speech-language pathology aides that would lose their jobs?*

**Board Response:** Today, in California, there are over 17,000 licensed speech-language pathologists and only 42 speech-language pathology (SLP) aides. It is apparent that the vast majority of SLPs currently work without the use of aides. Any SLP assistance needed to ensure continuity of care is provided by another category of support help, the SLPA (Speech-Language Pathology Assistants) who work in today's SLP settings. Historically SLPs have either worked independently or utilized SLPAs in their practices.

AB 205 (Machado), Chapter 1058, Statutes of 1998, established SLPAs as a new licensure category, and required persons seeking licensure as a SLPA to complete an associate of arts program in speech-language pathology. However, AB 205 also included a "grandfather" provision, permitting SLP aides who had at least a year of experience to apply for licensure as an assistant without completing the associate of arts degree, until January 1, 2001. SB 50 (Machado), Chapter 173, Statutes of 2001 extended the grandfather provision for Aides with qualifying experience to apply for SLPA licensure. The intent was to phase out the SLP Aide designation, but this was not removed from statute. In 2001, there were 136 SP Aides. During the past 20 years, the Board has never had more than 200 Aides. In contrast, the SLPA licensing category has grown from 2,343 at the end of 14-15 to 3,611 on 12/31/2017; which amounts 54% growth in just 18 months.

The Board surveyed the employers of the currently registered SLPAs. Of those surveyed, about half were still employed. Those that were no longer employed simply didn't take the steps to unregister their aide with the Board. Of those surveyed, none of the employers stated that the aides would lose employment if the aide designation were eliminated because they would still serve a purpose. Employers commented that the aide designation is no longer necessary and imposes a burden on their employees, fingerprinting, application, etc.

There is confusion among the employers/supervisors with the SLP Aide limitations. Surveyed employers commented that SLPAs are much more useful to their practice and that the aide designation creates confusion in the SLP field and can lead to unlicensed SLP practice by aides. In recent enforcement investigations, the Board found that the lack of clarity in supervision requirements seemed to encourage supervisors to work SLP aides beyond their limitations, and in some cases were found to be aiding and abetting unlicensed activity.

**UPDATE:**

In the Board's 2016 Sunset Review report, the Board was requesting to eliminate the Speech-Language Pathology Aide designation but the Committee did not pursue this issue as there was no clear path to help Speech-Language Pathology Aides to transition to become Speech-Language Pathology Assistants. Since the Committee did not pursue the elimination of the Speech-Language Pathology Aide designation, the Board will consider ways to improve the consumer protections related to the Aide registration, including seeking renewal and continuing education requirements.

## WORKFORCE ISSUES

### **ISSUE #6: How is the Board addressing the shortage within the Audiology profession?**

**Staff Recommendation:** *The Board should provide the Committees with evidence of shortages in the audiology field and collaborate with the committee to amend statute to address concerns with reciprocity. If the Board has received information on workforce shortages in California from outside sources, it should share these with the committee.*

**Board Response:** The number of audiology licensees in California, as of 2016, is approximately 1,600. With the population of California being over 39 million, and the percentage of Californians aged 65 years and older being approximately 12.5 percent or nearly 5 million, the number of audiologists falls clearly short of the number needed to meet California's hearing and balance needs in the older population. In addition, according to the American Speech-Language-Hearing Association (ASHA), the incidence of hearing loss in the US has doubled in the last 30 years (ASHA, 2015).

Currently, 30 million Americans aged 12 and older have permanent, bilateral hearing loss. About 2 percent of adults aged 45 to 54 years have disabling hearing loss. The rate increases to 8.5 percent for adults aged 55 to 64 years. Nearly 25 percent of those aged 65 to 74 years and 50 percent of those who are 75 years and older have disabling hearing loss (National Institutes of Health, 2014).

Since California represents approximately 12 percent of the US population, it would appear that nearly 4 million Californians could have permanent, bilateral hearing loss. In addition, the population of people over 65 is expected to double by 2030. Even without this perspective, data suggests that each audiologist must provide services for 2,500 adult patients in the state.

CSU Chancellor Timothy White noted in a letter to the California Academy of Audiology dated April 10, 2015:

Still operating today, the joint San Diego program has graduated 61 audiologists since the 2007-08 academic year, the period during which the last remaining CSU audiology master's program closed its doors because the doctorate had become the entry-degree for practice. Thirty-seven students were enrolled in the three-year joint San Diego program in fall 2014, and 13 students graduated from the program during 2013-14 academic year. In 2012-13, California graduated six audiologists, only one percent of the 577 audiology degrees nationally<sup>i</sup>. As shown in the table below, the degree production in California's only public Au.D. program falls desperately below the projected need for audiologists in our state. From 2010 to 2020, for example, the number of audiology jobs is expected to grow 30 percent, with an average of 50 jobs open annually<sup>ii</sup>.

<sup>i</sup> American Speech-Language Hearing Association, retrieved from <http://www.asha.org/aud/Know-the-Facts/>.

<sup>ii</sup> State of California Employment Development Department "Occupation Profile Audiologist," retrieved from <http://www.labormarketinfo.edd.ca.gov/cgi/databrowsing/occExplorerQSDetails.asp?searchCriteria=audiolog&careerID=&menuChoice=&geogArea=0601000000&soccode=291181&search=Explore+Occupation>.

The state licensing board issued 74 audiology licenses in 2015-2016, but due to imported audiologists returning to their home states, as well as retirements, the net gain was only one licensee. The past year was not an aberration. Currently, 64 percent of licensed California audiologists are age 55 or older, and are at or nearing the age of retirement. Between 85-90 percent of licensing applicants are now coming from other states.

With an inadequate in-state pipeline, most of the new audiologists are coming here to practice from out of state, and there are large numbers of open audiologist positions for all types of professional settings (**Audiology Online**, <http://www.audiologyonline.com/2017>).

The National Institute of Aging has estimated that by 2020, the need for audiologists to serve the older population will increase by 50 percent. US Department of Labor projects audiologist employment to grow at a rate of 29 percent from 2014 to 2024, four times the average rate for all occupations. Hearing loss increases as people age, so the aging population is likely to increase demand for audiologists.

The Veteran's Administration noted in 2012 that visits to VA audiology clinics has increased to over 1.6 million (36 percent) since 2009. Due to the shortage of audiologists, veterans are waiting up to a year to be seen for diagnostic evaluations and hearing aid fittings. Children's hospitals have also been affected with fewer hospitals and audiologists able to treat patients in a timely and convenient manner. Due to the limited number of audiologists available, hearing loss patients are often required to travel for many hours to receive needed services.

To address the growing need for audiologists in the state, Governor Brown recently signed AB 2317 (Mullin), which authorizes the CSU system to award the Doctor of Audiology degree. The changes that resulted from AB 2317 opened the possibility of CSU campuses offering the Doctor of Audiology (AuD) degree. This will significantly increase the number of AuD graduates applying for licensure in California, and consequently ease the shortage of audiologists. The Board is confident that with the passage of AB 2317, as new Audiology programs at some of the CSU campuses come on-line, this shortage will be addressed and ameliorated.

Although the Board does not have full reciprocity with other states, it recognizes national certification for the purpose of meeting licensure requirements for speech-language pathology or audiology. Business and Professions Code Section 2532.8 deems that a person has met the educational and experience requirements identified in Business and Professions Code Section 2532.2 if the individual holds the national Certificate of Clinical Competence (CCC) in speech-language pathology or audiology, issued by the ASHA. Unfortunately this law no longer applies to current audiology applicants.

In January 2010, Business & Professions Code Section 2532.25 was added to statutes requiring that an audiology applicant possess a clinical doctoral degree (AuD) in audiology to qualify for licensure. In January 2012, ASHA began requiring a doctoral degree in audiology in order to obtain a CCC in Audiology. Business & Professions Code Section 2532.8 was never updated to apply to current licensing requirements for audiologists as required in Business & Professions Code Section 2532.25.

Business & Professions 2532.8 should be amended to deem applicants who hold the national Certificate of Clinical Competence (CCC) in speech-language pathology or audiology, issued by the American Speech-Language-Hearing Association (ASHA) to apply equivalence to the current requirements for audiology applicants referenced found in Business & Professions Code Section 2532.25.

In addition, the American Academy of Audiology (AAA), which has over 12,000 members, issues the American Board of Audiology certification which has requirements that are similar to the ASHA audiology certification requirements. Including AAA's American Board of Audiology certification in Section 2532.8 would provide for greater reciprocity for audiologists who have obtained AAA certification.

The Board recommends the following changes to Business and Professions Code 2532.8:



2532.8. Persons deemed to meet requirements

(a) The board shall deem a person who holds a valid Certificate of Clinical Competence in Speech-Language Pathology or audiology issued by the American Speech-Language-Hearing Association's Council for Clinical Certification to have met the educational and experience requirements set forth for speech-language pathologists or audiologists in Section 2532.2.

(b) The board shall deem a person who holds either a valid Certificate of Clinical Competence in Audiology issued by the American Speech-Language-Hearing Association's Council for Clinical Certification or a valid American Board of Audiology certificate issued by the American Academy of Audiology to have met the educational and experience requirements set forth for audiologists in sections 2532.2 and 2532.25.

(bc) If an applicant qualifying for licensure under this section has obtained any equivalent qualifications in violation of the laws and regulations governing the practices of speech-language pathology or audiology or has not met the requirements for licensure, he or she shall correct the deficiency to qualify for licensure. If the deficiency is not cured within one year from the date of the deficiency notice, the application for licensure is deemed abandoned.

**UPDATE:**

Since the Board's last Sunset Review, the multiple CSU's have developed Doctor of Audiology (AuD) programs. Some of these programs will have their initial classes of students graduating in the coming years.

Additionally, during the Board's last Sunset Review, the Board recommended the Committee consider revising BPC Section 2532.8 to include audiologists with a valid Certificate of Clinical Competence in Audiology issued by the American Speech-Language-Hearing Association's Council for Clinical Certification or a valid American Board of Audiology certificate issued by the American Academy of Audiology. In January 2010, BPC Section 2532.25 was added to statutes requiring that an audiology applicant possess a clinical doctoral degree (AuD) in audiology to qualify for licensure. In January 2012, ASHA began requiring a doctoral degree in audiology in order to obtain a CCC in Audiology. Since that time, BPC Section 2532.8 was never updated to apply to current licensing requirements for audiologists as required in BPC Section 2532.25. Amending this statutory reference and adding the American Board of Audiology Certificate will streamline licensure of audiologists who hold these certifications and enhance access to audiology services for California consumers.

**ISSUE #7: How is the Board addressing the shortage within the Speech-Language Pathology profession?**

**Staff Recommendation:** *The Board should provide the Committees with evidence of shortages in the speech-language pathology field beyond anecdotal evidence and collaborate with the appropriate policy committees to discuss increasing access to speech-language pathology Master's programs at CSU and UC. If the Board has received information on workforce shortages in California from outside sources, it should share these with the committee.*

**Board Response:** According to US News and World Report (2015), speech-language pathology was ranked 20<sup>th</sup> in health care jobs and 28<sup>th</sup> overall of the best jobs of 2015, and the profession should see significant growth over the next decade. The California Employment Development Department reported that there were 11,000 speech-language pathologists employed in 2014 with a growth outlook of 17.3% between 2014-2024. An additional 2,800 openings will be needed due to net replacements per the table below:

<b>Speech-Language Pathologists Estimated Employment and Projected Growth</b>					
<b>Geographic Area (Estimated Year-Projected Year)</b>	<b>Estimated Employment</b>	<b>Projected Employment</b>	<b>Numeric Change</b>	<b>Percent Change</b>	<b>Additional Openings Due to Net Replacements</b>
California (2014-2024)	11,000	12,900	1,900	17.3	2,800

A master’s degree in speech-language pathology is the entry-level degree required to be licensed as a speech-language pathologist in California. The supply of newly trained master’s level speech-language pathologists graduating from the 18 master’s level programs in California cannot keep up with the demand, resulting from growth in the field as well as speech-language pathologists who are retiring or leaving the field.

