CONSUMER CONNECTION

PROTECT YOUR HOME FROM WILDFIRES

LEARN HOW TO ‘HARDEN’ YOUR PROPERTY—P.10

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In 2017, the National Greyhound Association (NGA) issued guidelines to its members regarding the adoption of dogs for use as blood donors. The organization said in a news release that most blood collected from dogs living in people's homes isn't subjected to additional testing, and so it may not be as safe as blood collected from a closed donor facility. Because of the time it takes to test, Dodds also argues that the greyhound donors housed there were being mistreated. The NGA policy prohibits all mistreated. Even though the greyhound donors housed there were being mistreated, the greyhound donors made available for adoption with any animal blood donation may not be as safe as blood collected from a closed donor facility. For information on resolving disputes, smog check history can be found on BAR's website at www.bar.ca.gov. The Bureau of Automotive Repair (BAR) is part of the Department of Consumer Affairs (DCA) and provides trusted automotive repair facilities. Once you decide friends and family for recommendations on cars and can afford. Shop around. Ask around. Talk with an important rule of thumb is to do your homework.
Got a question about your contractor, dentist, doctor, or one of the many other professionals licensed and regulated by the Department of Consumer Affairs (DCA)? Maybe you’d like to know more about how DCA helps consumers make wise purchasing decisions by informing them about the laws that protect them? Now is your chance to ask!

Submit your question at www.thedcapage.blog/askdca and it may be answered in a future issue of Consumer Connection. Please note: We are not able to answer questions regarding the status of a license application, complaint, or investigation. Some questions have been edited for clarity or brevity.
#AskDCA

OLIVIA: HOW MANY PEOPLE ARE COVERED BY DCA?

Currently, DCA licenses 3.9 million of California’s professionals in more than 280 license types, including permits, certificates, and registrations. These include doctors, dentists, nurses, cosmetologists, smog check technicians, contractors, veterinarians, accountants, and many others. DCA has more than 3,000 employees working to educate consumers by giving them the information they need to avoid unscrupulous or unqualified people.

Consumers can find more information on the professionals we license by accessing the Open Data Portal in the “About Us” section on DCA’s website. The Open Data Portal is a publicly accessible, one-stop shop for licensing statistics and information. Users can see trends and changes in licensing data going back three years, filtered by individual board or bureau, even by individual license type. The Open Data Portal was developed in-house by DCA’s Data Governance Team, a unit within the Office of Information Services. DCA can help you find licensed professionals on our website at www.dca.ca.gov. Always check license status before signing a contract or handing over money.

#AskDCA

BROWN: WHY DOESN’T THE DIVISION OF INVESTIGATION HOLD PUBLIC MEETINGS?

The Division of Investigation is the law enforcement arm of DCA. All of our investigators have graduated from a law enforcement academy certified by the California Commission on Peace Officer Standards and Training (POST) as well as numerous advanced officer courses and specialized training and certification. Information about investigations and complaints is confidential and not subject to public disclosure, so meetings are not held publicly. However, consumers can look up disciplinary actions against licenses on DCA’s website using the license search tab once the disciplinary action is finalized and has become public.

#AskDCA

CHET: WHY ARE GYMS, HEALTH CLUBS, AND PERSONAL TRAINERS NOT REGULATED BY DCA?

DCA’s regulatory authority is established by legislation, and gyms, health clubs, and personal trainers are not under DCA’s jurisdiction. However, California’s Civil Code outlines the laws that apply to health studio service contracts. But the status quo doesn’t have to remain the status quo! If you feel that there is a need for additional regulation of any industry, contact your state legislators.

#AskDCA

BROWN: WHY DOESN’T THE DIVISION OF INVESTIGATION HOLD PUBLIC MEETINGS?

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#AskDCA

ONLINE BANKER: IS IT VALID FOR REMITTANCE COMPANIES TO ASK FOR A CUSTOMER’S BANK DETAILS, INCLUDING A CUSTOMER’S ONLINE BANKING USER ID AND PASSWORD?

Although wire transfer corporations don’t fall under the authority of DCA, it is best to keep in mind that legitimate financial institutions will never ask you for your login credentials, and if you think you have become the victim of a scam, you should contact your bank immediately. You may also file a complaint with the California Department of Business Oversight, which oversees financial service providers and products.
Preschoolers are getting kicked out at an alarming rate; but mental health help is available

By Ben Deci
Consumer Connection staff

If you were ever told to report to the school office as a kid, you probably can remember the feeling you had—the sinking stomach, the anxiety, the shame. If you were ever told to report to the school office as a parent, you probably agree that it’s a similar experience, but worse. While a child might be worried about facing discipline for whatever they did, a parent is likely worried about how that discipline will affect everything they want their child to be able to do in the future. This is especially true when a child’s behavior is bad enough, or a child’s bad behavior is repeated often enough, that their school is considering expulsion.

Stop. If you automatically picture a high school or middle school student in this scenario, it’s time to rethink everything you know about school expulsions.

“Nationally, preschoolers are expelled 3.2 times more frequently than K-through-12 students,” Assembly Member Blanca Rubio, a former teacher, said in testimony before the Assembly’s Education Committee.

According to data from the 2016 National Survey of Children’s Health, 250 preschoolers on average are expelled or suspended every day. That far outpaces the rates for similar discipline among their primary school and high school counterparts. Meanwhile, a 2014 report by the U.S. Department of Education indicates that African American preschoolers are more likely to be removed from the classroom as a form of discipline.

“Black children represent 18 percent of preschool enrollment, but 48 percent of preschool children receiving more than one out-of-school suspension,” according to the report.

What some have called the school-to-prison pipeline is being recast, in light of that data, as the preschool-to-prison pipeline. Numerous studies link preschool expulsion with continued struggles and poorer outcomes in the K-12 system and beyond. When preschoolers are removed from the classroom, they may miss important opportunities to develop social skills and self-control.

