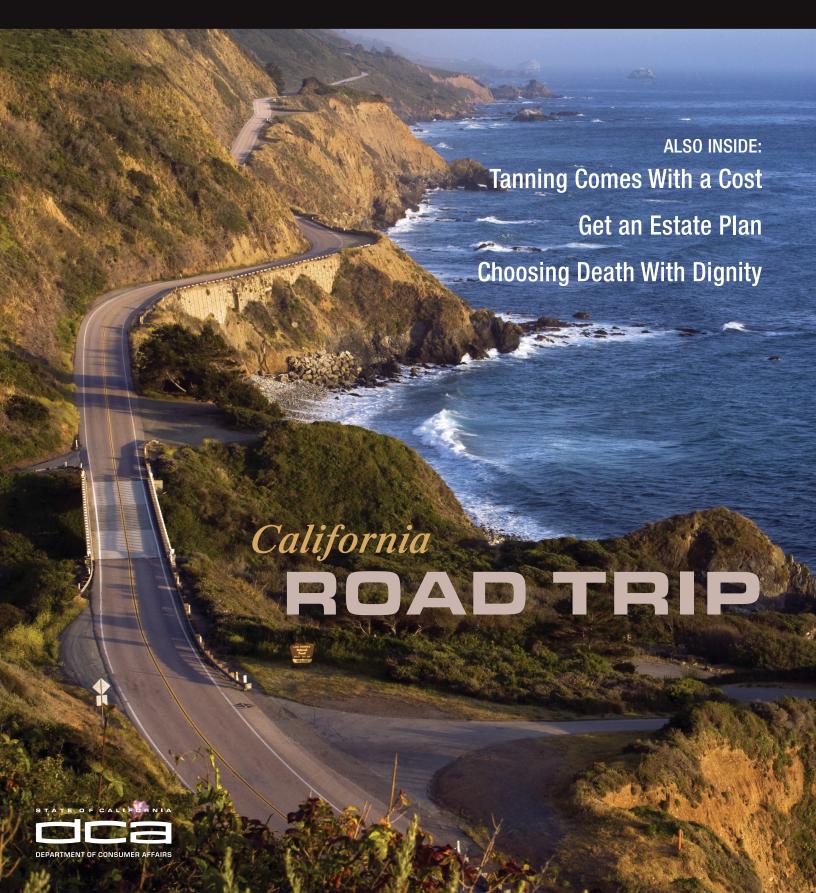
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CONSUMER CONNECTION



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MESSAGE FROM THE DIRECTOR



Every year brings change. At the midway point of 2016, DCA has already experienced quite a bit of change, especially in the arena of leadership, and we thought the *Consumer Connection* would be a great place to introduce these new leaders to our audience.

In this issue, meet Dr. Kameka Brown, who took the helm of the Board for Vocational Nursing and Psychiatric Technicians in March—the fifth Executive Officer of this Board since it was created in 1950. You can read more about Dr. Brown and the Board beginning on page 13.

In July, DCA's Executive team added two new members: Jeffrey Mason was appointed to serve as DCA's Chief Deputy Director, and Adam Quiñonez was appointed to the position of Deputy Director of Legislative and Regulatory Review. You can meet all of DCA's Executive Team online on the DCA leadership page at www.dca.ca.gov/about_dca/leadership.shtml.

Also in July, Dr. Joseph Morris was sworn in as the Executive Officer for the State Board of Registered Nursing. You will have a chance to meet Dr. Morris in our fall issue.

The year isn't over yet. There are several entities that are searching for new leadership at this time, including the Acupuncture, and Podiatric Medicine boards and the Professional Fiduciaries Bureau. We will introduce you to them as they come on board.

You could say this summer issue of the magazine addresses change. Our cover story, *California Road Trip*, offers readers places to go for a change of scenery, and how to make sure your car is ready for the road. In 2015, Governor Brown signed historic legislation that allows terminally ill adult patients to be prescribed an aid in-dying medication. The California End of Life Option Act went into effect on June 9; find out more about the new law and what it provides on page 15.

If you're thinking about changing your backyard to include a pool, we offer information on how to choose a contractor and the types of pools available.

Also included in this issue is information about what to do if your car is repossessed and how Naturopathic Doctors can help you handle stress. We also address some online dangers: the growing trend of DIY braces and what may or may not be in your prescription bottle if you buy from a rogue online pharmacy. All of these articles and more lie within the covers of this magazine—we invite you to find out who we are and what we do.

AWET KIDANE. Director

If you have any questions or comments or would like more information regarding reports, statistics, quotes and studies mentioned in this publication, please e-mail us at **consumerconnection@dca.ca.gov**.



More and More People CHOOSING to Rent

Whether it's due to being priced out of hot housing markets that keep climbing or simply because the ideal of ownership has lost some luster, more people are renting now in the United States than at any point in the past 50 years.

The share of all American households that are rented rose from 31 percent in 2005 to 37 percent in 2015, the highest rate since the mid-1960s, according to a biennial study in December by the Harvard Joint Center for Housing Studies. That spike of 9 million more renters over the past decade is the biggest on record for any 10-year period.

Particularly in California—where markets like San Francisco and Los Angeles continue to sizzle—a lack of affordability continues to be a catalyst. Half of state renters, according to a June survey by the California Association of Realtors (CAR), don't expect to buy a home in the future because they can't afford it. That figure rose from 41 percent to 50 percent in the past three years.

And in the same CAR survey, nearly two out of 10 renters (19 percent) said they can't qualify for a mortgage, while 15 percent said lack of a down payment is keeping them from buying—more than double the 6 percent in 2013.

The Department of Consumer Affairs' Bureau of Real Estate (CalBRE) has valuable information for California residents in the rental market. CalBRE's *Quick Guide for Tenants Renting a Home* (online at www.calbre.ca.gov/files/pdf/tenant_brochure_14-264.pdf) has tips to help renters avoid problems and protect themselves from fraud.