There is a shortage of qualified SLPs in the state of California particularly in public school settings. For example, the California Commission on Teacher Credentialing (CTC) reports that each year a minimum of 475+ individuals working in the California public schools are granted SLPSC VTWs (speech-language pathology service credential variable term waivers). These waivers are granted to individuals with teaching credentials or bachelor’s degrees in speech-language pathology to work as SLPs in the public schools. These individuals do not have the entry-level master’s degree in speech-language pathology. They have not completed the required academic and clinical training at the graduate level nor have they passed the Praxis exam in speech-language pathology as is required to be a licensed speech-language pathologist. This occurs because of the shortage of SLPs, not because school districts are interested in hiring underqualified individuals. In addition, the CA CTC reports a high percentage of school districts have speech-language pathology openings that go unfilled. There is clearly a critical need to graduate more SLPs who are fully qualified to work in school and other settings in California.

The Board will continue working toward the goal of increasing access to speech-language pathology Master’s programs by collaborating with the appropriate policy committees in the legislature.

**UPDATE:**

The Board supported AB 1075 (Holden, 2019) which would have appropriate \$750,000 to the California State University (CSU) system for competitive grants to campus speech-language pathologist programs with the goal of expanding their enrollment capacity. The Legislature addressed this issue through the 2019 Budget Act which appropriated \$3 million to the CSU system to increase enrollment in speech-language pathologist programs.

The data requested by the Committee on speech-language pathologist workforce shortages was provided during the Board’s last Sunset Review and the Board does not have any additional updates to provide on this data.

## TECHNOLOGY ISSUES

### **ISSUE #8:** *What is the status of BReEze implementation by the Board?*

**Staff Recommendation:** *How will the Board pursue technology solutions to fill the role of BreEze in the future?*

**Board Response:** The Board is working with DCA on the following strategy to determine the appropriate direction and solutions to replace the current legacy system and fill the role of BreEze in the future:

**Step #1: Business Analysis** - In order to ensure that any resulting technological platform meets the specific business needs of the Board, those business needs must be known and documented. Appropriately documented business needs ultimately inform technical design specifications that make certain a technical platform reflects the business, the single biggest factor for success in an IT effort.

The Board will conduct pre-planning and business process analysis in order to create three sets of artifacts:

1. Business Process Diagrams
2. Elaborate these processes with Use Case narratives
3. Business Needs Document

The Board is currently looking at timeframes to begin the analysis, taking special consideration to make sure Board resources are available to the process while still able to maintain its core mission.

**Step #2: Project Approval Lifecycle (Stage Gates 1 – 4)** - The Board is required, as are all IT projects, to complete the Department of Technology's Project Approval Lifecycle (PAL) to gain approval to execute any project. The PAL is broken into four stages:

Stage 1 – Establishing the Business Case

Stage 2 – Alternatives Analysis, Organizational Readiness, Cost-Benefit/Effectiveness Analysis

Stage 3 – Procurement Preparation

Stage 4 – Project Readiness and Approval

**Step #3: Project Implementation** - Create and follow project plans and schedules to implement the chosen platform. The overall strategy outlined above will focus on three main success points:

1. Meeting the specific business needs of the Board.
2. Cost Effectiveness
3. Organizational Readiness

UPDATE:

Since the Board's last Sunset Review, the Board has worked in coordination with DCA's Organizational Improvement Office and Office of Information Services to progress through the Business Modernization Project efforts and PAL stages. The new systems that the Board adopts will provide access for licensees and applicants to apply for licensure online and complete online transactions. In 2020, the Board received budgetary authority to proceed with the project and an analyst position to address the increased workload during the development and transition to the system. The Board has now completed Stages 1 (Business Analysis) and 2 (Alternative Analysis) of the California Department of Technology's PAL. The Board has begun Stage 3 (Solution Development) of the process and will continue to complete the last two required PAL Stages in 2021.

**ADMINISTRATIVE ISSUES**

**ISSUE #9: *How severe is the issue of "locked" hearing aids?***

**Staff Recommendation:** *The Board should advise the Committees on what steps are necessary to protect consumers from harm under existing hearing aid "locking" procedures and if there is concern about this practice may limit access to hearing care for patients.*

**Board Response:** The locking of hearing aids creates a potential consumer protection issue since these locked aids limit or restrict where hearing aid users can seek hearing aid programming and care. Unfortunately, as hearing aid users age, their hearing often diminishes requiring annual reprogramming of their hearing aids to increase the gain or loudness to match the change in hearing. These individuals are then forced to return to the original dispensing facility or a sister facility that dispenses that particular hearing aid. If the individual no longer lives in the area or if the dispensing location has closed its business, the hearing aid user has no choice but to purchase other hearing aids. Consumers are harmed when they, often unknowingly, purchase hearing aids that cannot be serviced or managed in a wide geographic location. Essentially this renders the hearing aid unmanageable, unless the consumer can return to the office where it was originally purchased.

The Board recommends amending the Business and Professions Code 2538 and 2539 to require hearing aid dispensers and dispensing audiologists that sell hearing aids with locked software provide consumers a written disclosure that informs the consumer of limitations regarding adjustments to their hearing aid and other related services caused by the locked software.

UPDATE:

Since the Board's last Sunset Review, the Board sponsored legislation (AB 435 (Chapter \_\_\_\_, Statutes of 2021, Mullin)) to require hearing aid dispensers and dispensing audiologists that sell hearing aids with locked software provide consumers a written disclosure that informs the consumer of limitations regarding adjustments to their hearing aid and other related services caused by the locked software. This bill was passed by the legislature on August 30, 2021 and signed by Governor Gavin Newsom on September \_\_, 2021. This bill becomes effective on January 1, 2021.

## TECHNICAL CLEANUP

### **ISSUE #10:** *Is there a need for technical cleanup?*

**Staff Recommendation:** *The Board should recommend cleanup amendments for BPC § § 2530-2539.14 to the Committees.*

**Board Response:** The Board is recommending the following cleanup amendments to the Business and Professions Code Section 2530-2539.14:

**(Rename the chapter to include Hearing Aid Dispensers)**

#### **CHAPTER 5.3**

#### **Speech-Language Pathologists and Audiologists and Hearing Aid Dispensers**

#### **Article 4**

#### **Denial, Suspension, ~~and~~ Revocation, and Probation**

#### **2532.8. Persons deemed to meet requirements**

(a) The board shall deem a person who holds a valid certificate of clinical competence in speech-language pathology or audiology issued by the American Speech-Language-Hearing Association's Council for Clinical Certification to have met the educational and experience requirements set forth for speech-language pathologists in Section 2532.2 or audiologists in Section 2532.25.

(b)...

#### **2533. Grounds for action**

The board may refuse to issue, or issue subject to terms and conditions, a license on the grounds specified in Section 480, or may suspend, revoke, or impose terms and conditions upon the license of any licensee for any of the following:

(a) Conviction of a crime substantially related to the qualifications, functions, and duties of a speech-language pathologist or audiologist or hearing aid dispenser, as the case may be. The record of the conviction shall be conclusive evidence thereof.

(b) Securing a license by fraud or deceit.

(c)(1) The use or administering to himself or herself of any controlled substance.

(2) The use of any of the dangerous drugs specified in Section 4022, or of alcoholic beverages, to the extent or in a manner as to be dangerous or injurious to the licensee, to any other person, or to the public, or to the extent that the use impairs the ability of the licensee to practice speech-language pathology or audiology safely.

(3) More than one misdemeanor or any felony involving the use, consumption, or self-administration of any of the substances referred to in this section.

(4) Any combination of paragraph (1), (2), or (3).

The record of the conviction shall be conclusive evidence of unprofessional conduct.

(d) Advertising in violation of Section 17500. Advertising an academic degree that was not validly awarded or earned under the laws of this state or the applicable jurisdiction in which it was issued is deemed to constitute a violation of Section 17500.

(e) Committing a dishonest or fraudulent act that is substantially related to the qualifications, functions, or duties of a licensee.

(f) Incompetence, gross negligence, or repeated negligent acts.

(g) Other acts that have endangered or are likely to endanger the health, welfare, and safety of the public.

(h) Use by a hearing aid dispenser of the term "doctor" or "physician" or "clinic" or "audiologist," or any derivation thereof, except as authorized by law.

- (i) The use, or causing the use, of any advertising or promotional literature in a manner that has the capacity or tendency to mislead or deceive purchasers or prospective purchasers.
- (j) Any cause that would be grounds for denial of an application for a license.
- (k) Violation of Section 1689.6 or 1793.02 of the Civil Code.
- (l) Violation of a term or condition of a probationary order of a license issued by the board pursuant to Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code.
- (m) Violation of a term or condition of a conditional license issued by the board pursuant to this section.
- (n) Disciplinary action taken by any public agency in any state or territory for any act substantially related to the practice of speech-language pathology, audiology, or hearing aid dispensing.
- o) Aiding or abetting any person to engage in the unlicensed practice of speech-language pathology, audiology, or hearing aid dispensing.
- p) Violation or attempting to violate, directly or indirectly, any of the provisions of this chapter.

**2533.1. What constitutes conviction**

A plea or verdict of guilty or a conviction following a plea of nolo contendere made to a charge substantially related to the qualifications, functions, and duties of a speech-language pathologist, ~~or~~ audiologist, or hearing aid dispenser is deemed to be a conviction within the meaning of this article. The board may order a licensee be disciplined or denied a license as provided in Section 2533 when the time for appeal has elapsed, or the judgment of conviction has been affirmed on appeal, or when an order granting probation is made suspending the imposition of sentence irrespective of a subsequent order under Section 1203.4, 1203.4a, or 1203.41 of the Penal Code allowing the person to withdraw his or her plea of guilty and to enter a plea of not guilty, or setting aside the verdict of guilty, or dismissing the accusation, information or indictment.

**2533.4. Injunction against violations**

Whenever any person other than a licensed speech-language pathologist, ~~or~~ audiologist, or hearing aid dispenser has engaged in any act or practice which constitutes an offense against this chapter, a superior court of any county, on application of the board, may issue an injunction or other appropriate order restraining that conduct. Proceedings under this section shall be governed by Chapter 3 (commencing with Section 525) of Title 7 of Part 2 of the Code of Civil Procedure. The board may commence action in the superior court under this section on its own motion.

**2533.5. Prosecution of violations; Hearings**

- (a) The board may prosecute any and all persons for any violation of this article.
- (b) The board shall hear and decide all matters, including, but not limited to, any contested case or any petition for reinstatement or modification of probation, or may assign any of those matters to an administrative law judge in accordance with the Administrative Procedure Act. Except as otherwise provided in this chapter, all hearings shall be conducted in accordance with Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code.

**2533.6. Petitions**

- (a) A person whose license has been revoked or suspended, or who has been placed on probation, may petition the Speech-Language Pathology & Audiology & Hearing Aid Dispensers Board for reinstatement or modification of penalty, including modification or termination of probation, after a period of not less than the following minimum period of time has elapsed from the effective date of the decision ordering that disciplinary action:
  - (1) At least three years for reinstatement of a license revoked for unprofessional conduct, except that the board may, for good cause shown, specify in a revocation order that a petition for reinstatement may be filed after two years.
  - (2) At least two years for early termination or one year for modification of a condition of probation of three years or more.

(3) At least one year for reinstatement of a license revoked for mental or physical illness, or for modification of a condition, or termination of probation of less than three years.

(b) The petition shall state any facts as may be required by the board.

(c) The petition may be heard by the board, with the matter presided over by an administrative law judge. After a hearing on the petition, the administrative law judge shall provide a decision as determined by the board which shall be acted upon in accordance with the Administrative Procedures Act.

(d) The board or the administrative law judge hearing the petition may consider all activities of the petitioner since the disciplinary action was taken, the offense for which the petitioner was disciplined, the petitioner's activities during the time the license was in good standing, and the petitioner's rehabilitative efforts, general reputation for truth, and professional ability. The hearing may be continued, as the board or the administrative law judge finds necessary.

(e) The administrative law judge when hearing a petition for reinstating a license, or modifying a penalty, may recommend the imposition of any terms and conditions deemed necessary.