Consider Jackson. Jackson was a San Francisco Bay Area 4-year-old enrolled in a Kidango preschool, and he was struggling.

“In moments of distress, he was kicking, hitting, screaming, and that had really become his norm,” testified Andrea Garcia of Kidango.

Kidango had an obligation to Jackson, but the preschool had an obligation to the rest of his class as well. Jackson’s regular outbursts disrupted the classroom environment and posed a safety risk. Something had to change.

While expulsion was one option, Kidango administrators turned to another solution—a solution that, like expulsion, many associate with older students. In coordination with Jackson’s parents and teachers, Kidango called on a consultant to provide 4-year-old Jackson with a mental health evaluation. Together, Jackson’s teachers, parents, and mental health consultant were able to create a behavioral health support plan. And it worked.

“Jackson was really on the path toward expulsion, and mental health consultation really made this outcome different and transformative for him,” Garcia said.

According to staff at Kidango, behavioral problems like Jackson’s usually don’t arise in a vacuum. Often, students who engage in disruptive behavior have experienced a trauma like homelessness, neglect, or abuse.

But the question remains, who pays for a mental health consultation when it could mean the difference between expulsion and better days in the classroom for a preschool student like Jackson? Kidango is a nonprofit preschool system. Ninety-five percent of the families who send their children to a Kidango preschool meet California’s requirements for free or low-cost care.

To address the funding gap, the California Legislature created a new law that changes how preschools are reimbursed from the pool of money earmarked to support early childhood education.
“This bill will make it possible for providers to pursue effective early childhood mental health consultation models, which we know can help with reducing expulsions,” said Assembly Member Rubio.

Rubio’s Assembly Bill 2698 was passed this fall and signed into law by then-Gov. Jerry Brown. It adds childhood mental health consultation services as a reimbursable cost for state subsidized preschool providers.

To qualify, the mental health consultation must be provided by a licensed marriage and family therapist, a licensed clinical social worker, a licensed professional clinical counselor, a licensed psychologist, or a licensed child and adolescent psychiatrist. That provider must have held their professional license for at least two years and must be in full compliance with all the continuing education requirements of their license.

Under the new law, state reimbursement for an individual child up to age 5 is increased by 5 percent for that child if they receive mental health services. It builds on a 2017 law that made it harder for state-funded preschools to expel children.

It may also be the first step in creating a structural change in how preschools are organized in California.

“They’re actually creating a funding mechanism that financially incentivizes programs to want to have a consultant,” according to Yale University child psychology and psychiatry professor Walter Gilliam, who was quoted in Education Week.

That shift would also take some of the pressure off teachers to devise strategies and specialized support plans for students with behavioral health challenges.
DEGREES AND LICENSES DETERMINE DIFFERENCES BETWEEN THE INITIALS

By Michelle Cave
Consumer Connection staff

WHAT MAKES A DOCTOR A DOCTOR?

This question was asked in the fall of 2018 after Christine Blasey Ford, Ph.D., testified on Capitol Hill during the Brett Kavanaugh hearings. When covering the hearing, some news outlets did not refer to Christine Blasey Ford as Dr. Ford because she holds a doctoral degree in educational psychology and is not a doctor who practices in a medical capacity.

There are many types of doctors—boards within the Department of Consumer Affairs (DCA) regulate most of them—but they are not alike. Some professionals even have multiple degrees that span the health care spectrum. What they all do have in common, is that they have studied well beyond a typical four-year college baccalaureate degree.

In the United States, there are two types of practicing physicians—allopathic and osteopathic.

Allopathic physicians and surgeons are medical doctors (MDs) who practice a form of medical treatment—also referred to as conventional or Western medicine—which focuses on the treatment of symptoms and disease. These professionals use existing medical knowledge through prescribing medication, radiation, or surgery. They are licensed and regulated by the Medical Board of California.

Osteopathic physicians and surgeons (DOs) practice a form of medical treatment that stresses the importance of the physician and patient working together in an empathetic partnership to treat symptoms and disease through utilizing medical knowledge and osteopathic manipulative treatment (OMT). OMT can be used to complement or replace drugs or surgery. In OMT, osteopathic physicians use their hands to diagnose and treat illness or injury of the musculoskeletal system—the body's interconnected system of nerves, muscles, joints, and bones. They are licensed and regulated by the Osteopathic Medical Board of California.

MDs and DOs are similar in that they attended medical school and received postgraduate training in diagnosing and treating illnesses and disorders to promote healing and provide preventative care to any part of the human body. Both types of physicians can prescribe medication, perform surgery, and practice in a variety of specialty areas focusing on any part of the human body from head to toe and all parts in between.
Beyond MDs and DOs, there are many other types of doctors that specialize in treating other parts of the bodies of humans (and nonhumans) using Western and non-Western medicine techniques:

- **Doctors of chiropractic (DCs)** are practitioners and like DOs, they use their hands to diagnose and treat patients but they received their postgraduate training at a chiropractic college. Chiropractic is an alternative practice that focuses on the relationship between the nervous system, spine, and body’s structure and function. It is most often used to treat neuromusculoskeletal conditions such as problems with nerves, muscles, joints, bones, and/or connective tissues such as cartilage, ligaments, and tendons. DCs do not prescribe medication because their approach to wellness is prevention-based and focuses on diet, exercise, and lifestyle, with an emphasis on utilizing natural methods. They are licensed and regulated by the **Board of Chiropractic Examiners**.