The median California home price in May, according to CAR, was \$518,760, a jump of 6.3 percent from a year earlier. In the second quarter of 2015, CAR reports 30 percent of residents were able to purchase a median-priced home—the same metric nationwide is 57 percent.

But as home ownership becomes more costly, the Harvard study found, high demand has put upward pressure on rents and reduced vacancies. Forty-nine percent of renters were deemed "cost-burdened" (paying more than 30 percent of income for housing) and 26 percent were "severely burdened" (paying more than half their income for housing).

Rental data site apartmentlist.com analyzed 2014 U.S. Census data and compiled a list of the cities with the most cost-burdened renters (see graphic below). Six of the top 25 are in California, led by Los Angeles at No. 5.

"The crisis in the number of renters paying excessive amounts of their income for housing continues, because the market has been unable to meet the need for housing that is within the financial reach of many families and individuals with lower incomes," said Chris Herbert, director of the Joint Center for

Housing Studies. "These affordability challenges also are increasingly afflicting moderate-income households."



Top 25 U.S. cities with the highest percentage of cost-burdened renters (those who pay more than 30 percent of income for rent), according to 2014 Census data analyzed by apartmentlist.com.

Rental unit demand has risen in conjunction with an increase in older and higher-income households. According to the report, renting grew fastest among those who earned the most: The number of renters in the top tenth of income grew at a clip of 61 percent from 2005 to 2015. In addition, the largest share of growth in renters (55 percent) was among households age 50 and older.

According to the 2016 Rental Affordability Analysis by housing data firm RealtyTrac, buying a home is more affordable than renting in 58 percent of U.S. metro housing markets—although that only holds true for California in a handful of rural counties.

"Renters in 2016 will be caught between a bit of a rock and a hard place, with rents becoming less affordable as they rise faster than wages, but home prices are rising even faster than rents," said Daren Blomquist, vice president at RealtyTrac.

Because housing markets can vary so widely, experts say it is critical to know your local market by talking to friends, family, and industry experts. Before settling on an agent for assistance, check to be sure they have a valid license with "Verify a Real Estate License" at the CalBRE website

(www.calbre.ca.gov).

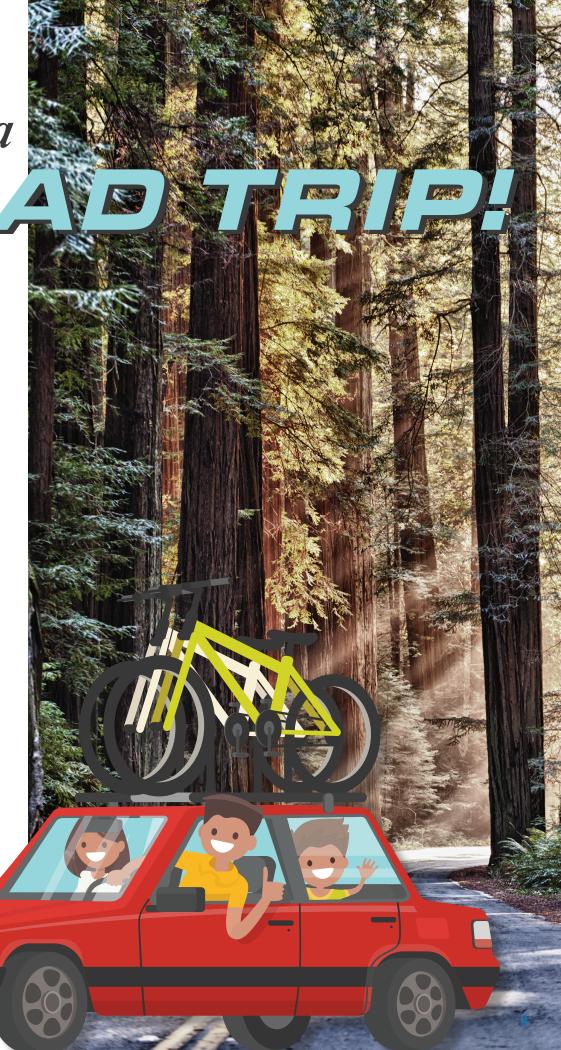
1.	Miami, FL	66.2%
2.	Detroit, MI	65.3%
3.	Kansas City, KS	63.4%
4.	Fort Lauderdale, FL	62.5%
5.	Los Angeles, CA	61.8%
6.	Memphis, TN	59.6%
7.	Boulder, CO	59.2%
	Jacksonville, FL	59.2%
9.	Cleveland, OH	58.8%
10.	Philadelphia, PA	57.5%
11.	Portland, OR	57.0%
12.	Tucson, AZ	55.6%
13.	Irvine, CA	55.2%

14.	New York, NY	55.1%
15.	Baltimore, MD	55.0%
16.	San Diego, CA	54.7%
	Tampa, FL	54.7%
	Mesa, AZ	54.7%
19.	Albuquerque, NM	54.3%
10.	rasaquorquo, ram	
20.	Sacramento, CA	54.1%
		54.1% 53.8%
20.	Sacramento, CA	
20. 21.	Sacramento, CA San Jose, CA	53.8%
20.21.22.	Sacramento, CA San Jose, CA Atlanta, GA	53.8% 53.7%