(f) The board may deny, without a hearing or argument, any petition for reinstatement filed pursuant to this section for any of the following:

(1) The petitioner is under sentence for any criminal offense, including any period during which the petitioner is on court-imposed probation or parole.

(2) There is an accusation or petition to revoke probation pending against the petitioner

(3) The petition is within a period of two years from the effective date of the prior decision following a hearing under this section.

(g) The board may deny, without a hearing or argument, any petition for termination or modification of probation filed pursuant to this section for any of the following

(1) The petitioner has failed to comply with the terms and conditions of the disciplinary order.

(2) The board is conducting an investigation of the petitioner while he or she is on probation.

(3) The petitioner has a subsequent arrest that is substantially related to the qualifications, functions, or duties of the licensee or registrant and this arrest occurred while on probation.

(4) The petitioner's probation with the board is currently tolled.

(h) Nothing in this section shall be deemed to alter Sections 822 and 823.

**[Move 2538.19 from Article 8 Hearing Aid Dispensers to Article 4 Denial, Suspension, Revocation, and Probation to become 2533.5]**

**~~2538.19. Prosecution of violations; Hearings~~**

~~(a) The board may prosecute any and all persons for any violation of this article.~~

~~(b) The board shall hear and decide all matters, including, but not limited to, any contested case or any petition for reinstatement or modification of probation, or may assign any of those matters to an administrative law judge in accordance with the Administrative Procedure Act. Except as otherwise provided in this chapter, all hearings shall be conducted in accordance with Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code.~~

**2538.28. Temporary Trainee license where applicant supervised and trained; Term; Renewability**

(a) An applicant who has fulfilled the requirements of Section 2538.24, and has made application therefor, and who proves to the satisfaction of the board that he or she will be supervised and trained by a hearing aid dispenser who is approved by the board may have a temporary trainee license issued to him or her. The temporary trainee license shall entitle the temporary trainee licensee to fit or sell hearing aids as set forth in regulations of the board. The supervising dispenser shall be responsible for any acts or omissions committed by a temporary licensee trainee under his or her supervision that may constitute a violation of this chapter.

(b) The board shall adopt regulations setting forth criteria for its refusal to approve a hearing aid dispenser to supervise a temporary trainee licensee, including procedures to appeal that decision.

(c) A temporary trainee license issued pursuant to this section is effective and valid for six months from date of issue. The board may renew the temporary trainee license for an additional period of six months. Except

as provided in subdivision (d), the board shall not issue more than two renewals of a temporary trainee license to any applicant. Notwithstanding subdivision (d), if a temporary trainee licensee who is entitled to renew a temporary trainee license does not renew the temporary trainee license and applies for a new temporary trainee license at a later time, the new temporary trainee license shall only be issued and renewed subject to the limitations set forth in this subdivision.

(d) A new temporary trainee license may be issued pursuant to this section if a temporary trainee license issued pursuant to subdivision (c) has lapsed for a minimum of three years from the expiration or cancellation date of the previous temporary trainee license. The ~~bureau~~ board may issue only one new temporary trainee license under this subdivision.

#### **2538.29. Examination required of temporary trainee licensee**

A temporary or trainee licensee under Section 2538.27 or Section 2538.28 shall take the license examination within the first ~~120~~ months after the temporary or trainee license is issued. Failure to take the written license examination within that time shall result in expiration of the temporary or trainee license. ~~The trainee license and it shall not be renewed unless the temporary trainee licensee has first taken the licensure examination. The board, however, may in its discretion renew the temporary trainee license if the licensee failed to take the necessary written examination due to illness or other hardship.~~

#### **2538.30. Limitations on temporary or trainee licensee**

(a) A temporary or trainee licensee shall not be the sole proprietor of, manage, or independently operate a business which engages in the fitting or sale of hearing aids.

(b) A temporary or trainee licensee shall not advertise or otherwise represent that he or she holds a license as a hearing aid dispenser.

#### **2538.34. Retail business address; Registration; Duplicate license**

(a) Every licensee who engages in the practice of fitting or selling hearing aids shall have and maintain an established retail business address to engage in that fitting or selling, routinely open for service to customers or clients. The address of the licensee's place of business shall be registered with the ~~bureau~~ board as provided in Section 2538.33.

(b)...

#### **2538.38. Record retention; Inspections**

A licensee shall, upon the consummation of a sale of a hearing aid, keep and maintain records in his or her office or place of business at all times and each record shall be kept and maintained for a seven-year period. All records related to the sale and fitting of hearing aids shall be open to inspection by the ~~bureau~~ board or its authorized representatives upon reasonable notice. The records kept shall include:

(a)...

#### **UPDATE:**

Since only some of the recommended clean-up language was enacted during the Board's last Sunset Review, the Board will be recommending the remaining changes be enacted and will be included in the Board's Section 12 - New Issues under (e) Technical Statutory Clean-up Issues.



**CONTINUED REGULATION OF THE PROFESSION BY THE  
CURRENT SPEECH-LANGUAGE PATHOLOGY AND AUDIOLOGY AND HEARING AID  
DISPENSERS BOARD**

**ISSUE #11:** *Should the licensing and regulation of speech-language pathologists, audiologists, and hearing aid dispensers be continued and be regulated by the current Board membership?*

**Staff Recommendation:** *The Board should be continued with a 4-year extension of its sunset date so that the Legislature may once again review whether the issues and recommendations in this Background Paper have been addressed.*

**Board Response:** The Board agrees with the staff recommendation that the licensing and regulation of speech-language pathologists, audiologists, and hearing aid dispensers continue to be regulated by the current Board membership.

**UPDATE:**

In order to continue protecting the consumers of speech and hearing services in California, the Board strongly urges the Legislature to continue the regulation of the practices of speech-language pathology, audiology, and hearing aid dispensing by the Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board under its current membership.

This is the opportunity for the Board to inform the Committees of solutions to issues identified by the Board and by the Committees. Provide a short discussion of each of the outstanding issues, and the Board's recommendation for action that could be taken by the Board, by DCA or by the Legislature to resolve these issues (i.e., policy direction, budget changes, legislative changes) for each of the following:

1. Issues that were raised under prior Sunset Review that have not been addressed.

- a. **Elimination of Speech-Language Pathology Aide Designation**

**Background**

The Speech-Language Pathology Aide and Audiology Aide is defined in Business and Professions Codes 2530.2 (h) and (m) and the requirement to register an Aide is in BPC Section 2530.6. The requirements for Aides are in the following regulations:

- Section 1399.154 defines a speech-language pathology aide as a person who assists or facilitates a speech-language pathologist and is registered by the supervisor with the Board, which is approved by the Board.
- Section 1399.154.1 describes the process for speech-language pathology registration of a speech-language pathology aide.
- Section 1399.154.2 states a speech-language pathologist must be physically present when the aide is assisting with patients unless there is an alternative plan of supervision.
- Section 1399.154.3 states the maximum number of aides that can be supervised by a speech-language pathologist.
- Section 1399.154.4 states the supervising speech-language pathologist will instruct the aide in necessary skills, the aide must demonstrate their competences, and the supervising speech-language pathologist must instruct the aide in limitations imposed by the duties.
- Sections 1399.154.5 – 1399.154-7 state regulations for notice of termination, noncompliance with this article, and that aide experience is not applicable to the qualifications for licensure regarding supervised clinical experience and required professional experience.

Alternatively, speech-language pathology assistant regulations are as follows:

- Section 1399.170 defines a speech-language pathology assistant in great detail, including accountability of the speech-language pathology assistant, the type of supervision required, and who services can be provided to.
- Section 1399.170.1 describes the responsibilities, duties, and functions of the speech- language pathology assistant.
- Section 1399.170.2 describes the types of supervision required for duties performed by the speech-language pathology assistant.
- Section 1399.170.3 describes the activities, duties and functions outside of the scope of practice of an speech-language pathology assistant.
- Section 1399.170.4 describes the application for approval of speech-language pathology assistant training programs.

- Section 1399.170.5 describes the approval requirements for speech-language pathology assistant programs.
- Section 1399.170.6 describes the requirements of the sponsoring institution.
- Section 1399.170.7 describes the administration and organization of the speech-language pathology assistant program.
- Section 1399.170.8 describes the required field work experience to be a speech-language pathology assistant.
- Section 1399.170.9 describes site visit compliance for remaining a speech-language pathology assistant program.
- Section 1399.170.10 describes the required speech-language pathology assistant curriculum.
- Section 1399.170.11 describes the qualifications for registration as a speech-language pathology assistant.
- Section 1399.170.12 was deleted.
- Section 1399.170.13 describes the application and fees to be a speech-language pathology assistant.
- Section 1399.170.14 describes requirements for renewal of speech-language pathology assistant licensure.
- Section 1399.170.15 describes requirements for speech-language pathologist supervision of speech-language pathology assistants.
- Sections 1399.170.16 – 1399.170.18 describe the maximum number of support personnel supervised by a speech-language pathologist, regulations addressing when a speech-language pathology assistant has more than one speech-language pathology supervisor, and regulations addressing a notice of termination by a speech-language pathology supervisor.
- Section 1399.170.19 describes the actions that can result in discipline against a speech-language pathology assistant including denial of licensure or probation, suspension or termination of speech-language pathology assistant licensure.

The Board issued the following number of Speech-Language Pathology Aide and Audiology Aide registrations since its last Sunset Review:

<b>Aide Registrations Issued</b>					
	2016/17	2017/18	2018/19	2019/20	2020/21
Speech-Language Pathology Aide	19	12	10	26	11
Audiology Aide	21	21	22	19	17
Total	40	33	32	45	28

The population of Aide registrations is small and declining since the Board's last Sunset Review.

<b>Aide Registration Population</b>					
	2016/17	2017/18	2018/19	2019/20	2020/21
Aide	130	142	130	120	94

In the Board's 2016 Sunset Review report, the Board was requesting to eliminate the Speech-Language Pathology Aide designation but the Committee did not pursue this issue as there was no clear path to help Speech-Language Pathology Aides to transition to

become Speech-Language Pathology Assistants. Since the Committee did not pursue the elimination of the Speech-Language Pathology Aide designation, the Board now has to consider ways to improve the consumer protections related to the Aide registration, including seeking renewal and continuing education requirements.

### **Effect on Consumers**

As can be seen by the above speech-language pathology aide regulations, there are no renewal or continuing education requirements to ensure consumer protection. For these reasons, if the Aide registration is to continue to be offered for both Speech-Language Pathology and Audiology, then the requirements for the Aide registration should be reexamined and strengthened.

### **Recommendation**

Enact statutory amendments to create renewal and continuing education requirements for Aide registrations to ensure some minimal level of consumer protection compared to the protections of Speech-Language Pathology Assistants.

### **Proposed Text**

#### **Amend Business and Professions Code section 2530.2**

As used in this chapter, unless the context otherwise requires:

- (a) "Board" means the Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board.
- (b) "Person" means any individual, partnership, corporation, limited liability company, or other organization or combination thereof, except that only individuals can be licensed under this chapter.
- (c) A "speech-language pathologist" is a person who practices speech-language pathology.
- (d) The practice of speech-language pathology means all of the following:
  - (1) The application of principles, methods, instrumental procedures, and noninstrumental procedures for measurement, testing, screening, evaluation, identification, prediction, and counseling related to the development and disorders of speech, voice, language, or swallowing.
  - (2) The application of principles and methods for preventing, planning, directing, conducting, and supervising programs for habilitating, rehabilitating, ameliorating, managing, or modifying disorders of speech, voice, language, or swallowing in individuals or groups of individuals.
  - (3) Conducting hearing screenings.
  - (4) Performing suctioning in connection with the scope of practice described in paragraphs (1) and (2), after compliance with a medical facility's training protocols on suctioning procedures.
- (e) (1) Instrumental procedures referred to in subdivision (d) are the use of rigid and flexible endoscopes to observe the pharyngeal and laryngeal areas of the throat in order to observe, collect data, and measure the parameters of communication and swallowing as well as to guide communication and swallowing assessment and therapy.
  - (2) Nothing in this subdivision shall be construed as a diagnosis. Any observation of an abnormality shall be referred to a physician and surgeon.
- (f) A licensed speech-language pathologist shall not perform a flexible fiber optic nasendoscopic procedure unless he or she has received written verification from an otolaryngologist certified by the American Board of Otolaryngology that the speech-

language pathologist has performed a minimum of 25 flexible fiber optic nasendoscopic procedures and is competent to perform these procedures. The speech-language pathologist shall have this written verification on file and readily available for inspection upon request by the board. A speech-language pathologist shall pass a flexible fiber optic nasendoscopic instrument only under the direct authorization of an otolaryngologist certified by the American Board of Otolaryngology and the supervision of a physician and surgeon.