- **Doctors of dental surgery (DDS) and doctors of dental medicine (DMD)** actually have the same degree; which degree is awarded depends on the dental school. General dentists help patients maintain their oral health through the study, diagnosis, prevention, and treatment of diseases and conditions of the oral cavity, soft tissues and other aspects of the face and jaws, including the supporting muscular lymphatic, nervous, and vascular structures. Dentists may prescribe medication, and additional post-graduate training is required to become a dental specialist or an oral and maxillofacial surgeon. They are licensed and regulated by the **Dental Board of California**.

- **California licensed acupuncturists (LAc)** may have received master’s or doctorate-level post-graduate training, e.g., doctor of acupuncture and oriental medicine (DAOM). What they have in common is that to practice acupuncture in this state, they must become a California licensed acupuncturist. These professionals practice a form of medicine that stimulates the nervous system to prevent or modify the perception of pain or to normalize physiological functions. This holistic approach supports the body’s natural healing process by using a specific point (or points) at or near the surface of the body through the insertion of acupuncture needles. Electroacupuncture, cupping, massage, and moxibustion are additional techniques acupuncturists use to promote wellness. Licensed acupuncturists in California may treat animals under the direct supervision of a veterinary doctor. The degree types earned by professionals licensed through the California Acupuncture Board are many. Presently, the California Acupuncture Board is exploring and working with the profession, accrediting agencies, and stakeholders to establish a statewide standard. They are licensed and regulated by the **California Acupuncture Board**.

- **Naturopathic doctors (ND)** receive medical training like MDs and DOs, yet they take a different approach with patients in that they emphasize prevention by eliminating obstacles to health through maintaining a state of wellness by stimulating and promoting the body’s healing ability through holistic methods. When faced with treating disease, NDs stress the importance of
identifying the root cause of the disease in the body versus suppressing the symptoms with medication. In California, NDs can prescribe medication but their ability to do so is limited. They are licensed and regulated by the Naturopathic Medicine Committee.

• Doctors of optometry (OD) are eye care professionals called optometrists who conduct comprehensive eye examinations to determine the overall health of the eye, abnormalities, and the diagnosis of visual changes. Optometrists treat and manage visual changes through prescribing medication for some eye diseases or by prescribing and dispensing corrective optical or contact lenses. Optometrists do not perform eye surgery. Surgical care of the eyes and visual system are performed by a medical or osteopathic physician called an ophthalmologist. Optometrists are licensed and regulated by the California State Board of Optometry. Note: Ophthalmologists are licensed and regulated through the Medical Board of California.

• A doctor of podiatric medicine (DPM) is a physician or surgeon trained to diagnose and treat ailments affecting the lower extremities of the body such as the foot, ankle, and related structures of the legs. Although DPMs have received specialized medical and surgical training, they do not have the title of medical doctor. They are licensed and regulated by the Board of Podiatric Medicine.

• A doctor of veterinary medicine (DVM), referred to as a veterinarian or vet, treats multiple species of animals including domestic pets, livestock, zoo, and laboratory animals by diagnosing illnesses and performing medical procedures. Additionally, because we receive most of our food from animals, there are research veterinarians who specialize in food and safety inspection, which involves the examination of livestock for illness that can be transmitted to humans. Veterinarians are licensed and regulated by the Veterinary Medical Board.

DCA oversees the boards that license and regulate the doctors and physicians who work every day to keep Californians healthy. You can check the license of medical professionals and find one near you by using DCA’s license search.
In her new role as executive officer of the California State Board of Optometry, Shara Perkins Murphy has proven to have an eye for community outreach and confidentiality.

Shara was appointed in her new role on Oct. 31, 2018, replacing former Executive Officer Jessica Sieferman, who became executive officer for the Veterinary Medical Board.

The board was created by the state Legislature in 1913, with the mission of protecting the health and safety of California consumers through licensing, registration, education, and regulation of the practice of optometry and opticianry. It is responsible for approximately 8,800 licensed optometrists—the largest population of optometrists in the United States—3,000 branch office licenses, statements of licensure, and fictitious name permits, 24,000 practice certifications, and 4,200 registered dispensing opticians, contact lens dispensers, spectacle lens dispensers, and nonresident contact lens sellers.

Shara has more than 10 years of experience dedicated to public policy, constituent services, and organizational development. Most recently, she worked as a confidential assistant in the executive office for the Department of Insurance where she managed sensitive materials dealing with regulations, legislation, department policies, and complex financial issues.

In her previous capacity as an executive director of a nonprofit, she managed all aspects of the operation, including budget, policy, hiring, managing staff, and volunteers. Here, she worked with academics and training professionals to lead the development of trainings delivered by professional trainers to the board of directors to advance cultural competency.

She also has extensive experience working with elected officials. She has worked in various capacities for state Sen. Patrick Johnston and Sen. Michael Machado, the California Democratic Party, Sen. Mark DeSaulnier, the Assembly Democratic Caucus, and Sen. Carol Liu.

We recently spoke with Shara about her background, and her vision in her new role.

**WHAT IS YOUR VISION FOR THE BOARD?**

A well-oiled and well-respected driver of consumer protection. I have an amazing staff with various viewpoints. I am excited to further engage them in improving communication to licensees and registrants, so that we more consistently apply our regulatory authority.

**WHAT IS YOUR BIGGEST CHALLENGE?**

Learning about the particulars of eye health, without getting nauseous.

**WHAT WOULD YOU LIKE CONSUMERS TO KNOW ABOUT THE BOARD?**

Every action we take is centered in serving you and protecting your health.

**WHAT ARE SOME OF YOUR BEST MEMORIES OF YOUR JOBS PRIOR TO THIS ONE?**

Very related to my excitement in taking this role, I partnered with an industry leader to provide comprehensive eye exams to homeless and under-resourced LGBTQIA (lesbian, gay, bisexual, transgender, queer or questioning, intersex, asexual or allied) youth. After that event, we had increased usage of our community center computer lab. These youth could see, and wanted to engage with the world.