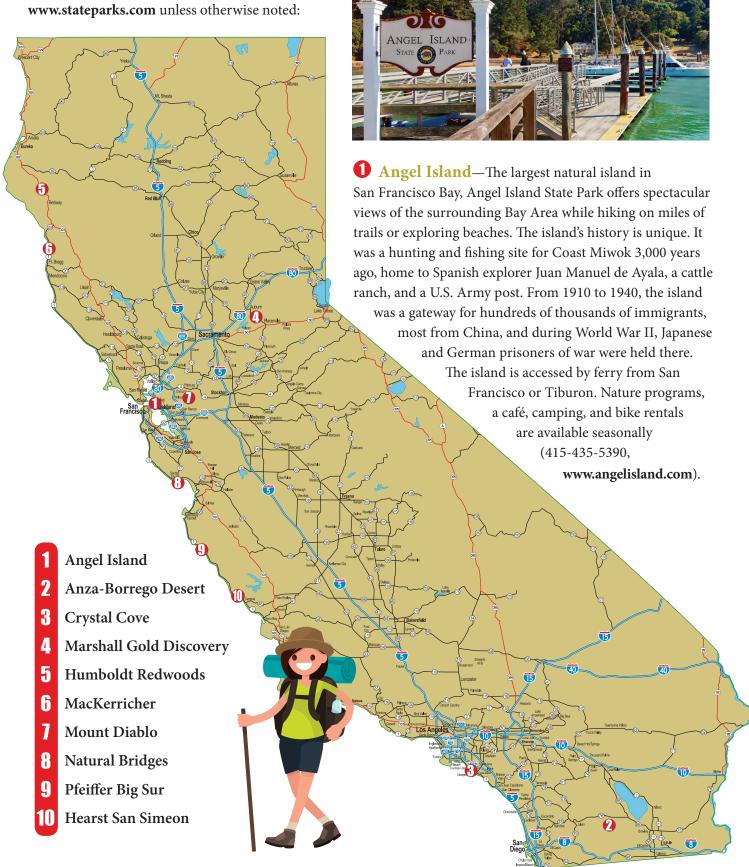
Time for a

Explore California's State Parks

There is no better time of the year than summer to take a road trip in California, and the Golden State has an abundance of State parks (118!) that feature tremendous environmental diversity—from rugged deserts to a world-renown coastline. Before you hit the road, be sure your car's check engine light or malfunction indicator light is not on. For more tips and to make sure your road trip goes smoothly, take some advice from the Bureau of Automotive Repair on summer driving and hot-weather vehicle care. The brochure Summer Driving: Tips for Getting Your Car in Shape is available at www.bar.ca.gov/pdf/ sumCarTips.pdf.



Here are 10 State parks to consider this summer when you pile the family in the car and turn on the GPS, with details from the California State Parks website (www.parks.ca.gov) and www.stateparks.com unless otherwise noted:



2 Anza-Borrego Desert—On the eastern side of San Diego County, Anza-Borrego Desert is the largest State park in California at more than 600,000 acres. It houses 12 wilderness areas, 500 miles of dirt roads and tens of miles of hiking trails, where visitors will see washes, wildflowers, palm groves, and sweeping vistas. Anza-Borrego also has seven Cultural Preserves—Statedesignated areas of historic and cultural significanceincluding Native American petroglyphs and pictographs. Wildlife includes bighorn sheep (albeit rare), foxes, deer, roadrunners, and iguanas. The park and town of Borrego Springs are known for incredible stargazing because of the lack of light pollution—it is the first International Dark Sky Community named in California (760-767-5311).

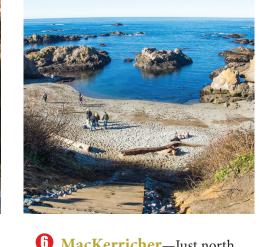


Crystal Cove—Crystal Cove State Park is an oasis of open space and natural seashore right off the bustling Pacific Coast Highway in Orange County. Its beaches, surf, tide pools, and wooded canyons and ridges provide many recreational opportunities. The park covers 3.2 miles of beach and 2,400 acres of wilderness. Hikers and mountain bikers utilize terrain inland, while scuba and skin divers take advantage of an offshore underwater area. The beach is popular with swimmers and surfers, and docents conduct interpretive programs such as guided hikes, tide pool walks, and geology talks. Unique to the park is its Historic District, a 12-acre coastal area with 46 vintage cottages originally built in the 1930s and '40s. In addition to visitor services and a restaurant, the Historic District includes 21 cottages available to the public for overnight use (949-494-3539, www.crystalcovestatepark.org).



Marshall Gold Discovery—James W. Marshall discovered gold in 1848 on the South Fork of the American River, triggering a massive U.S. population shift west and altering the course of California for good. In Coloma, east of Sacramento, Marshall Gold Discovery State Historic Park provides a window to the remarkable time period and scene that sparked the Gold Rush. The park includes many historic buildings, including a replica of the sawmill that produced the first flecks of gold for Marshall and John Sutter. Visitors have the opportunity to pan for gold on the American River, enjoy hikes, and picnic under the oak woodlands. A particularly informative destination for children—tours, exhibits, and special events are planned throughout the year—the State's first historic monument is at the park, with a statue of Marshall pointing at his gold discovery site (530-622-3470).







Humboldt Redwoods—The first acquisition of a redwoods grove by a conservancy group in 1921 was the beginning of Humboldt Redwoods State Park. The park, off Highway 101 next to the North Coast town of Weott, has grown to 53,000 acres, one-third of which is old-growth redwood forest—the largest area of ancient redwoods left on the planet. Among the park's highlights is the Avenue of the Giants, a 32-mile road tour through towering redwoods. Among popular stops along the way is Founder's Grove, with the fallen 362-foot Dyerville Giant. The South Fork of the Eel River provides opportunities for fishing, boating, picnicking, and swimming. More than 100 miles of trails can be accessed by hikers, cyclists, and equestrians. More than 250 family campsites in three different campgrounds are available, plus environmental camps, group camps, trail camps, and a horse camp. (707-946-2409, www.humboldtredwoods.org).