(g) A licensed speech-language pathologist shall only perform flexible endoscopic procedures described in subdivision (e) in a setting that requires the facility to have protocols for emergency medical backup procedures, including a physician and surgeon or other appropriate medical professionals being readily available.

(h) "Speech-language pathology aide" means any person meeting the minimum requirements established by the board, who works directly under the supervision of a speech-language pathologist.

(i) (1) "Speech-language pathology assistant" means a person who meets the academic and supervised training requirements set forth by the board and who is approved by the board to assist in the provision of speech-language pathology under the direction and supervision of a speech-language pathologist who shall be responsible for the extent, kind, and quality of the services provided by the speech-language pathology assistant.

(2) The supervising speech-language pathologist employed or contracted for by a public school may hold a valid and current license issued by the board, a valid, current, and professional clear clinical or rehabilitative services credential in language, speech, and hearing issued by the Commission on Teacher Credentialing, or other credential authorizing service in language, speech, and hearing issued by the Commission on Teacher Credentialing that is not issued on the basis of an emergency permit or waiver of requirements. For purposes of this paragraph, a "clear" credential is a credential that is not issued pursuant to a waiver or emergency permit and is as otherwise defined by the Commission on Teacher Credentialing. Nothing in this section referring to credentialed supervising speech-language pathologists expands existing exemptions from licensing pursuant to Section 2530.5.

(j) An "audiologist" is one who practices audiology.

(k) "The practice of audiology" means the application of principles, methods, and procedures of measurement, testing, appraisal, prediction, consultation, counseling, and instruction related to auditory, vestibular, and related functions and the modification of communicative disorders involving speech, language, auditory behavior, or other aberrant behavior resulting from auditory dysfunction; and the planning, directing, conducting, supervising, or participating in programs of identification of auditory disorders, hearing conservation, cerumen removal, aural habilitation, and rehabilitation, including hearing aid recommendation and evaluation procedures, including, but not limited to, specifying amplification requirements and evaluation of the results thereof, auditory training, and speech reading, and the selling of hearing aids.

(l) A "dispensing audiologist" is a person who is authorized to sell hearing aids pursuant to his or her audiology license.

(m) "Audiology aide" means any person meeting the minimum requirements established by the board, who works directly under the supervision of an audiologist. ~~An audiology aide may not perform any function that constitutes the practice of audiology unless he or she is under the supervision of an audiologist.~~ The board may by regulation exempt certain functions performed by an industrial audiology aide from supervision provided that his or her employer has established a set of procedures or protocols that the aide shall follow in performing these functions.

(n) "Medical board" means the Medical Board of California.

(o) A “hearing screening” performed by a speech-language pathologist means a binary puretone screening at a preset intensity level for the purpose of determining if the screened individuals are in need of further medical or audiological evaluation.

(p) “Cerumen removal” means the nonroutine removal of cerumen within the cartilaginous ear canal necessary for access in performance of audiological procedures that shall occur under physician and surgeon supervision. Cerumen removal, as provided by this section, shall only be performed by a licensed audiologist. Physician and surgeon supervision shall not be construed to require the physical presence of the physician, but shall include all of the following:

(1) Collaboration on the development of written standardized protocols. The protocols shall include a requirement that the supervised audiologist immediately refer to an appropriate physician any trauma, including skin tears, bleeding, or other pathology of the ear discovered in the process of cerumen removal as defined in this subdivision.

(2) Approval by the supervising physician of the written standardized protocol.

(3) The supervising physician shall be within the general vicinity, as provided by the physician-audiologist protocol, of the supervised audiologist and available by telephone contact at the time of cerumen removal.

(4) A licensed physician and surgeon may not simultaneously supervise more than two audiologists for purposes of cerumen removal.

#### **Amend Business and Professions Code section 2530.6**

(a) Speech-language pathologists and audiologists supervising speech-language pathology or audiology aides shall register with the board the name of each aide working under their supervision.

(b) The number of aides who may be supervised by a licensee shall be determined by the board.

(c) The supervising audiologist or speech-language pathologist shall be responsible for the extent, kind, and quality of services performed by the aide, consistent with the board’s designated standards and requirements.

(d) *Speech-language pathology and audiology aide registrations shall expire every two years and be subject to the renewal requirements in Article 6 of this chapter.*

(1) *Speech-language pathology and audiology aides shall, at the time of renewal, certify under penalty of perjury, that during the preceding renewal period they completed the required continuing professional development specified in subdivision e.*

(2) *At the time of renewal, the Speech-language pathologist or audiologist supervising the speech-language pathology or audiology aide shall update the board on the duties the aide performs while assisting the supervisor in the practice of speech-language pathology or audiology, and the training program and assessment methods the supervisor is utilizing to ensure the aide’s continued competency.*

(e) *Minimum continuing professional development requirements for the speech-language pathology and audiology aide shall not exceed 6 hours in a two-year period.*

(1) *The speech-language pathology aide or audiology aide’s supervisor shall act as a professional development advisor. The speech-language pathology aide or audiology aide’s supervisor is responsible for ensuring completion of the required continuing professional development during each renewal period.*

(2) *The speech-language pathology aide or audiology aide’s continuing professional development may be satisfied with successful completion of state or regional conferences, workshops, formal in-service presentations, independent study programs, or any combination of these concerning communication and related disorders, speech-language pathology, audiology, hearing disorders, and direct, related, or indirect patient/client care.*

## **Amend Business and Professions Code section 2534.2**

The amount of the fees prescribed by this chapter is that established by the following schedule:

- (a) (1) The application fee and renewal fee for speech-language pathologists and nondispensing audiologists shall be established by the board in an amount that does not exceed one hundred fifty dollars (\$150) but is sufficient to support the functions of the board that relate to the functions authorized by this chapter, excluding Article 9 (commencing with Section 2539.1).
- (2) The application fee and renewal fee for dispensing audiologists shall be established by the board in an amount that does not exceed two hundred eighty dollars (\$280) but is sufficient to support the functions of the board that relate to the functions authorized by this chapter.
- (b) The delinquency fee shall be twenty-five dollars (\$25).
- (c) The reexamination fee shall be established by the board in an amount that does not exceed seventy-five dollars (\$75).
- (d) The ~~fee for~~ registration fee and renewal fee of an aide shall be established by the board in an amount that does not exceed thirty dollars (\$30).
- (e) A fee to be set by the board of not more than one hundred dollars (\$100) shall be charged for each application for approval as a speech-language pathology assistant.
- (f) A fee of one hundred fifty dollars (\$150) shall be charged for the issuance of and for the renewal of each approval as a speech-language pathology assistant, unless a lower fee is established by the board.
- (g) The duplicate wall certificate fee is twenty-five dollars (\$25).
- (h) The duplicate renewal receipt fee is twenty-five dollars (\$25).
- (i) The application fee and renewal fee for a temporary license is thirty dollars (\$30).
- (j) The fee for issuance of a license status and history certification letter shall be established by the board in an amount not to exceed twenty-five dollars (\$25).

## 2. New issues that are identified by the Board in this report.

### **a. Audiology Licensing Requirements**

#### **Background**

BPC Section 2532.25(b)(2) establishes a licensing requirement for the submission of evidence of no less than 12 months of satisfactorily completed supervised professional full-time Required Professional Experience (RPE) or its part-time equivalent obtained under the supervision of a licensed audiologist. This experience must be completed under the direction of a board-approved audiology doctoral program and the RPE must follow completion of the didactic and clinical rotation requirements of the audiology doctoral program.

For current audiology training programs, this statutory requirement creates hardships for both the audiology doctoral students and the programs. This requirement creates a barrier to licensure for foreign students on a visa who cannot accrue 12 months of experience after the clinical experience under the current terms of their visa, and students who complete their doctoral education in other states that do not require 12 months of experience. This issue became even more pronounced during the COVID-19 pandemic, where many

audiology students accrued the equivalence of 12 months of experience in hours but did not meet the 12 calendar months of experience required for licensure, thus causing delays in licensure for some applicants.

The California State University (CSU) system and private audiology programs typically require that their students earn approximately 1850 clinical and professional experience hours due to the typical nationwide adoption of this hourly requirement, clearly exceeding the current requirement of 300 clinical clock hours in Title 16, California Code of Regulations (CCR) section 1399.152.2(c). Currently, due to the BPC Section 2532.2(b) requirement, all programs require a 12-month RPE during the 3rd or 4th year of the doctoral program, even if the 1850 clinical clock hour requirement has already been met prior to the completion of the 12 month RPE experience. This situation, along with requiring that all RPE hours be achieved following the completion of the didactic and clinical aspects of the program, cause a significant financial and temporal hardship for students who complete their professional hour requirement at 10.5 months, or for those who have difficulty achieving 1850 hours in a 12 month period (due to the CSU Executive Order requiring the completion of the program in 11 semesters or visa limitations for foreign students).

The current requirement of 300 clinical clock hours in 16 CCR section 1399.152.2(c) was developed when the minimum educational requirement for audiology licensure was a master's degree. Now the minimum educational requirement for audiology licensure is a doctoral degree with significantly more hours and quality of clinical and professional experiences. Although the Board has authority to promulgate updated regulations, the current statutory requirement in BPC Section 2532.25(b)(2) creates a timeframe constraint for applicants that cannot be overridden through the promulgation of regulations.

### **Effect on Consumers**

As discussed in the Board's 2016 sunset report, California has experienced shortages in the audiology profession. Experts indicate that California will need approximately 750 more audiologists to meet the needs of California's hearing-impaired residents by 2030. Changing audiology licensing requirements to reflect current educational and professional experience standards would maintain consumer protection while streamlining the licensing requirements for audiology students and potentially getting applicants licensed and into the workforce sooner.

### **Board Actions**

The Board's Audiology Practice Committee met on September 23, 2020 and received information that students earn between 600 and 800 clinical clock hours before the RPE rotations begin. The Audiology Practice Committee discussed amending Business and Professions Code section 2532.25 to allow supervised clinical rotations or experiences held throughout the educational program to count toward the 12 months of full-time experience.

The Board adopted the proposed text at the November 20, 2020 meeting and pursued including the language in a Business and Professions omnibus bill during the 2021 legislative session. It was decided that the language did not fit the parameters for an omnibus bill and the Board decided to include this issue as part of the sunset review process.



## Recommendations

Modify the 12-month professional experience requirement in BPC Section 2532.25(b)(2) to allow students to accumulate time spent in clinical experiences or rotations that occur pre-RPE as part of the 12-month professional experience requirement.

## Proposed Text

### Amend 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.

## **b. Hearing Aid Dispensing Committee Membership and Issues with Quorum**

### Background

BPC Section 2531.05 establishes the Hearing Aid Dispensing Committee consisting of two Audiologists, two Hearing Aid Dispensers, one public member, and one Otolaryngologist. The Board has been without a quorum for the Hearing Aid Dispensing Committee since January 1, 2021.

The size of the Hearing Aid Dispensing Committee is unusually large, consisting of six of the Board's nine total members. The Board's other committees for the practices of speech-language pathology and audiology consist of three and four members, respectively. Additionally, BPC Section 2531.05 is very specific with the membership of the Hearing Aid Dispensing Committee, requiring both of the licensed Audiologist board members, both of the licensed Hearing Aid Dispenser board members, one public member, and the licensed Otolaryngologist board member to serve on the Hearing Aid Dispensing Committee. The lack of quorum is a result of the difficulty the Board has experienced filling one Hearing Aid Dispenser position, one Audiologist position, and the Otolaryngologist position.