**WHAT ADVICE WOULD YOU GIVE YOUR YOUNGER SELF?**

Apply yourself, and learn from your mistakes.
Years of drought have resulted in tinder-dry landscapes and dead trees across the state. Thousands of wildfires now strike California every year, and part of the new normal is that wildfires don’t know seasons. As a result, citizens, especially those living in fire-prone areas, have an important role in preventing loss of life and property from wildfire events.

Each year, California highlights the importance of wildfire prevention and preparedness by declaring the first full week of May as “Wildfire Awareness Week.” The California Department of Forestry and Fire Protection (Cal Fire) and fire departments across the state will remind residents of the dangers posed by wildfires and of the simple steps that should be followed to prepare for and prevent them.

If you live in a State Responsibility Area (SRA)—the area where the state is financially responsible for the prevention and suppression of wildfires—you are responsible for ensuring that your property follows California’s building and fire codes that require homeowners to take proactive steps to protect their property from wildfire. (SRA does not include lands within city boundaries or in federal ownership.)

You can see if your home lies within an SRA by using the State Responsibility Area Viewer at www.fire.ca.gov/firepreventionfee/sraviewer and entering your address.
California law requires that homeowners in an SRA clear out flammable materials such as brush or vegetation around their buildings to 100 feet (or the property line) to create a defensible space buffer. This helps halt the progress of an approaching wildfire and keeps firefighters safe while they defend your home.

The law also requires new homes in an SRA to be constructed with fire-resistant materials. By building your home with materials like fire-resistant roofing, enclosed eaves, and dual-paned windows, you are “hardening” your home, which means using construction materials that can help your home withstand flying embers finding weak spots in the construction, which can result in your house catching fire. By following the law, you will help prevent buildings from being ignited by flying embers, which can travel as much as a mile away from a wildfire. Be sure to check with your local fire station about laws in your area, as many local jurisdictions may have more stringent requirements.

It takes the combination of defensible space and the hardening of your home to give your house the best chance of surviving a wildfire.

THERE’S AN APP FOR THAT

Cal Fire’s Ready for Wildfire app is the perfect tool to use in year-round preparation. Checklists found on the app help homeowners prepare and maintain defensible space, harden homes with ignition-resistant building materials, and create family evacuation plans and kits. The app also features customizable alerts to electronic devices when Cal Fire responds to a wildfire of 10 acres or more in the vicinity. To download the Ready for Wildfire app and to learn how to create defensible space around your home, visit ReadyForWildfire.org.

Links to defensible space laws and building codes are available on the Cal Fire website at www.readyforwildfire.org/Fire-Safety-Laws/.
FIRE PREVENTION: WHAT IS GOVERNMENT DOING?

Shortly after taking office in January, Gov. Gavin Newsom held a press conference to espouse new investments in wildfire prevention, suppression, and emergency response efforts that are part of his proposed budget, which includes $305 million for fire mitigation and $200 million for efforts such as brush clearing and creating fire breaks. The budget includes $200 million to augment Cal Fire’s firefighting capabilities, adding 13 additional year-round engines, replacing Vietnam War-era helicopters, deploying new large air tankers, and investing in technology and data analytics that will support Cal Fire’s incident command in developing more effective initial fire suppression strategies. The budget also continues $25 million for pre-positioning local government fire engines to support the state’s critical mutual aid system.

To help local governments and individuals be more prepared for emergencies, the budget also proposes $50 million for local grants as well as a comprehensive, statewide education campaign on disaster preparedness and safety. It also provides a large investment in forest management—$214 million—to increase fire prevention and complete additional fuel reduction projects, including increased prescribed fire crews.

Prescribed fire—often called a controlled burn—is one method used to help reduce the likelihood of severe damage from conflagrations. You could say it’s fighting fire with fire. You’ve probably seen controlled burns along California’s highways accompanied by road signs explaining what they are. Controlled burns help prevent high-intensity wildland fires through fuel reduction and vegetation management, among other benefits. Visit www.readyforwildfire.org/Prescribed-Fires/ for more information.

In 2018, the Board of Forestry and Fire Protection and Cal Fire announced a plan that will increase vegetation treatment projects to reduce wildfire risk. Upon certification, the plan—the new California Vegetation Treatment Program Environmental Impact Report—will facilitate timely implementation of wildland urban interface vegetation reduction projects and fuel breaks to assist in wildland fire suppression efforts, and also support ecological restoration projects.

Cal Fire also announced that more than $170 million has been awarded in grants to prevent catastrophic wildfires and restore forest health. More than 100 agencies and organizations across California will receive funding provided by the Greenhouse Gas Reduction Fund for California Climate Investments that will enable local organizations to implement activities including hazardous fuel reduction, fire planning, and fire prevention education with an emphasis on improving public health and safety, all while reducing greenhouse gas emissions.

Legislation passed in 2018 requires the Office of the State Fire Marshal, no later than Jan. 31, 2020, to recommend updated building standards that provide for comprehensive site and structure fire risk reduction to protect structures from fires spreading based on lessons learned from the wildfires of 2017 along with a list of low-cost retrofits.

In May 2018, former Gov. Jerry Brown announced the creation of the Forest Management Task Force to address the issue of the health of California’s forests, which have been ravaged by drought and climate change.

Cal Fire’s website explains that tree mortality is a normal occurrence in natural ecosystems, but the difference now is that the extended drought has caused an abnormally high number—in the millions—of trees in California’s forests and wildland-urban interface areas to weaken and/or die. Weakened trees are more susceptible to attacks from bark beetles. Once a tree is successfully invaded by bark beetles,
The task force is devising strategies to reduce the risk of wildfire and increase the pace and scale of forest restoration leading to improved watersheds.