6 MacKerricher—Just north of Fort Bragg on Highway 1 is MacKerricher State Park. MacKerricher offers a variety of habitats, with camping in the forest near the coastline. Once part of the Mendocino Indian Reservation and then owned by a lumber company, MacKerricher features miles of beach between Fort Bragg and Ten Mile River, headlands, forest, and abundant dunes. Hiking, biking, and beach exploration are popular at the park, along with surf fishing and freshwater fishing in Cleone Lake, a former tidal lagoon. Up to dozens of seals can be seen lounging on the rocks just offshore, and more than 90 species of birds visit or live near Cleone Lake. The park also features a wheelchair-accessible nature trail (707-937-5804).

Mount Diablo—Many visitors to Mount Diablo State Park are drawn by one thing—the incredible view that is one of the best in the State. While the summit isn't particularly tall by mountain standards at 3,849 feet, the relatively flat topography surrounding the park, which is in the East Bay Area, is what makes the peak such a treasure. When conditions are optimal, the view stretches nearly 200 miles past the Golden Gate Bridge to the Farallon Islands in the west, to the Sierra Nevada and Tahoe in the east. Lassen Peak (10,466 feet) can be seen in the north. But Mount Diablo has more to offer than a remarkable view. The Summit Visitor Center is housed in a historic stone building made from sandstone blocks in the 1930s, and it highlights the cultural and natural history of the park. The park also features an extensive trail system, camping, horseback riding, and an observation deck with telescopes (925-837-2525).



Watural Bridges—In addition to its famous natural stone bridge, Natural Bridges State Park in Santa Cruz is a haven for sea life and a unique monarch butterfly habitat. Lucky visitors may catch a view of migrating whales, in addition to shore birds, seals, and otters playing offshore. Exploring tide pools is also a popular activity at the park, particularly at low tide when sea stars, crabs, and sea anemones can be seen. The park's Monarch Grove is home to more than 100,000 butterflies every fall and winter. The grove has been declared a Natural Preserve, the only one in California, and can be visited via handicap-accessible boardwalk and observation area. There is no camping at Natural Bridges, but there is a picnic area with barbecues and restrooms (831-423-4609). A bonus: nearby Santa Cruz Beach Boardwalk, which is California's oldest (1907) amusement park.





9 Pfeiffer Big Sur—The rugged coastal beauty of the Big Sur area is tough to top. The centerpiece of Pfeiffer Big Sur State Park is the Big Sur River and surrounding gorge. Park trails take visitors through redwoods, conifers, oaks, sycamores, cottonwoods, and more. A large campground of more than 175 tent and RV sites is available at this popular park, which is on Highway 1 about 25 miles south of Carmel. Sites often fill up months in advance, with the park's most coveted sites along the Big Sur River. Big Sur Lodge is located in the park and has 61 guest rooms, a conference center, café, and grocery store. There are many day-use picnic areas along the Big Sur River. The park has no beach access, but one mile south on Highway 1 is Pfeiffer Beach (831-667-2315).



Hearst San Simeon—A trip to Hearst San Simeon State Park provides remarkable Central Coast vistas and the chance to tour a National Historic Landmark. The coastal park just north of Cambria offers picnicking, fishing (including a pier), surfing, beachcombing, camping, and occasional whale watching. The Simeon Creek campground offers 115 sites for tents and RVs, while the primitive Washburn Campground is a mile inland overlooking the Santa Lucia mountains and has views of the Pacific (805-927-2020). Famed newspaper publisher William Randolph Hearst started to build his opulent estate in 1919, and by 1947, the hilltop complex now known as Hearst Castle included a twin-towered main building, three elaborate guesthouses, and 127 acres of terraced gardens, fountains, and pools. Summer tours are daily starting at 9 a.m. and cost \$25, \$12 for children under 13 (800-444-4445, hearstcastle.org).

For more information on California State Parks or to make a reservation, go to **www.parks.ca.gov**.

THAT (UN)HEATHLY GLOW

Tanning is Dangerous—Inside or Outside

Summer is here, and for many the quest for the perfect tan is on, whether it be from the sun itself or from indoor tanning beds or lamps. For many sun worshippers, the resulting bronzed look is believed to be an attractive, healthy-looking glow.

But there is a dark side.

The negative impacts of unnecessary ultraviolet radiation exposure, usually from excessive time in the sun or from the use of indoor tanning devices, go beyond premature aging—they include skin cancer.

In its 2014 Call to Action to Prevent Skin Cancer, the Surgeon General warned that tanned skin is damaged skin and we need to shatter the myth that tanned skin is a sign of health. When people tan or get sunburned, they increase their risk of getting skin cancer later in life. The report adds that skin cancer is the most commonly diagnosed cancer in the United States and is a major health problem, and even though most skin cancers can be prevented, rates are going up—including melanoma, the deadliest form.

According to research cited in the *Call to Action*, more than 400,000 cases of skin cancer, about 6,000 of which are melanomas, are estimated to be related to indoor tanning in the United

States each year. Yet tanning bed companies continue to claim positive effects of the ultraviolet light delivered by their products, and discount any link to cancer.

Don't be fooled.