### **Effect on Consumers**

Consumers may be harmed if the Board is unable to address issues related to the hearing aid dispensing profession due to a lack of quorum on the Hearing Aid Dispensing Committee. This lack of quorum forces the entire Board to discuss issues that could be handled by the Hearing Aid Dispensing Committee, limiting the Board's time to address other important consumer protection issues.

### **Board Actions**

The Board has been aware of the lack of quorum for the Hearing Aid Dispensing Committee and has inquired to DCA's Office of Board and Bureau Relations when the Board's vacant positions will be filled.

### **Recommendations**

The Board recommends amending BPC Section 2531.05 to change the membership of the Hearing Aid Dispensing Committee from 6 members to 4 members by eliminating one licensed Audiologist and the Otolaryngologist. This change in membership structure will help the Hearing Aid Dispensing Committee obtain a quorum.

### **Proposed Text**

#### **Amend Business and Professions Code section 2531.05**

2531.05. Creation of Hearing Aid Dispensing Committee; Members; Duties

(a) The Hearing Aid Dispensing Committee is hereby created within the jurisdiction of the board.

(b) The committee shall be comprised of the following board members:

(1) ~~The two~~ One licensed audiologists.

(2) The two licensed hearing aid dispensers.

(3) ~~One public member of the board.~~

(4) The one public member of the board who is a licensed physician and surgeon and who is board certified in otolaryngology. If this position becomes vacant, the position may be filled with an alternative public member of the board.

(c) The committee shall review and research the practice of fitting or selling hearing aids and shall advise the board about this practice based on that review and research.

## **c. Persons Deemed to Meet Requirements – Outdated Audiology Reference**

### **Background**

Business and Professions Code (BPC) section 2532.8 (a) states that “The board shall deem a person who holds a valid certificate of clinical competence in speech-language pathology or audiology issued by the American Speech-Language-Hearing Association’s Council for Clinical Certification to have met the educational and experience requirements set forth for speech-language pathologists or audiologists in Section 2532.2.” However, when the requirements for licensure as an audiologist were updated in 2009 to require a doctoral degree and were placed in a separate Section of the BPC (2532.25), BPC section 2532.8 was not updated to include reference to this new code. The Board therefore does not have the authority to accept the Certificate of Clinical Competence in Audiology as fulfilling licensure requirements if the audiologist graduated from an accredited degree program after December 31, 2007, and thus audiologists with a Certificate of Clinical Competence in Audiology who are often licensed in other states have to provide verification of all licensure requirements. This not only places an additional burden on applicants to obtain educational, professional experience, and licensure documentation, it also creates additional workload for Board Staff. Updating this reference would streamline the licensure process for Audiologist applicants who maintain their Certificate of Clinical Competence in Audiology.

BPC 2532.8 should be amended to deem applicants who hold the national Certificate of Clinical Competence (CCC) in speech-language pathology or audiology, issued by the American Speech-Language-Hearing Association (ASHA) to apply equivalence to the current requirements for audiology applicants referenced found in BPC Section 2532.25.

In addition, the American Academy of Audiology (AAA), which has over \_\_,000 members, issues the American Board of Audiology certification which has requirements that are similar to the ASHA audiology certification requirements. Including AAA’s American Board of Audiology certification in Section 2532.8 would provide for greater reciprocity for audiologists who have obtained AAA certification.

### **Effect on Consumers**

Due to current workforce shortages in the field of audiology, the lack of the deemed equivalent options further exacerbates the lack of access to audiological services for California consumers.

### **Board Actions**

None

### **Recommendations**

The Board recommends amending BPC Section 2532.8 to include reference to 2532.25 to streamline licensure of audiologists who hold a Certificate of Clinical Competence in Audiology and enhance access to audiology services for California consumers.

## Proposed Text

### Amend Business and Professions Code Section 2532.8

(a) The board shall deem a person who holds a valid Certificate of Clinical Competence in Speech-Language Pathology ~~or audiology~~ issued by the American Speech-Language-Hearing Association's Council for Clinical Certification to have met the educational and experience requirements set forth for speech-language pathologists ~~or audiologists~~ in Section 2532.2.

*(b) The board shall deem a person who holds either a valid Certificate of Clinical Competence in Audiology issued by the American Speech-Language-Hearing Association's Council for Clinical Certification or a valid American Board of Audiology certificate issued by the American Academy of Audiology to have met the educational and experience requirements set forth for audiologists in sections 2532.2 and 2532.25.*

~~(b)~~ (c) If an applicant qualifying for licensure under this section has obtained any equivalent qualifications in violation of the laws and regulations governing the practices of speech-language pathology or audiology or has not met the requirements for licensure, he or she shall correct the deficiency to qualify for licensure. If the deficiency is not cured within one year from the date of the deficiency notice, the application for licensure is deemed abandoned.

#### **d. Elimination of Nonoperative Grandfather Clause for Speech-Language Pathology Aides**

##### **Background**

Assembly Bill (AB) 205 (Machado, Chapter 1058, Statutes of 1998) created a new license type of Speech-Language Pathology Assistant to work under the supervision of a Speech-Language Pathologist. Prior to the Speech-Language Pathology Assistant license, a Speech-Language Pathologist could have a Speech-Language Pathology Aide working under their direct supervision.

In order to allow individuals working as a Speech-Language Pathology Aide to obtain licensure as a Speech-Language Pathology Assistant, AB 205 (Machado, Chapter 1058, Statutes of 1998) included a grandfather clause authorizing Speech-Language Pathology Aides who have worked at least 12 months to apply for licensure as a Speech-Language Pathology Assistant. SB 50 (Machado, Chapter 173, Statutes of 2001) extended the deadline, from January 1, 2001 to June 1, 2003, for a Speech-Language Pathology Aide to apply for licensure as a Speech-Language Pathology Assistant based on work experience, if they have worked as a Speech-Language Pathology Aide within the past five years.

Since the extended deadline of June 1, 2003 for a Speech-Language Pathology Aide to apply for licensure as a Speech-Language Pathology Assistant has passed, this statute is no longer needed. A statutory change would provide clarity that any future applicant for a Speech-Language Pathology Assistant license must meet the full qualifications and prior experience as a Speech-Language Pathology Aide would no longer be applicable.

## Effect on Consumers

None, changing this section simply provides clarity to applicants that working as a Speech-Language Pathology Aide for 12 months does not make the person eligible for licensure as a Speech-Language Pathology Assistant.

## Recommendations

The Board recommends amending BPC Section 2538.3 to remove a nonoperative statute that allowed speech-language pathology aides with a minimum of one year of full-time experience to apply as a speech-language pathology assistant.

## Proposed Text

### Amend Business and Professions Code section 2538.3

§ 2538.3. Course of study; ~~Aides~~

(a) A person applying for approval as a speech-language pathology assistant shall have graduated from a speech-language pathology assistant associate of arts degree program, or equivalent course of study, approved by the board. A person who has successfully graduated from a board-approved bachelor's degree program in speech-language pathology or communication disorders shall be deemed to have satisfied an equivalent course of study.

~~(b) On or before June 1, 2003, a person who has in the last five years performed the functions of a speech-language pathology aide on a full-time basis for a minimum of one year, or on a part-time basis equivalent to a minimum of one year of full-time work, may make application for registration as a speech-language pathology assistant based upon the board's recognition of that aide's job training and experience and the performance of functions and tasks similar to the speech-language pathology assistant category. For purposes of this subdivision, "full time" means a minimum of 30 hours per week.~~

## e. Technical Statutory Clean-up Issues

### Recommendations

The Board recommends the following amendments to the Board's Practice Act:

(Rename the chapter to include Hearing Aid Dispensers)

CHAPTER 5.3

Speech-Language Pathologists and Audiologists and Hearing Aid Dispensers

Article 4

Denial, Suspension, **and** Revocation, and Probation

Amend Business and Professions Code section 2530.5

- (a) Nothing in this chapter shall be construed as restricting hearing testing conducted by licensed physicians and surgeons or by persons conducting hearing tests under the direct supervision of a physician and surgeon.
- (b) Nothing in this chapter shall be construed to prevent a licensed hearing aid dispenser from engaging in testing of hearing and other practices and procedures used solely for the fitting and selling of hearing aids nor does this chapter restrict persons practicing their licensed profession and operating within the scope of their licensed profession or employed by someone operating within the scope of their licensed professions, including persons fitting and selling hearing aids who are properly licensed or registered under the laws of the State of California.
- (c) Nothing in this chapter shall be construed as restricting or preventing the practice of speech-language pathology or audiology by personnel holding the appropriate credential from the Commission on Teacher Credentialing as long as the practice is conducted within the confines of or under the jurisdiction of a public preschool, elementary, or secondary school by which they are employed and those persons do not either offer to render or render speech-language pathology or audiology services to the public for compensation over and above the salary they receive from the public preschool, elementary, or secondary school by which they are employed for the performance of their official duties.
- (d) Nothing in this chapter shall be construed as restricting the activities and services of a student or speech-language pathology intern in speech-language pathology pursuing a course of study leading to a degree in speech-language pathology at an accredited or approved college or university or an approved clinical training facility, provided that these activities and services constitute a part of his or her supervised course of study and that those persons are designated by the title as “speech-language pathology intern,” “speech-language pathology trainee,” or other title clearly indicating the training status appropriate to his or her level of training.
- (e) Nothing in this chapter shall be construed as restricting the activities and services of a student or audiology intern in audiology pursuing a course of study leading to a degree in audiology at an accredited or approved college or university or an approved clinical training facility, provided that these activities and services constitute a part of his or her supervised course of study and that those persons are designated by the title as “audiology intern,” “audiology trainee,” or other title clearly indicating the training status appropriate to his or her level of training.
- (f) Nothing in this chapter shall be construed as restricting the practice of an applicant who is obtaining the required professional experience specified in subdivision (c) of Section 2532.2 [or subdivision \(b\) of Section 2532.25](#) and who has been issued a temporary license pursuant to Section 2532.7. The number of applicants who may be supervised by a licensed speech-language pathologist or a speech-language pathologist having qualifications deemed equivalent by the board shall be determined by the board. The supervising speech-language pathologist shall register with the board the name of each applicant working under his or her supervision, and shall submit to the board a description of the proposed professional responsibilities of the applicant working under his or her supervision. The number of applicants who may be supervised by a licensed audiologist or an audiologist having qualifications deemed equivalent by the board shall be determined by the board. The supervising audiologist shall register with the board the name of each applicant working under his or her supervision, and shall submit to the board a description of the proposed professional responsibilities of the applicant working under his or her supervision.
- (g) Nothing in this chapter shall be construed as restricting hearing screening services in public or private elementary or secondary schools so long as these screening services are provided by persons registered as qualified school audiometrists pursuant to Sections 1685

and 1686 of the Health and Safety Code or hearing screening services supported by the State Department of Health Care Services so long as these screening services are provided by appropriately trained or qualified personnel.

(h) Persons employed as speech-language pathologists or audiologists by a federal agency shall be exempt from this chapter.

(i) Nothing in this chapter shall be construed as restricting consultation or the instructional or supervisory activities of a faculty member of an approved or accredited college or university for the first 60 days following appointment after the effective date of this subdivision.

### **Amend Business and Professions Code section 2533**

The board may refuse to issue, or issue subject to terms and conditions, a license on the grounds specified in Section 480, or may suspend, revoke, or impose terms and conditions upon the license of any licensee for any of the following:

(a) Conviction of a crime substantially related to the qualifications, functions, and duties of a speech-language pathologist or audiologist or hearing aid dispenser, as the case may be. The record of the conviction shall be conclusive evidence thereof.

(b) Securing a license by fraud or deceit.

(c)(1) The use or administering to himself or herself of any controlled substance.

(2) The use of any of the dangerous drugs specified in Section 4022, or of alcoholic beverages, to the extent or in a manner as to be dangerous or injurious to the licensee, to any other person, or to the public, or to the extent that the use impairs the ability of the licensee to practice speech-language pathology or audiology safely.