Late last year, California, Washington, and British Columbia announced a partnership to share information and work jointly to improve forest resilience and better understand how forests are responding to climate change. Among the goals is to share and explore innovations in fuel management methods, including prescribed and managed fire, pre-fire management, post-fire restoration, best practices, and technology to mitigate and reduce the negative effects of increased wildfires and tree mortality.

The Contractors State License Board (CSLB)—an entity under the Department of Consumer Affairs—is one of the first agencies to respond during the recovery process after structures are destroyed from fire, floods, earthquakes, or any other natural disaster.

In Sept. 2018, CSLB investigators traveled to parts of Amador, Calaveras, and Lake counties, where thousands lost homes to the Butte Fire in the Sierra Nevada foothills and the Valley Fire in the Clearlake area. Along with representatives from the Department of Insurance, CSLB put “boots on the ground” at both disaster locations, meeting with victims and posting warnings against unlicensed contracting in the fire zones.

Unscrupulous, unlicensed contractors often prey on victims of natural disasters. It is a felony to contract without a license in a declared disaster area. Consumers can protect themselves by using CSLB’s resources to check a contractor’s license status and history. In Oct. 2018, CSLB conducted a sting operation in Chico, which resulted in over a dozen suspects being cited for illegal contracting. In California, a contractor license is required for construction projects valued over $500 for labor and materials combined.

As a member of the Governor’s Office of Emergency Services’ disaster recovery team, CSLB participates at temporary Local Assistance Centers that are set up in affected communities. CSLB staff provides educational information about post-disaster contracting laws to property owners who will be looking for contractors to rebuild their homes and other structures. CSLB also maintains a Disaster Help Center section on its website under the “Consumers” tab.
The operating room is prepped. The instruments are sterilized. It’s a procedure the doctor has performed many times successfully. Assistants and an anesthesiologist will be in the room with her, but that’s not all the help she’ll need. For this surgery, the patient will need a blood transfusion. A donor will need to provide an ample supply of a matching blood type to keep the patient alive as the doctor works. That transfusion is as vital as it would be for any human, but in this case the doctor is a veterinarian; the patient and the blood donor are dogs.

Like humans, dogs have different blood types that must match their donors’ blood for them to receive a healthy transfusion. While humans have only four blood types, dogs have twice that amount, but there are canine universal donors that can supply blood to any other dog.

When it comes to producing dog blood for a transfusion, California’s rules are unique nationwide. California law requires that dog blood comes from what’s called a “closed colony facility.” That means dog blood donors must live in seclusion from the general canine population. The idea is to make certain that dogs providing blood don’t come in contact with other dogs carrying diseases.

Hemopet, located in Garden Grove, is one of only two facilities licensed by the California Department of Food and Agriculture (CDFA) to supply dog blood commercially. Hemopet president and founder Dr. Jean Dodds estimates 40 percent of commercial dog blood products sold in the United States come from Hemopet.

“After donating half-sized units of blood, two to three times a month depending upon their weight, for up to a year, the dogs are adopted by families as companions,” writes Dodds on the Hemopet website.

The dogs at Hemopet are exclusively greyhounds, and most are retired from racing. The nonprofit uses greyhounds because the breed is a universal donor, and their blood can be used for transfusion in any other dog.

But Hemopet, and the practice of harvesting dog blood from closed colony facilities in general, has come under fire from some critics.

“Please, urge your veterinarian not to purchase blood from dogs kept captive and to obtain blood only from dogs who get to live as all dogs should—in homes with loving families,” says a statement from People for the Ethical Treatment of Animals, or PETA, in an online review of closed colony facilities.

With few exceptions under California code, veterinarians are prohibited from using dog blood products that aren’t produced by a closed donor facility.

Dodds says the dogs at Hemopet are well cared for.
“Hemopet blood donors are maintained in an exemplary facility with large kennel runs and an acre of grounds, socialized in groups of up to 10, and exercised by staff and volunteers five times daily,” says Dodds.

In other states, veterinarians may draw blood for transfusions from their personal or staff pets. A program at the University of Pennsylvania School of Veterinary Medicine goes even farther in its departure from the closed donor facility concept. There, dog blood is collected the same way human blood is—through a bloodmobile.

The Penn Animal Blood Bank has a bloodmobile that “drives to locations such as veterinary hospitals and breed clubs on prearranged dates to collect blood,” the organization said in a news release.

Potential donor dogs are first examined for health and screened for blood type at the blood mobile. Once a pint of blood is collected, it’s tested for general health and infectious diseases before being released for transfusion.

Dodds argues that there is a national shortage of dog blood suitable for transfusions, and the additional screening necessary for blood that doesn’t come from a closed donor facility creates significant delays in getting blood to patients that need it.

Because of the time it takes to test, Dodds also argues that most blood collected from dogs living in people’s homes isn’t subjected to additional testing, and so it may not be as safe as blood collected from a closed donor facility.

In 2017, the National Greyhound Association (NGA) issued guidelines to its members regarding the adoption of dogs for use as blood donors. The guidelines were prompted by the closure of a Texas facility after PETA investigators claimed the greyhound donors housed there were being mistreated.

The NGA policy prohibits all members from direct involvement with any animal blood donation facilities. It also requires that dogs made available for adoption to a blood collection facility receive medical and dental services, and it places limits on how long a greyhound can be a blood donor. But NGA rules don’t prohibit greyhound owners from placing their animals up for adoption by closed donor facilities.

“None of these blood donors ‘volunteer’ as only their guardians can provide informed consent,” observes Dodds.

CDFA inspects the Hemopet facility every year. A formal complaint from PETA about the care of dogs housed there is under investigation by that department.