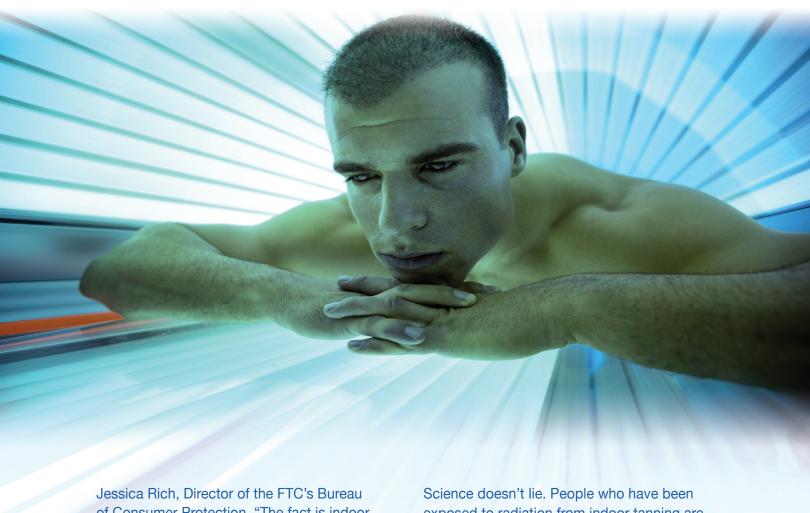
Recently, the Federal Trade Commission (FTC) came down on two Illinois-based marketers of Mercola-brand indoor tanning systems who targeted consumers willing to buy into the hype. Under a settlement with the FTC, the companies were ordered to pay refunds to consumers and will be permanently banned from marketing or selling indoor tanning systems. The defendants are required to pay a maximum of \$5,334,067 to cover the cost of refunds and administration of the refund program.

In the FTC's complaint filed in federal court, the Commission charged that Mercola and its two companies ran ads claiming their indoor tanning systems are safe, that research proves indoor tanning does not increase the risk of melanoma skin cancer, and that their systems, which deliver both ultraviolet (UV) light and red light, can "reverse the appearance

of aging." The FTC's complaint alleged that these claims are false, misleading, or unsubstantiated.

"These types of false claims are especially troubling because of the serious health risks posed by indoor tanning," said





Jessica Rich, Director of the FTC's Bureau of Consumer Protection. "The fact is indoor tanning is not safe because it increases the risk of skin cancer, including melanoma."

In 2012, California became the first state in the nation to ban minors from using tanning beds. This year, the U.S. Food and Drug Administration (FDA) is proposing rules to restrict sunlamp product use to adults 18 and older nationwide. The FDA regulates products that emit radiation, including sunlamps and products that use sunlamp products, such as tanning beds and tanning booths.

If the FDA's first proposed rule becomes final, indoor tanning facilities would be banned for those younger than 18. This proposal, per the FDA, is intended to help protect the health of America's youth. Adult users would have to sign a certification acknowledging they have been informed of the health risks related to the use of indoor tanning devices before their first use and every six months after that.

Science doesn't lie. People who have been exposed to radiation from indoor tanning are 59 percent more likely to develop melanoma than those who have never tanned indoors, according to the American Academy of Dermatology. The FDA's website explains that exposure to UV radiation—whether from the sun or from artificial sources such as sunlamps in tanning beds—increases the risk of developing skin cancer, according to the National Cancer Institute. It adds that melanoma is the sixth most common type of cancer in the United States, and that an estimated 76,000 new cases of melanoma are expected in 2016, with about 10,000 deaths attributed to melanoma projected for the year.

The FDA website also reports that in July 2009, the International Agency for Research on Cancer (IARC), part of the World Health Organization, concluded that tanning devices that emit UV radiation are more dangerous than previously thought. IARC moved these devices into the highest cancer risk category: "carcinogenic to humans." Previously, it had categorized the devices as "probably carcinogenic to humans."

Development of cancer is a long process that may take decades. Therefore, IARC also recommended banning commercial indoor tanning for those younger than 18 to protect them from the increased risk for melanoma and other skin cancers.

IARC's conclusions and recommendations were based on its 2006 review of 19 studies conducted over 25 years on the use of indoor tanning equipment. The review found evidence of:

- An association between indoor tanning and two types of skin cancer: squamous cell carcinoma and melanoma.
- An association between UV-emitting tanning devices and cancer of the eye (ocular melanoma).
- Both UVA and UVB rays causing DNA damage, which can lead to skin cancer in laboratory animals and humans.
- The risk of melanoma of the skin increasing by 75 percent when tanning bed use started before age 35.

IARC's review had some limitations, said Ron Kaczmarek, M.D., MPH, an FDA epidemiologist who analyzed the review. Limitations include possible inaccuracy of people's memories of their tanning

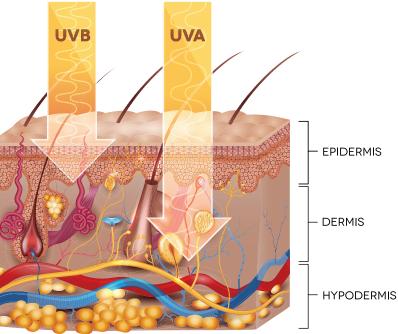
UVA rays are linked to skin damage such as wrinkles, but also play a role in some skin cancers. UVB rays are the main rays that cause sunburns and are also thought to cause most skin cancers.

experiences, not knowing the amount of UV radiation emitted by each tanning device, and the inability to separate the effects of individuals' indoor and outdoor exposure. Nevertheless, IARC concluded that there is convincing evidence of an association between the use of indoor tanning equipment and melanoma risk, and that the use of tanning beds should be discouraged.

"It's well established that UV radiation from the sun causes skin cancer," said Sharon Miller, MSEE, an FDA scientist and international expert on UV radiation and tanning. "Since lamps used in tanning beds emit UV radiation, the use of indoor tanning devices also increases your risk of skin cancer."

"Some of the best ways to prevent skin cancer are using a 'broad spectrum' sunscreen that protects against both UVA and UVB rays and reapplying it often; seeking shade; wearing sun-protective clothing; and regular visits to your licensed primary care physician, a dermatologist, or plastic surgeon for skin checks," said Dev Gnanadev, M.D., Vice President of the Medical Board of California.

To check a physician's license, visit www.mbc.ca.gov.



Sebject What to Consider With Pool Construction

You've decided to take the plunge and put a swimming pool in your backyard. To ensure all goes smoothly and you don't wind up getting soaked, be sure to choose wisely when selecting the pool contractor.