(3) More than one misdemeanor or any felony involving the use, consumption, or self-administration of any of the substances referred to in this section.

(4) Any combination of paragraph (1), (2), or (3).

The record of the conviction shall be conclusive evidence of unprofessional conduct.

(d) Advertising in violation of Section 17500. Advertising an academic degree that was not validly awarded or earned under the laws of this state or the applicable jurisdiction in which it was issued is deemed to constitute a violation of Section 17500.

(e) Committing a dishonest or fraudulent act that is substantially related to the qualifications, functions, or duties of a licensee.

(f) Incompetence, gross negligence, or repeated negligent acts.

(g) Other acts that have endangered or are likely to endanger the health, welfare, and safety of the public.

(h) Use by a hearing aid dispenser of the term “doctor” or “physician” or “clinic” or “audiologist,” or any derivation thereof, except as authorized by law.

(i) The use, or causing the use, of any advertising or promotional literature in a manner that has the capacity or tendency to mislead or deceive purchasers or prospective purchasers.

(j) Any cause that would be grounds for denial of an application for a license.

(k) Violation of Section 1689.6 or 1793.02 of the Civil Code.

(l) Violation of a term or condition of a probationary order of a license issued by the board pursuant to Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code.

(m) Violation of a term or condition of a conditional license issued by the board pursuant to this section.

[\(n\) Disciplinary action taken by any public agency in any state or territory for any act substantially related to the practice of speech-language pathology, audiology, or hearing aid dispensing.](#)

*o) Aiding or abetting any person to engage in the unlicensed practice of speech-language pathology, audiology, or hearing aid dispensing.*

*p) Violation or attempting to violate, directly or indirectly, any of the provisions of this chapter.*

#### **Amend Business and Professions Code section 2533.1**

A plea or verdict of guilty or a conviction following a plea of nolo contendere made to a charge substantially related to the qualifications, functions, and duties of a speech-language pathologist, ~~or~~ audiologist, *or hearing aid dispenser* is deemed to be a conviction within the meaning of this article. The board may order a licensee be disciplined or denied a license as provided in Section 2533 when the time for appeal has elapsed, or the judgment of conviction has been affirmed on appeal, or when an order granting probation is made suspending the imposition of sentence irrespective of a subsequent order under Section 1203.4, 1203.4a, or 1203.41 of the Penal Code allowing the person to withdraw his or her plea of guilty and to enter a plea of not guilty, or setting aside the verdict of guilty, or dismissing the accusation, information or indictment.

#### **Amend Business and Professions Code section 2533.4**

Whenever any person other than a licensed speech-language pathologist, ~~or~~ audiologist, *or hearing aid dispenser* has engaged in any act or practice which constitutes an offense against this chapter, a superior court of any county, on application of the board, may issue an injunction or other appropriate order restraining that conduct. Proceedings under this section shall be governed by Chapter 3 (commencing with Section 525) of Title 7 of Part 2 of the Code of Civil Procedure. The board may commence action in the superior court under this section on its own motion.

#### **Amend Business and Professions Code section 2533.6**

*(a) A person whose license has been revoked or suspended, or who has been placed on probation, may petition the Speech-Language Pathology & Audiology & Hearing Aid Dispensers Board for reinstatement or modification of penalty, including modification or termination of probation, after a period of not less than the following minimum period of time has elapsed from the effective date of the decision ordering that disciplinary action:*

*(1) At least three years for reinstatement of a license revoked for unprofessional conduct, except that the board may, for good cause shown, specify in a revocation order that a petition for reinstatement may be filed after two years.*

*(2) At least two years for early termination or one year for modification of a condition of probation of three years or more.*

*(3) At least one year for reinstatement of a license revoked for mental or physical illness, or for modification of a condition, or termination of probation of less than three years.*

*(b) The petition shall state any facts as may be required by the board.*

*(c) The petition may be heard by the board, with the matter presided over by an administrative law judge. After a hearing on the petition, the administrative law judge shall provide a decision as determined by the board which shall be acted upon in accordance with the Administrative Procedures Act.*

*(d) The board or the administrative law judge hearing the petition may consider all activities of the petitioner since the disciplinary action was taken, the offense for which the petitioner was disciplined, the petitioner's activities during the time the license was in good standing, and the petitioner's rehabilitative efforts, general reputation for truth, and professional*



ability. The hearing may be continued, as the board or the administrative law judge finds necessary.

(e) The administrative law judge when hearing a petition for reinstating a license, or modifying a penalty, may recommend the imposition of any terms and conditions deemed necessary.

(f) The board may deny, without a hearing or argument, any petition for reinstatement filed pursuant to this section for any of the following:

(1) The petitioner is under sentence for any criminal offense, including any period during which the petitioner is on court-imposed probation or parole.

(2) There is an accusation or petition to revoke probation pending against the petitioner

(3) The petition is within a period of two years from the effective date of the prior decision following a hearing under this section.

(g) The board may deny, without a hearing or argument, any petition for termination or modification of probation filed pursuant to this section for any of the following

(1) The petitioner has failed to comply with the terms and conditions of the disciplinary order.

(2) The board is conducting an investigation of the petitioner while he or she is on probation.

(3) The petitioner has a subsequent arrest that is substantially related to the qualifications, functions, or duties of the licensee or registrant and this arrest occurred while on probation.

(4) The petitioner's probation with the board is currently tolled.

(h) Nothing in this section shall be deemed to alter Sections 822 and 823.

#### **Amend Business and Professions Code section 2539.1**

(a) (1) On and after January 1, 2010, in addition to satisfying the licensure and examination requirements described in Sections 2532, ~~and~~ 2532.2, and 2532.25 no licensed audiologist shall sell hearing aids unless he or she completes an application for a dispensing audiology license, pays all applicable fees, and passes an examination, approved by the board, relating to selling hearing aids.

(2) The board shall issue a dispensing audiology license to a licensed audiologist who meets the requirements of paragraph (1).

(b) (1) On and after January 1, 2010, a licensed audiologist with an unexpired license to sell hearing aids pursuant to Article 8 (commencing with Section 2538.10) may continue to sell hearing aids pursuant to that license until that license expires pursuant to Section 2538.53, and upon that expiration the licensee shall be deemed to have satisfied the requirements described in subdivision (a) and may continue to sell hearing aids pursuant to his or her audiology license subject to the provisions of this chapter. Upon the expiration of the audiologist's license to sell hearing aids, the board shall issue him or her a dispensing audiology license pursuant to paragraph (2) of subdivision (a). This paragraph shall not prevent an audiologist who also has a hearing aid dispenser's license from maintaining dual or separate licenses if he or she chooses to do so.

(2) A licensed audiologist whose license to sell hearing aids, issued pursuant to Article 8 (commencing with Section 2538.10), is suspended, surrendered, or revoked shall not be authorized to sell hearing aids pursuant to this subdivision and he or she shall be subject to the requirements described in subdivision (a) as well as the other provisions of this chapter.

(c) A licensed hearing aid dispenser who meets the qualifications for licensure as an audiologist shall be deemed to have satisfied the requirements of paragraph (1) of subdivision (a) for the purposes of obtaining a dispensing audiology license.

(d) For purposes of subdivision (a), the board shall provide the hearing aid dispenser's examination provided by the former Hearing Aid Dispensers Bureau until such time as the

next examination validation and occupational analysis is completed by the Department of Consumer Affairs pursuant to Section 139 and a determination is made that a different examination is to be administered.

3. New issues not previously discussed in this report.

a. **Enforcement of Unprofessional Conduct**

**Background**

BPC Section 650 prohibits licensees from offering or receiving consideration in exchange for patient referrals. BPC Section 2533 is the principal jurisdictional statute for the Board's enforcement actions. Currently, BPC Section 2533 does not have a specific provision incorporating BPC Section 650 as a ground for unprofessional conduct. As a result, the Board does not provide clear ground for disciplining licensees for violations of BPC Section 650. Amending BPC Section 2533 would aid the Board in enforcing these types of violations.

**Effect on Consumers**

This statutory change would provide consumer protection by ensuring the Board has full authority to enforce violations of BPC Section 650, which prohibits licensees from offering or receiving consideration in exchange for patient referrals.

**Board Actions**

None.

**Recommendations**

The Board recommends amending BPC Section 2533 to provide the Board with explicit authority to enforce any violations of BPC Section 650, which prohibits licensees from offering or receiving consideration in exchange for patient referrals.

**Proposed Text**

**Amend Business and Professions Code Section 2533**

The board may refuse to issue, or issue subject to terms and conditions, a license on the grounds specified in Section 480, or may suspend, revoke, or impose terms and conditions upon the license of any licensee for any of the following:

- (a) Conviction of a crime substantially related to the qualifications, functions, and duties of a speech-language pathologist or audiologist or hearing aid dispenser, as the case may be. The record of the conviction shall be conclusive evidence thereof.
- (b) Securing a license by fraud or deceit.
- (c) (1) The use or administering to himself or herself of any controlled substance.  
(2) The use of any of the dangerous drugs specified in Section 4022, or of alcoholic beverages, to the extent or in a manner as to be dangerous or injurious to the licensee, to any other person, or to the public, or to the extent that the use impairs the ability of the licensee to practice speech-language pathology or audiology safely.

(3) More than one misdemeanor or any felony involving the use, consumption, or self-administration of any of the substances referred to in this section.

(4) Any combination of paragraph (1), (2), or (3).

The record of the conviction shall be conclusive evidence of unprofessional conduct.

(d) Engaging in any act in violation of Section 650.

~~(d)~~ (e) Advertising in violation of Section 17500. Advertising an academic degree that was not validly awarded or earned under the laws of this state or the applicable jurisdiction in which it was issued is deemed to constitute a violation of Section 17500.

~~(e)~~ (f) Committing a dishonest or fraudulent act that is substantially related to the qualifications, functions, or duties of a licensee.

~~(f)~~ (g) Incompetence, gross negligence, or repeated negligent acts.

~~(g)~~ (h) Other acts that have endangered or are likely to endanger the health, welfare, and safety of the public.

~~(h)~~ (i) Use by a hearing aid dispenser of the term “doctor” or “physician” or “clinic” or “audiologist,” or any derivation thereof, except as authorized by law.

~~(i)~~ (j) The use, or causing the use, of any advertising or promotional literature in a manner that has the capacity or tendency to mislead or deceive purchasers or prospective purchasers.

~~(j)~~ (k) Any cause that would be grounds for denial of an application for a license.

~~(k)~~ (l) Violation of Section 1689.6 or 1793.02 of the Civil Code.

~~(l)~~ (m) Violation of a term or condition of a probationary order of a license issued by the board pursuant to Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code.

~~(m)~~ (n) Violation of a term or condition of a conditional license issued by the board pursuant to this section.