While humans have only four blood types, dogs have twice that amount, but there are canine universal donors that can supply blood to any other dog.
Americans love their cars and trucks, and they’re holding onto them longer than ever. A 2018 study by the Federal Highway Administration shows that many people are delaying new car purchases and are keeping their vehicles for 10 years or more.

Several factors are driving this trend. One of the biggest is vehicle quality. Cars and trucks built in the last 20 to 25 years have vastly improved in quality, giving more drivers the option to buy a well-performing used vehicle rather than buying a new one.

In addition, consumers are servicing and maintaining their older cars regularly, extending the life of their vehicles. According to Edmunds.com, 39.2 million used cars were sold in 2017. That’s more than double the number of new cars sold that year. By the end of 2019, an estimated 12 million low-mileage leased return vehicles will flood the used car market.

Whether you’re looking for a new or used vehicle, an important rule of thumb is to do your homework. Take the time to know exactly what you want and can afford. Shop around. Ask around. Talk with friends and family for recommendations on cars and trusted automotive repair facilities. Once you decide on a vehicle, take it to an auto repair dealer for inspection. You can check the status of licensed automotive repair dealers by logging on to the Bureau of Automotive Repair website at www.bar.ca.gov.

The Bureau of Automotive Repair (BAR) is part of the Department of Consumer Affairs (DCA) and provides a wide range of consumer protection services that include registering and regulating 36,000 California automotive repair dealers. BAR also licenses smog check stations, technicians, and inspectors. A vehicle’s smog check history can be found on BAR’s website at www.bar.ca.gov. For information on resolving disputes...
and reporting complaints, visit the BAR website and click on the “File a Complaint” button under the “Consumer” tab.

In addition, the California Lemon Law was implemented to protect consumers who have an unfixable flaw in a vehicle they’ve purchased or leased. The Lemon Law program, however, only applies to vehicles still under the manufacturer’s warranty. Lemon Law mandates that consumer goods manufacturers:

• Have accessible repair facilities.
• Repair defective goods in 30 days or less.
• Repair defective goods in a reasonable number of attempts.
• Offer replacement or refund, less the trouble-free use value.
• Pay for reasonable attorney costs and fees for the consumer.

Should a dispute arise, manufacturers often participate in the Arbitration Certification Program (ACP). This program, under the Department of Consumer Affairs, certifies and monitors third-party arbitration programs of participating automobile manufacturers to ensure they comply with California laws and regulations related to new vehicle warranties and manufacturer-sponsored arbitration programs. One of ACP’s goals is to promote the use of alternative dispute resolution in lieu of court action and reduce the strain and cost on consumers and the court system.

For questions regarding the Arbitration Certification Program, visit www.dca.ca.gov/acp.
made it easier for consumers to circumvent device manufacturers in favor of independent repair or do-it-yourself fixes.

Electronic manufacturers use digital rights management (DRM) protection to stop users from “hacking” their own property, essentially claiming that the software that runs electronic devices like smartphones and tablets, computers, televisions, and household appliances is copyrighted, and therefore can only be serviced by authorized repair personnel. Tampering with or attempting to break the DRM has consequences, including “bricking” or rendering the device completely inoperable.

The U.S. Copyright Office ruling gave consumers and independent repair shops the legal latitude to break DRM software locks “in order to make it work in accordance with its original specifications.”

When your car breaks down, you take it to the shop. But which one? The manufacturer hopes you’ll take your car to the dealership for factory-authorized service and repair, but the Magnuson Moss Warranty Act of 1975 gives you the freedom to take your car wherever you want. Under that law, auto manufacturers cannot void or place conditions on a vehicle warranty simply because you took your car to an independent shop for repair.

But what if it’s your phone or computer on the fritz? Until recently, copyright law allowed electronics manufacturers to require consumers to use factory service or risk rendering their devices inoperable. But the U.S. Copyright Office, part of the Library of Congress, issued a stunning decision in Oct. 2018 that

By Matt Woodcheke
Consumer Connection staff

FEDS BACK HACKS FOR ELECTRONICS

RECENT DECISION SIDES WITH RIGHT-TO-REPAIR ADVOCATES
Right-to-repair advocates have long maintained that DRM protection boxes consumers into expensive repair options and forced obsolescence. For instance, if a smartphone manufacturer decides it won't service phones of a certain age, consumers with no option to seek repairs elsewhere will be left with no choice but to upgrade.

The U.S. Copyright Office’s decision means, for the first time, electronics consumers will be legally able to hack their devices in order to return them to working condition in accordance with original specifications. But consumers still face an uphill battle.

While the decision allows consumers to hack DRM, it doesn’t make DRM illegal. Electronics manufacturers are committed to making DRM more difficult to break, making it difficult for consumers to gain access to the tools they need to fix their devices.

With little movement at the federal level, right-to-repair proponents have taken the fight to statehouses across the country, including here in California. In 2018, Assembly Bill 2110, also known as the Right to Repair Act, was introduced in the California Legislature. The bill would have required manufacturers of electronic equipment to make available the same diagnostic tools, software, technical updates, schematics, and software patches that are made available to factory-authorized repair dealers. Although the bill did not advance out of the Assembly, it may be reintroduced this year.

The Bureau of Household Goods and Services licenses electronic and appliance repair in California. Make sure your repair technician is licensed at the bureau’s website at www.bhgs.dca.ca.gov.
NAIL SALON INDUSTRY LABOR CONDITIONS PROMPT NATIONAL STUDY

By Laurel Goddard, Consumer Connection staff

More than three-fourths of nail salon employees are low-wage workers, according to a new UCLA report that is the first to examine the multibillion-dollar nail salon industry nationally with a focus on labor conditions. The report takes a hard look at key issues, trends, and areas of oversight.

The report, “Nail Files: A Study of Nail Salon Workers and Industry in the United States,” was written by the UCLA Labor Center and the California Healthy Nail Salon Collaborative.