Finding a licensed and reputable contractor is the first and most important step before starting any major home project. In California, all swimming pool contractors are required to hold a C-53 Swimming Pool Contractor license for projects that cost \$500 or more. Consumers can check if a contractor is licensed, insured, and in good standing by going to the Contractors State License Board's (CSLB's) website at www.cslb.ca.gov or by calling (800) 321-CSLB (2752).

Although a qualified contractor should inform you about construction and design details well before breaking ground, you should also educate yourself about what will be involved. Prior to hiring a contractor, research the available pool materials and how you envision the pool will integrate into your backyard. There are three basic types of in-ground pools: concrete, vinyl, and fiberglass.

Here's a look at the pros and cons of all three:

CONCRETE. Also called gunite or shotcrete because the concrete is shot from a gun onto the walls, this is the most popular of the three. **PROS:** These pools can be designed into any shape and size and are the most durable. **CONS:** It takes between three weeks to several months to install; it is the most expensive of the three; textured surfaces can be uncomfortable and abrasive and can attract bacteria and algae.

VINYL. Vinyl pools are made from a preformed flexible liner; the contractor digs out a hole and inserts wall frames; the liner attaches to the frame. Most vinyl pools are rectangular, but L-shaped and freeform liners are also available. **PROS:** Liners come in dozens of colors and patterns; installation time is short—one to three weeks. **CONS:** The liner can be punctured by sharp objects, so choose a liner that's at least one inch thick.



FIBERGLASS. These pools are molded into one giant shape at the factory, then set into a hole excavated by a crane. PROS: Fast installation; some pools can be completed in as few as three days. The finish is extremely durable and stain resistant, and this type of nonporous finish means fewer chemicals and less algae. CONS: Options for sizes and shapes are limited. Because the molded pools are gigantic, they must be delivered by truck, which can take a long time.

"A good contractor will appreciate that you've done your homework and will be anxious to share information with you," says CSLB Registrar Cindi Christenson.

In addition, when selecting a contractor, do some comparison shopping—but don't pick one based on price alone.

"Consumers should get at least three bids for their project," says Christenson, who adds that consumers should never feel pressured by a contractor. "They should also take a look at past work of the contractors in person and make sure that all project expectations are in writing. Don't sign anything unless you completely understand the terms."

Remember, installing a pool is a considerable investment. Carefully selecting a reputable and licensed contractor will save you time and money—and possibly stress and heartache—in the end.

For more information about swimming pool construction and selecting a contractor, visit the CSLB website at **www.cslb.ca.gov/Consumers/Hire_A_Contractor/Swimming_Pool_Construction/** or call (800) 321-CSLB (2752).

Tips to Ensure Your Pool Construction Goes Swimmingly

BE CODE READY—Check your local building codes. Although the contractor should take care of this, it's important for homeowners to also know the rules—certain areas may require special zoning permits and require that perimeter fences be a certain height. The last thing you want is a surprise problem that will delay your construction or worse, shut it down completely. Watch out for "swimming pool consultants" who claim they can save you money by having you pull your own permits as an "owner-builder"—then guiding you through the process for a fee.

DON'T FORGET ABOUT INSURANCE—Before construction begins, check with your insurance agent to be sure you have adequate insurance protection. The most important is workers' compensation insurance, which covers

injuries to workers while on your property. The other is general liability, which covers damage to your property. Although not required by law, the Contractors State License Board recommends that you hire contractors and subcontractors who carry liability insurance. Verify all policy information by contacting the insurance company.

SEEING IS BELIEVING—A reputable contractor takes pride in their work and will have no problem showing it off. They should have no problem with you asking to see some of their completed projects in person and speaking with their most recent customers. Ask the referred homeowners about their construction experience, including how the contractor was to work with, if the work was completed on time with no surprises, and if the contractor communicated well with them.





Dr. Kameka Brown, Executive Officer



The California Board of Vocational Nursing and Psychiatric Technicians (BVNPT/ Board) licenses and regulates two different healthcare professionals in California licensed vocational nurses (LVNs) and psychiatric technicians (PTs)—and has a licensee population of approximately 150,000. Each of the professions BVNPT regulates has its own statutes, regulations, curriculum requirements, examinations, and staff. A major change for the Board occurred in March with the arrival of Kameka Brown, Ph.D., MBA, N.P., who serves as the fifth executive officer since the Board was created in 1950.

Executive Officer Spotlight

Did you always know that one day you would become a nurse?

It's funny. I was actually in telecommunications for 10 years before I became a nurse, but I knew that I needed to do something that would touch and inspire people. It was in a movie theater that I saw a Johnson and Johnson Discover Nursing advertisement and it just clicked. I knew that was it. Nursing is a healing and caring profession. I tell people, "I care about people for a living" and throughout my entire career, I have cared about people. From emergency care, to community health, to the students I taught, I always saw myself as simply facilitating the best for those I lead. And now with the consumers I protect and the educational institutions I help to regulate, I continue to care about the well-being and safeguard practice standards for vocational nurses and psychiatric technicians in California.

What path did you take that led you here, to the California Department of Consumer Affairs as the Executive Officer of BVNPT?

It's interesting how life works. While it is never a direct path, it is a perfect path to the place you are meant to be. In my prior role as the Chief of Education and Workforce Development with the U.S. Department of Veteran Affairs, I met staff enrolled in educational programs that were not accredited. They were flummoxed at the prospect of starting over at a new school and saddled with heavy school loan debt. I was instantly activated and advocating for licensees was important. A mentor suggested regulation and enforcement as a career trajectory I should consider. After nearly 20 years, BVNPT was looking for new leadership. It was divine timing.

What are some of your best memories of your nursing career?