4. New issues raised by the Committees.

None

## Section 13– Attachments

Please provide the following attachments:

- A. Board’s administrative manual.
- B. Current organizational chart showing relationship of committees to the Board and membership of each committee (cf., Section 1, Question 1).
- C. Major studies, if any (cf., Section 1, Question 4).
- D. Year-end organization charts for last four fiscal years. Each chart should include number of staff by classifications assigned to each major program area (licensing, enforcement, administration, etc.) (cf., Section 3, Question 15).
- E. Enforcement Performance Measures
- F. Licensing Performance Measures



# MEMORANDUM

DATE	September 21, 2021
TO	Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board
FROM	Heather Olivares, Legislation/Regulation Analyst
SUBJECT	Agenda Item 9: Regulatory Report: Update, Review, and Possible Action on Board Regulation Packages

The following is a list of the Board’s regulatory packages, and their status in the rulemaking process:

a) **Update and Discussion of Implementation of Speech-Language Pathology and Audiology Fees (As Stated in 16 CCR sections 1399.157, 1399.170.13, and 1399.170.14)**

Regulation Development	Preparing Regulatory Package	DCA Regulations Pre-Review	Initial Departmental Review	OAL Public Comment Period	Finalizing Regulatory Package	DCA Regulations Final Review	Final Departmental Review	Submission to OAL for Review	OAL Decision
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This regulatory package was approved by the Office of Administrative Law (OAL) with an effective date of July 1, 2021. This effective date authorized the Board to begin the implementation process. Board staff is working with DCA to implement the fee increases which includes making changes to the IT systems, updating the forms, and revising the renewal notices. The new speech-language pathology and audiology licensing and renewal fees will go into effect on November 1, 2021.

b) **Discussion and Possible Action to Amend or Adopt Regulations Regarding Speech-Language Pathology Assistants Requirements (As Stated in Title 16, CCR section 1399.170 through 1399.170.20.1)**

Regulation Development	Preparing Regulatory Package	DCA Regulations Pre-Review	Initial Departmental Review	OAL Public Comment Period	Finalizing Regulatory Package	DCA Regulations Final Review	Final Departmental Review	Submission to OAL for Review	OAL Decision
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The Board approved regulatory language on August 13, 2021. Board staff are working on preparing the required regulatory documents including the Notice of Proposed Regulatory Action, Initial Statement of Reasons, and the Economic and Fiscal Impact Statement. Once these regulatory documents are completed, the regulatory proposal is submitted to DCA Legal Counsel for the pre-review process.

c) **Discussion and Possible Action to Adopt Regulations Regarding Uniform Standards Related to Substance-Abusing Licensees (As Stated in Title 16, CCR sections 1399.102, 1399.131, 1399.131.1, 1399.155 and 1399.151.1)**

Regulation Development	Preparing Regulatory Package	DCA Regulations Pre-Review	Initial Departmental Review	OAL Public Comment Period	Finalizing Regulatory Package	DCA Regulations Final Review	Final Departmental Review	Submission to OAL for Review	OAL Decision
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The Board approved regulatory language on August 13, 2021. Board staff are working on preparing the required regulatory documents including the Notice of Proposed Regulatory Action, Initial Statement of Reasons, and the Economic and Fiscal Impact Statement. Once these regulatory documents are completed, the regulatory proposal is submitted to DCA Legal Counsel for the pre-review process.

d) **Discussion and Possible Action to Initiate a Rulemaking and Amend or Adopt Title 16, CCR sections 1399.153 and 1399.153.3 Regarding Required Professional Experience Direct Supervision Requirements and Remote or Tele Supervision**

Regulation Development	Preparing Regulatory Package	DCA Regulations Pre-Review	Initial Departmental Review	OAL Public Comment Period	Finalizing Regulatory Package	DCA Regulations Final Review	Final Departmental Review	Submission to OAL for Review	OAL Decision
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On August 24, 2021 Board staff submitted the complete regulatory proposal to DCA to start the Initial Departmental Review process. As part of this review process, DCA Legal Counsel identified changes to the regulatory language for review and discussion by the Board. Please see the separate memo for this regulatory proposal.

e) **Discussion and Possible Action to Adopt Regulations Regarding Dispensing Audiologist Examination Requirement (As Stated in Title 16, CCR section 1399.152.4)**

Regulation Development	Preparing Regulatory Package	DCA Regulations Pre-Review	Initial Departmental Review	OAL Public Comment Period	Finalizing Regulatory Package	DCA Regulations Final Review	Final Departmental Review	Submission to OAL for Review	OAL Decision
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This regulatory proposal is in the Regulation Development phase. Board staff received feedback from DCA Legal Counsel on the proposed regulatory language which requires review and approval by the Board. Please see the separate memo for this regulatory proposal.

f) **Discussion and Possible Action to Amend Regulations Regarding Board Location and Processing Times (As Stated in Title 16, CCR section 1399.101, 1399.113, 1399.150.1, 1399.151.1 and 1399.160.6)**

Regulation Development	Preparing Regulatory Package	DCA Regulations Pre-Review	Initial Departmental Review	OAL Public Comment Period	Finalizing Regulatory Package	DCA Regulations Final Review	Final Departmental Review	Submission to OAL for Review	OAL Decision
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This regulatory proposal is in the Regulation Development phase. Board staff are proposing non-substantive regulatory changes for review and approval by the Board. Please see the separate memo for this regulatory proposal.



# MEMORANDUM

DATE	September 23, 2021
TO	Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board
FROM	Heather Olivares, Legislation/Regulation Analyst
SUBJECT	Agenda Item 9(d): Discussion and Possible Action to Initiate a Rulemaking and Amend or Adopt Title 16, CCR sections 1399.153 and 1399.153.3 Regarding Required Professional Experience Direct Supervision Requirements and Remote or Tele Supervision

## **Background**

The Board approved regulatory language on May 14, 2021 and Board staff completed the required regulatory documents. On August 24, 2021 Board staff submitted the complete regulatory proposal to DCA to start the Initial Departmental Review process. As part of this review process, DCA Legal Counsel identified changes to the regulatory language for review and discussion by the Board.

## **Summary of Changes**

- Added specification to section 1399.153(e) that electronic audio and video monitoring is required for tele-supervision.
- Added specification to section 1399.153.3(c)(1)(B) that the verbal or written consent obtained from the patient for the use of tele-supervision must be documented by the RPE supervisor in the patient’s record prior to the first use of tele-supervision with the patient. This specification is necessary for the Board’s enforcement purposes.
- Made changes to sections 1399.153.3(c)(1)(C) and (D) to clarify that one provision is an evaluation of the functions the RPE temporary license holder will perform and one provision is an evaluation of the functions the RPE supervisor will demonstrate.
- Made grammatical changes to section 1399.153.3(c)(1)(F) to be consistent with the structure of the other requirements that must be met in order to utilize tele-supervision.
- Added clarification to section 1399.153.3(d)(5) that the requirement to supervise at least 50 percent of evaluation, assessment, and treatment procedures can be provided by direct supervision or tele-supervision.



## **Action Requested**

Included in your materials is regulatory language for Title 16 CCR sections 1399.153 and 1399.153.3. The recommended motion is below.

Approve the proposed regulatory text for Section(s) 1399.153 and 1399.153.3, direct Board staff to submit the text to the Director of the Department of Consumer Affairs and the Business, Consumer Services, and Housing Agency for review and if no adverse comments are received, authorize the Executive Officer to take all steps necessary to initiate the rulemaking process, make any non-substantive changes to the package, and set the matter for a public hearing if requested. If no adverse comments are received during the 45-day public comment period and no hearing is requested, authorize the Executive Officer to take all steps necessary to complete the rulemaking and adopt the proposed regulations at Section(s) 1399.153 and 1399.153.3 as noticed.

Attachment: RPE Direct Supervision Requirements and Tele-Supervision Proposed 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 Tele-Supervision**

<b>Legend:</b>	Added text is indicated with an <u>underline</u> . Omitted text is indicated by (* * * *) Deleted text is indicated by <del>strikeout</del> .
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**Amend section 1399.153 of Article 4 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 (d), 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 ~~audio and~~ 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 Article 4 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 in the patient's record prior to the first use of tele-supervision with the patient.

(i) If the RPE supervisor obtained verbal consent from the patient, the patient record shall reflect the consent was verbal and the date on which it was obtained.

(ii) If the RPE supervisor obtained written consent from the patient, the patient record shall include a copy of the written consent, which shall include the date on which it was obtained.

(C) The RPE supervisor evaluates the functions the RPE temporary license holder will perform 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 there is no need to be physically present with the RPE temporary license holder.

(D) Based on the functions the RPE supervisor will demonstrate to the RPE temporary license holder, the RPE supervisor determines in their professional judgment 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, that other issues or conditions do not 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 fifty (50) percent of the supervisor's ~~observation~~ supervision, whether provided by direct supervision or tele-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	September 16, 2021
TO	Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board
FROM	Heather Olivares, Legislation/Regulation Analyst
SUBJECT	Agenda Item 9(f): Discussion and Possible Action to Amend Regulations Regarding Board Location and Processing Times (As Stated in Title 16, CCR sections 1399.101, 1399.113, 1399.150.1, 1399.151.1 and 1399.160.6)

## **Background**

Title 1 California Code of Regulations (CCR) section 100 authorizes state agencies to revise regulations without complying with the formal rulemaking process if the change does not materially alter any requirement, right, responsibility, condition, or prescription of any regulatory provision. Changes without regulatory effect include deleting a regulatory provision for which all statutory or constitutional authority has been repealed.

As such, Board staff are recommending a repeal of the regulatory provisions establishing processing times for applications. Government Code section 15376 required state agencies, including the Board, to adopt regulations regarding their procedures for considering and issuing permits. The Board adopted 16 CCR sections 1399.113 and 1399.151.1 to implement Government Code section 15376 with respect to permit processing times. Government Code section 15376 was part of the original Permit Reform Act of 1981; however, the entire Act was repealed by Assembly Bill 1757 (Committee on Budget, Chapter 229, Statutes of 2003) as part of trailer bill language. Therefore, specifying processing times in regulation is no longer necessary.

Since sections 1399.160.6 and 1399.170.13 include a cross-reference to provisions that are being repealed, these sections also need to be amended. Additionally, due to the recent relocation of the Board's office, the regulations in sections 1399.101 and 1399.150.1 need to be updated to reflect the Board's current address.

## **Action Requested**

Included in your materials is proposed regulatory language for Title 16 CCR sections 1399.101, 1399.113, 1399.150.1, 1399.151.1, 1399.160.6 and 1399.170.13. Staff recommends the Board approve the regulatory language, move to start the rulemaking process for Section 100 changes without regulatory effect, 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: Board Location and Processing Times Draft Regulatory Text

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

**PROPOSED REGULATORY LANGUAGE**  
**Board Location and Processing Times**

<b>Legend:</b>	Added text is indicated with an <u>underline</u> . Omitted text is indicated by (* * * *) Deleted text is indicated by <del>strikeout</del> .
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**Amend section 1399.101 of Division 13.3 of Title 16 of the California Code of Regulations to read as follows:**

**§ 1399.101. Location of Offices.**

The principal office of the Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board of the Department of Consumer Affairs is located at ~~2005 Evergreen Street Suite 2100~~ 1601 Response Road, Suite 260, Sacramento, California 95815.

**NOTE:**

Authority cited: Section 2531.06, Business and Professions Code.

Reference: Section 2531.06, Business and Professions Code.

**Repeal section 1399.113 of Division 13.3 of Title 16 of the California Code of Regulations as follows:**

**~~§ 1399.113. Review of Hearing Aid Dispenser Applications; Processing Time.~~**

~~(a) The Board shall inform in writing an applicant for licensure as a hearing aid dispenser within 17 days of receipt of the initial application form whether the application is complete and accepted for filing or is deficient and what specific information is required.~~

~~(b) The Board shall inform an applicant for licensure as a hearing aid dispenser within 189 days after completion of the application of its decision whether the applicant meets the requirements for licensure. "Completion of the application" means that a completed application form together with all required information, documentation and fees have been filed by the applicant. This period may be extended by that time necessary for retaking or rescheduling an examination.~~

**NOTE:**

Authority cited: ~~Section 2531.06, Business and Professions Code.~~

Reference: ~~Section 2538.24, Business and Professions Code.~~



**Amend section 1399.150.1 of Division 13.4 of Title 16 of the California Code of Regulations to read as follows:**

**§ 1399.150.1. Location of Office.**

The principal office of the Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board of the Department of Consumer Affairs is located at ~~2005 Evergreen Street, Suite 2400~~ 1601 Response Road, Suite 260, Sacramento, California 95815.

**NOTE:**

Authority cited: Section 2531.95, Business and Professions Code.

Reference: Section 2531.95, Business and Professions Code.