Other findings in the report include:

• “Nail salon workers experience challenging work conditions and labor enforcement issues. Misclassification as independent contractors is also a key concern.

• “Nail salons are primarily owned and staffed by immigrants and refugees. The majority of salons are small mom-and-pop businesses with 68 percent having fewer than five employees. The labor force is predominantly Vietnamese, Korean, Chinese, Nepali, Tibetan, and Latin, with 81 percent women and 79 percent foreign-born.”

The UCLA Labor Center is housed in the Institute for Research on Labor and Employment, a multidisciplinary research center dedicated to the study, teaching, and discussion of labor and employment issues at UCLA. The California Healthy Nail Salon Collaborative works to improve the health, safety, and rights of the nail and beauty care workforce to achieve a healthier, more sustainable, and just industry.

California’s Board of Barbering and Cosmetology promotes workers’ rights and responsibilities in addition to its mission of ensuring the health and safety of California consumers by promoting ethical standards and by enforcing the laws of the barbering and beauty industry.

In 2017, the board held two town hall events for the industry (one in Northern California, the other in Southern California) focusing on workers’ rights to educate attendees, including its licensees. During these events, the board also introduced its publication “Understanding Workers’ Rights and Responsibilities,” which is available on its website at www.barbercosmo.ca.gov.

The board licenses and regulates manicurists and the establishments they work in. Verify licenses at www.barbercosmo.ca.gov and look for them posted conspicuously in salons.

DON’T TRASH THAT CARDBOARD BOX!

By Matt Woodcheke, Consumer Connection staff

Congrats, you’ve moved into a new home! All of your careful planning paid off—meticulously packing your goods into boxes, coordinating with a moving company (hopefully one that is licensed by the Bureau of Household Goods and Services), unpacking and organizing your belongings, setting up bedrooms, kitchens and living rooms just the way you want them. Time to relax, right?

But hold on—what are you going to do with all of the moving boxes? Don’t simply throw them away with the regular garbage. According to research by the University of Utah, cardboard and other paper waste make up 41 percent of the municipal solid waste stream.

Recycling cardboard takes 24 percent less energy and produces 50 percent less sulfur dioxide than making cardboard from raw materials, and every ton of cardboard we recycle saves nine cubic yards of space in landfills—about the size of a full-sized sedan.

Fortunately, there are eco-friendly options to dispose of cardboard.

Kick them to the curb: Flattened boxes can be placed into curbside recycling bins. Your municipality may also offer special curbside pickup of recycled materials that don’t fit in one recycle bin load.

Take them for a ride: Most cities and counties have a recycling center that accepts cardboard. Flatten the boxes, load them into your vehicle, and drive them over. CalRecycle’s website offers a search tool (powered by Earth911.com) to help you find recycling centers near you.

Pass them on to the next mover: Chances are good that someone in your community needs moving boxes, and rather than recycling them, you can give them away to someone who will reuse them. Post an ad on social media sites like Facebook, Craigslist, or Nextdoor, and see how fast they go.
CONSUMER CONNECTION / SPRING 2019

Mental Health Plays Costly Role in Workplace

By Laurel Goddard, Consumer Connection staff

Nearly one in five U.S. adults lives with a mental illness, according to the National Institute of Mental Health. In fact, depression is the leading cause of disability worldwide.

A nationally representative poll conducted for global business news website Quartz revealed that 18 percent of respondents said they experience anxiety or depression to the point where it disrupts work often or, worse yet, all the time. A 2018 article in MarketWatch explains that depression in the workplace shows up commonly as absenteeism as well as “presenteeism,” when an employee does show up to work but is not working at full capacity due to underlying mood issues.

The World Health Organization estimates the cost of depression and anxiety on the global economy to be $1 trillion per year in lost productivity. Mental Health America (MHA), the 110-year-old community-based nonprofit, puts work absenteeism and lost productivity costs for the U.S. economy at $51 billion a year plus $26 billion for direct treatment.

In response, many employers offer onsite counseling services, employee assistance programs, and encourage “mental health days” for employees to take a break from work and focus on their well-being. Some companies offer free meditation and yoga classes, and workshops on sleep, mindfulness, and exercise. Smart employers are recognizing that being accepting of mental health problems and helping their employees cope with them not only helps the individuals but the bottom line as well.

MHA offers online screening for nine common mental health conditions at https://screening.mentalhealthamerica.net/. The screening does not offer diagnoses, but does provide information, resources, and tools to discuss the results with a provider. If you feel the need to talk to someone, or if someone you know is in crisis, these are some options:

• Call 911.
• Go to the nearest emergency room.
• Call (800) 273-TALK (8255) to reach a 24-hour crisis center.
• Text MHA to 741741 at the Crisis Text Line.
• Call the National Suicide Prevention Lifeline (suicidepreventionlifeline.org), a national network of local crisis centers that provides free and confidential emotional support to people in suicidal crisis or emotional distress 24/7 at (800) 273-8255.
• Contact your employer’s employee assistance program.

Fda Tentatively Bans Lead In Hair Dyes

By Ryan Jones, Consumer Connection staff

After a petition from a coalition of consumer and public health advocacy groups, the U.S. Food and Drug Administration (FDA) has banned lead found in certain hair dyes, which had been initially approved based on a study nearly 40 years ago.

The ban would take effect pending an appeal.

Lead acetate is a color additive compound in what are called “progressive” hair dye products designed to work over time and usually targeting men.

The FDA said it would use “enforcement discretion” for a year to allow manufacturers to eliminate lead acetate from their hair-coloring formulas. The ban was set to take effect Dec. 3, 2018; however, the Combe company—which makes Grecian Formula—requested a hearing on the FDA’s decision Nov. 30, and the proposed ban would not take effect until the FDA’s final decision, according to Consumer Reports.