For me, nursing has always been a rewarding challenge. It is the little things that give value. For example, my former patient, a Korean War veteran who learned to control his blood sugar and regaled me about his time in the war. But it is also my student who said she just wanted to pass my research studies class and is now completing her doctorate that makes me smile. It is interfacing with people on the most personal and sometimes the most basic of levels that are my most memorable moments as a nurse.

What does BVNPT do?

The Board serves to license the 130,000 vocational nurses (VN) and 20,000 psychiatric technicians (PT) practicing throughout the state, along with certifying the 162 VN and 16 PT schools that train them. BVNPT is also a consumer protection agency and enforces regulations related to licensee and institution issues. Finally, BVNPT is an advocacy resource for VN/PT scope of practice and consumer protection.

What is your vision for BVNPT?

Leveraging a basketball analogy, I really see BVNPT akin to the Golden State Warriors of the National Basketball Association (NBA) prior to winning the 2015 NBA championship. We are the little-known Board with a ton of talent. We have amazing staff with a wealth of knowledge and drive. My vision for our team is to increase public awareness of who we are and improve our ability to serve. We have existed in relative isolation for a number of years. Many were not able

to leverage our expertise and vice versa. We are on a campaign to reintroduce the Board to consumers and the public. With such an introduction, internal accountability was necessary. We had to shore up our organizational structure and improve our telephone and customer service along with staffing. This naturally segued into improving our ability to provide service. I want to capture our in-house expertise (e.g., processes) that are commonly leveraged through Lean Six Sigma¹ and standard work. It will make our Board more efficient and proactive in our responsiveness to consumers and the stakeholders.

BVNPT protects consumers by licensing, regulating, and disciplining vocational nurses and psychiatric technicians and by educating consumers about their rights. For more information or to contact the Board, visit their website at www.bvnpt@dca.ca.gov.



See page 29 for descriptions of the Boards, new publications.

How do you spend your free time?

I am dedicated to our region and my community. I have several philanthropic efforts that I devote my time to regularly. Most dear to my heart are at-risk youth (foster care and homeless). Currently, I serve on the board of an organization dedicated to increasing permanency for foster children and eradicating homelessness.

What particular challenges does BVNPT face at this time?

Nationally, many boards are facing the challenge of borderless healthcare. With many clinicians caring for patients in a number of areas and with the advent of telemedicine, the complexity of regulating academic institutions and operating offices in multiple states is challenging. The discussion of national licensure compact continues to emerge, along with how to standardize licensure requirements across all states to protect against application fraud and ensure the highest standards are preserved. As healthcare continues to evolve and innovate, this discussion of borderless healthcare will be an undertaking not just for our Board, but many healing arts boards.

What would you like consumers to know about BVNPT?

I would like consumers to get to know us again. While they may recall limited interactions with the Board in the past, we are the fresh and new board of tomorrow. We are engaging, interactive and responsive. We are here to help, respond, and advocate. I invite consumers to get to know us again.

Can you explain the difference between an LVN, P.T., and R.N.?

LVN is an 8–12 month program, typically; that allows one to sit for the NCLEX-PN examination. No degree is conferred. LVNs can practice in any setting under the direction of a provider (N.P./M.D./D.O.). There are some procedures and medications LVNs are not able to perform/give (chemotherapy drugs/blood transfusion).

P.T. is an 8–12 month program, typically; that allows one to sit for the CAPTLE examination. Colorado is the only other state that licenses P.T.s. They practice in mental health facilities, emergency departments, home based, and other areas under the direction of a provider (N.P./M.D./D.O).

R.N. is a 12–24 month program, typically; that allows one to sit for the NCLEX-RN examination. The degree level includes A.A., BSN and generic Masters. R.N.s can practice in any setting under the direction of a provider (N.P./M.D./D.O.).

Lean Six Sigma is a methodology that relies on a collaborative team effort to improve performance by systematically removing waste.

DEATH With DIGNITY

Californians NOW Have a Choice

As of June 9, 2016, adult Californians who are terminally ill have the choice to opt out of their pain and suffering. The California End of Life Option Act (ABX2-15, Monning and Wolk) was signed into law by Governor Brown on October 5, 2015, and went into effect this past June, making California the fifth state to permit this end-of-life option, joining Vermont, Oregon, Washington, and Montana.

Modeled after the Oregon Death With Dignity Act, the California statute allows certain terminally ill individuals to legally request medications from their physicians that will hasten their deaths and end their lives in a humane and dignified manner.

However, no two state laws are alike, and there has been some confusion regarding the California law. Below is a summary of the law that, hopefully, will help clear things up a bit.

It is voluntary for patient, physician, and pharmacist. Use of the law is voluntary; physicians can refuse to write the order and pharmacists can refuse to fill it.

It is not the same as euthanasia. In euthanasia, the doctor gives the drugs to the patient. Aid-in-dying requires the patient to ingest the drugs him- or herself.

Only the patient—not a family member or another person—can make the request for the prescription. The patient must make two oral requests at least 15 days apart, plus submit one written request in the proper statutory form. All requests must be made in person.

Two requests are required. Before the patient can request a prescription for an aid-in-dying drug, he or she must be seen by a "consulting physician," which is defined as a physician who is "independent from the attending physician and who is qualified by specialty or experience to make a professional diagnosis and prognosis regarding the patient's terminal disease." The consulting physician may not witness the patient's written request and may not be related by blood, marriage, domestic partnership, or adoption or be entitled to a portion of the patient's estate upon death.



Five forms are required. The forms are: Request for an Aid-in-Dying Drug to End My Life in a Humane and Dignified Manner; Final Attestation for an Aid-in-Dying Drug to End My Life in a Humane and Dignified Manner; Attending Physician Checklist & Compliance Form; Consulting Physician Compliance Form; and Attending Physician Follow-Up Form.

Certain conditions have to be met in order to make an Aid-in-Dying Request.