**Repeal section 1399.151.1 of Division 13.4 of Title 16 of the California Code of Regulations as follows:**

**~~§ 1399.151.1. Review of Applications; Processing Time.~~**

~~(a) Speech-Language Pathology Licenses.~~

~~(1) The Board shall inform in writing an applicant for licensure as a speech-language pathologist within 37 days whether the application is complete and accepted for filing or is deficient and what specific information is required.~~

~~(2) The Board shall inform in writing an applicant for licensure as a speech-language pathologist within 37 days after completion of the application, of its decision whether the applicant meets the requirements for licensure. "Completion of the application" means that a completed application form together with all required information, documentation and fees have been filed by the applicant. This period may be extended if the applicant is delayed in obtaining or completing any required professional experience.~~

~~(b) Audiology Licenses.~~

~~(1) The Board shall inform in writing an applicant for licensure as an audiologist within 46 days whether the application is complete and accepted for filing or is deficient and what specific information is required.~~

~~(2) The Board shall inform in writing an applicant for licensure as an audiologist within 20 days after completion of the application of its decision whether the applicant meets the requirements for licensure. "Completion of the application" means that a completed application form together with all required information, documentation and fees have been filed by the applicant. This period may be extended if the applicant is delayed in obtaining or completing any required professional experience.~~

~~(c) Aide Registrations.~~

~~(1) The Board shall inform in writing an applicant for registration as an aide within 30 days whether the application is complete and accepted for filing or is deficient and what specific information is required.~~

~~(2) The Board shall inform in writing an applicant for registration as an aide within 20 days after completion of the application, of its decision whether the applicant meets the requirements for registration. "Completion of the application" means that a completed~~

application form together with all required information, documentation and fees have been filed by the applicant.

~~(d) Continuing Professional Development Provider Approvals.~~

~~(1) The Board shall inform in writing an applicant for approval as a continuing professional development provider within 30 days whether the application is complete and accepted for filing or is deficient and what specific information is required to correct the deficiency.~~

~~(2) The Board shall inform in writing an applicant for approval as a continuing professional development provider within 30 days after completion of the application, of its decision whether the applicant meets the requirements for approval. "Completion of the application" means that a completed application form together with all required information, documentation and fees have been filed by the applicant.~~

~~(e) Continuing Professional Development Course Submissions.~~

~~(1) The Board shall inform in writing a licensee and/or a continuing professional development provider within 30 days as to whether a voluntary petition for course approval documentation is complete and accepted for filing or is deficient and what specific information is required to correct the deficiency. The term "complete" means that all required information and documentation has been filed by the licensee and/or continuing professional development provider.~~

~~(2) The Board shall inform in writing a licensee and/or continuing professional development provider within 45 days after completion of the documentation submitted for a voluntary petition for course approval, of its decision whether the course meets the course content requirements as defined in Section 1399.160.4.~~

~~(f) Speech-Language Pathology Assistant.~~

~~(1) The Board shall inform an applicant for registration as a speech-language pathology assistant within 30 days whether the application is complete and accepted for filing or is deficient and what specific information is required.~~

~~(2) The Board shall inform an applicant for approval as a speech-language pathology assistant within 85 days after completion of the application, of its decision whether the applicant meets the requirements for registration. "Completion of the application" means that a completed application form together with all required information, documentation and fees have been filed by the applicant.~~

**NOTE:**

Authority cited: Sections 2531.95, 2532.6(a) and 2538.1(a), Business and Professions Code.

Reference: Sections 2530.6, 2531.4, 2532.6(e), 2532.6(e)(2) and 2534.2(f), Business and Professions Code.

**Amend section 1399.160.6 of Division 13.4 of Title 16 of the California Code of Regulations as follows:**

**§ 1399.160.6. Continuing Professional Development Course Approval.**

(a) A licensee shall only be credited with continuing professional development hours if ~~he or she~~ the licensee takes a course from a board-approved provider with a valid, current approval as a provider or from an entity listed in Section 2532.6(e)(1) of the Code.

(b) Courses related to the dispensing of hearing aids as offered by hearing aid manufacturers or companies for the purposes of continuing professional development shall be reviewed by the Board prior to the offering of the course. The continuing professional development provider must submit such request for course approval to the Board ~~according to the timeline in Section 1399.151.1(e)~~. Such request shall include:

(1) The nature of the sponsoring institution, the Board issued professional development provider number (with the exception of those entities listed in Section 2532.6(e)(1)), the address, telephone number, and contact person.

(2) Course title, date(s), location(s), and number of continuing professional development hours offered.

(3) Type and method of educational instruction and learner outcomes to be met.

(4) A course outline, course description, and instructor information and qualifications.

(5) If available, advertisements intended to be used by the provider to advertise the relevant course.

(c) A licensee or a continuing professional development provider may voluntarily petition Board consideration of any courses offered by an approved provider or an entity listed in Section 2532.6(e)(1) of the Code. The licensee or continuing professional development provider must submit such request for course approval to the Board ~~according to the timeline in Section 1399.151.1(e)~~. Such request shall include:

(1) The name of the sponsoring institution, the Board issued professional development provider number (with the exception of those entities listed in Section 2532.6(e)(1)), the address, telephone number, and contact person.

(2) Course title, date(s), location(s), and number of continuing professional development hours offered.

(3) Type and method of educational instruction and learner outcomes to be met.

(4) A course outline, course description, and instructor information and qualifications.

(5) If available, advertisements intended to be used by the provider to advertise the relevant course.

**NOTE:**

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

Reference: Section 2532.6(b), (e)(1) and (e)(2), Business and Professions Code.

**Amend section 1399.170.13 of Division 13.4 of Title 16 of the California Code of Regulations as follows:**

**§ 1399.170.13. Application.**

Each person desiring registration as a speech-language pathology assistant shall file application forms (77A-60 New 08/01 and, if applicable, 77A-61 New 12/99) and any

required supporting documentation with the Board ~~as provided in Section 1399.151.1.~~  
Upon receipt of the speech-language pathology assistant application, the Board will review the application for registration and notify the applicant of its approval or disapproval.

**NOTE:**

Authority cited: Sections 2531.95 and 2538.1(a), Business and Professions Code.

Reference: Section 2538.1(b)(1), Business and Professions Code.



# MEMORANDUM

DATE	September 27, 2021
TO	Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board
FROM	Heather Olivares, Legislation/Regulation Analyst
SUBJECT	Agenda Item 10: Legislative Report: Update, Review, and Possible Action on Proposed Legislation

## a. Legislative Calendar and Deadlines

- September 10, 2021 – Last day for each house to pass bills and Interim Study Recess begins
- October 10, 2021 – Last day for Governor to sign or veto bills
- January 1, 2022 – New laws take effect
- January 3, 2022 – Legislature reconvenes

## b. Board-Sponsored Legislation

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

### Status:

This bill was signed by the Governor.

### Summary:

This bill requires 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 needs to be signed by the purchaser and the licensee is required to retain a copy consistent with current record retention requirements.

**c. Bills with Active Positions Taken by the Board**

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

**Status:**

This is a 2-year bill. The bill was held under submission in the Assembly Appropriations Committee.

**Board Position: Oppose**

**Summary:**

This bill would 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 would also prohibit the Board from discussing or acting on any items not provided in advance of the meeting as required.

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

**Status:**

Governor's Desk – Waiting for Sign/Veto

**Board Position: Oppose Unless Amended**

**Summary:**

This bill would 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. The temporary license would be nonrenewable and would expire 12 months after issuance, upon issuance of a permanent license, or upon denial of an application for a permanent license. *The bill was recently amended to add the provision that the temporary license would expire upon the denial of an application for a permanent license which addressed the Board's concerns.*

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

**Status:**

This is a 2-year bill. The bill was not heard in the Senate Business, Professions, and Economic Development Committee.

**Board Position: Oppose Unless Amended**

**Summary:**

This bill would 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 5 years and active duty military personnel who will be separating from the military within 90 days. Additionally, this bill would remove current provisions that allow a temporary license to expire upon the denial of an application for a permanent license.

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

**Status:**

This is a 2-year bill. The bill was not heard in the Assembly Education Committee.

**Board Position: Oppose Unless Amended**

**Summary:**

This bill would 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.

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

**Status:**

This is a 2-year bill. The bill was not heard in the Assembly Governmental Organization Committee.

**Board Position: Support**

**Summary:**

This bill would 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 would count toward establishing a quorum. This bill would require public meetings held by teleconference to include both an audible and visual means of participation.

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

**Status:**

This is a 2-year bill. The bill was held under submission in the Assembly Appropriations Committee.

**Board Position: Support**

**Summary:**

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

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

**Status:**

This is a 2-year bill. The bill was held under submission in the Assembly Appropriations Committee.

**Board Position: Oppose Unless Amended**

**Summary:**

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

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

**Status:**

This is a 2-year bill. The bill was not heard in the Senate Business, Professions, and Economic Development Committee.

**Board Position: Oppose**

**Summary:**

This bill would prohibit the assessment of an administrative fine for minor violations if the licensee corrects the violation within 30 days. Minor violations would be 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.



#### **d. Bills with Recommended Watch Status**

- **AB 361 (Rivas) Open meetings: state and local agencies: teleconferences**

**Status:**

This bill was signed by the Governor.

**Summary:**

This bill authorizes state bodies to hold public meetings through teleconferencing until January 1, 2022 without requiring each teleconference location to be noticed on the agenda and be accessible to the public or having a physical location for the public to address the state body. This bill requires public bodies meeting through teleconferencing to provide notice of the means by which the public may observe the meeting and offer public comment and a procedure for reasonable accommodations for individuals with disabilities to participate.

- **AB 457 (Santiago) Protection of Patient Choice in Telehealth Provider Act**

**Status:**

Governor's Desk – Waiting for Sign/Veto

**Summary:**

This bill would clarify existing law regarding rebates for patient referrals to provide that payment for internet-based advertising, appointment booking services, or any service that provides information and resources to prospective patients does not constitute a referral of a patient if the internet-based service provider does not recommend or endorse a specific licensee to the prospective patient.

- **AB 468 (Friedman) Emotional support animals**

**Status:**

This bill was signed by the Governor.

**Summary:**

This bill would prohibit a healing arts licensee from providing documentation relating to an individual's need for an emotional support dog unless specified conditions are met including establishing a client-provider relationship at least 30 days in advance and completing a clinical evaluation of the individual regarding the need for an emotional support dog.

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

**Status:**

Governor's Desk – Waiting for Sign/Veto

**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 would update terminology to require a speech-language pathologist to determine that a pupil's difficulty in understanding or using language results from speech sound disorder, voice disorder, fluency disorder, language disorder, or hearing impairment or deafness.

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

**Status:**

This is a 2-year bill. The bill was held under submission in the Assembly Appropriations Committee.

**Summary:**

This bill would 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 would be authorized to charge a fee not exceeding the reasonable cost of administering this provision.

- **AB 1221 (Flora) Consumer warranties: service contracts: cancellation: disclosures**

**Status:**

Governor's Desk – Waiting for Sign/Veto

**Summary:**

This bill would expand the Song-Beverly Consumer Warranty Act to require a service contract that continues until cancelled by the buyer or service contractor to meet specified conditions including disclosing in a clear and conspicuous manner that the service contract continues until cancelled and providing contact information the buyer can use to cancel the service contract.

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

**Status:**

This is a 2-year bill. The bill is currently on the Assembly Inactive File. However, this issue was addressed as part of budget trailer bill language.

**Summary:**

This bill would 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 would be required to report the data collected on a biennial basis and post it on the Board's website. The Board would also be required to provide the data annually to the Office of Statewide Health Planning and Development.

- **AB 1291 (Frazier) State bodies: open meetings**

**Status:**

This bill was signed by the Governor.

**Summary:**

This bill requires state bodies that limit time for public comment to provide at least twice the allotted time to a member of the public who utilizes translating technology to address the state body.

- **AB 1308 (Ting) Arrest and conviction record relief**

**Status:**

This is a 2-year bill. The bill was not heard in the Senate Public Safety Committee.

**Summary:**

This bill would expand current law regarding arrest and conviction record relief to allow an arrest or conviction that occurred on or after January 1, 1973 to be considered for relief.

- **SB 607 (Min) Business and Professions**

**Status:**

Governor's Desk – Waiting for Sign/Veto

**Summary:**

This omnibus bill would, among other things, require boards to waive the application fee and initial license fee 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. This provision would become effective July 1, 2022.

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

**Status:**

This is a 2-year bill. The bill failed passage on the Assembly Floor.

**Summary:**

This bill would expand current law regarding arrest record relief to include a person who has been arrested for a felony on or after January 1, 1973.