“We now know that the approved use of lead acetate in adult hair dyes no longer meets our safety standard,” FDA Commissioner Scott Gottlieb said in a statement. “Lead exposure can have serious adverse effects on human health, including for children, who may be particularly vulnerable.”

Canada banned lead acetate as a hair-coloring agent in 2008.
CONSUMER CONTACTS

DCA provides consumers with current license status information on the millions of professionals licensed or certified through its entities. To check licenses, report concerns with a licensed professional, or to find out more about a profession, contact one of the many DCA entities listed below.

ACCOUNTANCY, CALIFORNIA BOARD OF
2450 Venture Oaks Way, Suite 300
Sacramento, CA 95833
(916) 263-3680
www.dca.ca.gov/cba

ACUPUNCTURE BOARD
1747 North Market Blvd., Suite 180
Sacramento, CA 95834
(916) 515-5200
www.acupuncture.ca.gov

ARBITRATION CERTIFICATION PROGRAM
1625 North Market Blvd., Suite N-112
Sacramento, CA 95834
Toll-free: (800) 952-5210
(916) 574-7350
www.dca.ca.gov/acp
www.LemonLaw.ca.gov

ARCHITECTS BOARD, CALIFORNIA
2420 Del Paso Road, Suite 105
Sacramento, CA 95834
(916) 574-7220
www.cab.ca.gov

ATHLETIC COMMISSION, CALIFORNIA STATE
2005 Evergreen St., Suite 2010
Sacramento, CA 95815
(916) 263-2195
TTY: (800) 326-2297
www.dca.ca.gov/csac

AUTOMOTIVE REPAIR, BUREAU OF
10949 North Mather Blvd.
Rancho Cordova, CA 95670
Toll-free: (800) 952-5210
www.bar.ca.gov

BARBERING AND COSMETOLOGY, BOARD OF
2420 Del Paso Road, Suite 100
Sacramento, CA 95834
Toll-free: (800) 952-5210
www.barbercosmo.ca.gov

BEHAVIORAL SCIENCES, BOARD OF
1625 North Market Blvd., Suite S-200
Sacramento, CA 95834
(916) 574-7830
www.bbs.ca.gov

CANNABIS CONTROL, BUREAU OF
Mailing address:
P.O. Box 419106
Rancho Cordova, CA 95741-9106
Toll-free: (833) 768-5880
www.bcc.ca.gov

CEMETERY AND FUNERAL BUREAU
1625 North Market Blvd., Suite S-208
Sacramento, CA 95834
(916) 574-7870
Toll-free: (800) 952-5210
www.cfb.ca.gov

CHIROPRACTIC EXAMINERS, CALIFORNIA BOARD OF
901 P St., Suite 142A
Sacramento, CA 95814
(916) 263-5355
Toll-free: (866) 543-1311
www.chiro.ca.gov

CONTRACTORS STATE LICENSE BOARD
9821 Business Park Drive
Sacramento, CA 95827
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Toll-free: (800) 321-2752
www.cslb.ca.gov
COURT REPORTERS BOARD OF CALIFORNIA
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(916) 263-3660
Toll-free: (877) 327-5272
(877-3ASKCRB)
www.courtreportersboard.ca.gov

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Sacramento, CA 95815
(916) 263-2300
Toll-free: (877) 729-7789
www.dbc.ca.gov

DENTAL HYGIENE BOARD OF CALIFORNIA
2005 Evergreen St., Suite 2050
Sacramento, CA 95815
(916) 263-1978
www.dhcc.ca.gov

HOUSEHOLD GOODS AND SERVICES, BUREAU OF
4244 South Market Court, Suite D
Sacramento, CA 95834
(916) 999-2041
https://bhgs.dca.ca.gov

LANDSCAPE ARCHITECTS TECHNICAL COMMITTEE
2420 Del Paso Road, Suite 105
Sacramento, CA 95834
(916) 575-7230
www.latc.ca.gov

MEDICAL BOARD OF CALIFORNIA
2005 Evergreen St., Suite 1200
Sacramento, CA 95815
(916) 263-2382
Toll-free: (800) 633-2322
www.mbc.ca.gov

NATUROPATHIC MEDICINE COMMITTEE
1300 National Drive, Suite 150
Sacramento, CA 95834
(916) 928-4785
www.naturopathic.ca.gov

OCCUPATIONAL THERAPY, CALIFORNIA BOARD OF
2005 Evergreen St., Suite 2250
Sacramento, CA 95815
(916) 263-2294
www.bot.ca.gov

OPTOMETRY, CALIFORNIA STATE BOARD OF
2450 Del Paso Road, Suite 105
Sacramento, CA 95834
(916) 575-7170
Toll-free: (866) 585-2666
www.optometry.ca.gov

OSTEOPATHIC MEDICAL BOARD OF CALIFORNIA
1300 National Drive, Suite 150
Sacramento, CA 95834
(916) 928-8390
www.ombc.ca.gov

PHARMACY, CALIFORNIA STATE BOARD OF
1625 North Market Blvd., Suite N-219
Sacramento, CA 95834
(916) 574-7900
www.pharmacy.ca.gov

PHYSICAL THERAPY BOARD OF CALIFORNIA
2005 Evergreen St., Suite 1350
Sacramento, CA 95815
(916) 561-8200
www.ptbc.ca.gov

PHYSICIAN ASSISTANT BOARD
2005 Evergreen St., Suite 1100
Sacramento, CA 95815
(916) 561-8780
www.pac.ca.gov

PODIATRIC MEDICINE, CALIFORNIA BOARD OF
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Sacramento, CA 95815
(916) 263-2647
www.bpm.ca.gov

PRIVATE POSTSECONDARY EDUCATION, BUREAU FOR
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