- The person must be 18 years of age or older.
- The person must be mentally competent.
- The person has been diagnosed by his or her physician as having a terminal illness that will lead to death in six months or less.
- The individual has expressed that he or she wishes to receive a prescription for the aid in dying drugs.
- The individual must be a California resident, or must be able to prove residency.

The forms can be viewed and downloaded at the California Department of Public Health's website: https://www.cdph.ca.gov/Pages/EndofLifeOptionAct.aspx.

An interpreter can be used. As long as the request form signed by the patient is written in the same language as all conversations, consultations, or interpreted consultations or conversations between the patient and his or her attending physician.

Which drugs are used in the aid-in-dying process? The Act does not specify nor list which drugs can or should be used. According to the California State Board of Pharmacy, the most common drugs prescribed for this purpose in Oregon are secobarbital and pentobarbital. Patients are typically prescribed an antiemetic at the same time, which they are directed to self-ingest about one hour before taking either medication to prevent nausea and vomiting.

Health insurers are not required to cover the price of the drugs. The Act does not require insurance companies to pay for the drug. You would need to check with your particular provider to find out if the drugs are covered.

You can change your mind. A patient may choose to withdraw the request and not ingest the drugs at any time. The attending physician has an obligation to inform the patient that he or she can withdraw the request at any time or in any manner.

The law does expire. If the Legislature does not act to renew it, the law will expire in 2026.



Heal Thyself

Naturopathic Medicine's Approach to Stress Management

Stress is an unavoidable part of our daily lives. Whether it's the work deadline you're trying to meet; the e-mails, texts, and phone messages you need to respond to; or the daily demands of parenting, our lives have become increasingly more complicated, busy ... and stressful.

That makes stress management incredibly important and essential. Uncontrolled and high amounts of stress can affect not only how we feel mentally—leading to depression, moodiness, and anxiety—but also physically. According to the American Psychological Association, it can affect a variety of our body's processes, including respiratory, cardiovascular, nervous, and even our reproductive systems. As a result, our bodies are more prone to disease and dysfunction.

Dr. Tara Levy, N.D., Department of Consumer Affairs' Naturopathic Medicine Committee member Vice Chair, recommends the need for:

- Balanced blood sugar: To achieve a healthy amount of energy, maintain an adequate amount of protein in your diet throughout the day, along with several servings of vegetables and plenty of water.
- B vitamins and vitamin C:
 When your body is under stress, your need for these vitamins increases and these supplements can help provide you with adequate energy.
- Good quality sleep: Most adults need between seven to nine hours a night. If it's difficult to get that amount, consider herbs such as passionflower or valerian, or nutrients such as theanine or magnesium to help calm the nervous system and prepare your body for rest.

Stress management using naturopathic medicine methods encompasses all these principles.

What can you do to manage and reduce stress? If you're open to more natural solutions, you may want to consider naturopathic medicine. It is based on holistic principles, including believing and trusting in a body's ability to heal itself; looking beyond symptoms to understand the underlying case of a condition; initially using natural and the least invasive methods; recognizing a person's total health that includes physical, emotional, genetic, and social factors; as well as encouraging and emphasizing disease prevention and focusing on promoting health and wellness.

When you first visit a Naturopathic Doctor (N.D.), you will typically be asked questions regarding your health history and any other relevant information, including lifestyle habits, diet, and home and work life. The initial exam may also include lab tests.

"Naturopathic doctors may utilize tests not commonly seen in conventional care that allow them to evaluate organ and metabolic function with much more precision," said Committee member Dr. Greta D'Amico, N.D. "Once your [N.D.] feels she has all the details she needs to get a good picture of what is going on, she will make recommendations about how to turn it around."

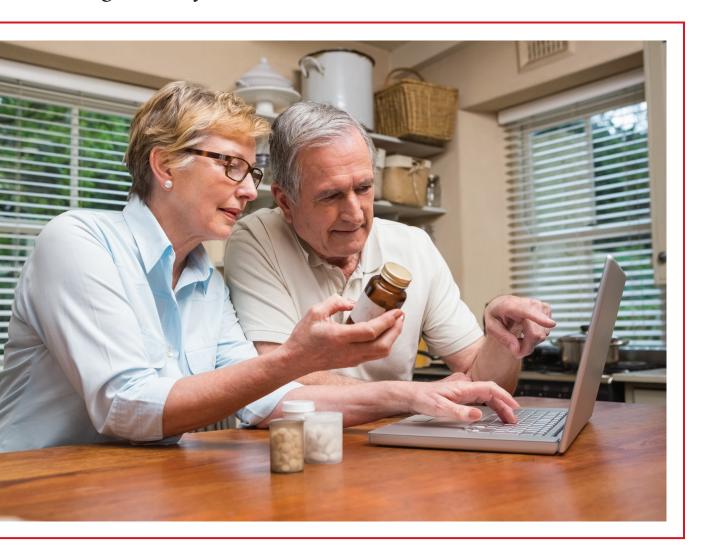
Be upfront with your N.D., letting them know about any existing conditions and what other supplements and medications you're already taking. Any relevant information you can provide will help give your N.D. a full picture of your current situation and allow for more effective treatment.

When considering using an N.D. to treat your stress, do your homework. Get recommendations from friends and family members and visit the Committee's website at www.naturopathic.ca.gov to verify and find out the status of a license.

To find out more about naturopathic medicine and the N.D. profession, visit the California Naturopathic Doctors Association (www.calnd.org) and the American Association of Naturopathic Physicians (www.naturopathic.org) websites.

What's Really in Your Prescription Bottle?

Many online pharmacies may be fakes and could be selling counterfeit, toxic medications.



Rat poison, floor wax, brick dust, house paint, road paint, paint thinner, and antifreeze. These are just some of the deadly ingredients found in fake prescription drugs sold by rogue online "pharmacies."

Even if those medications purchased online don't contain toxic substances, they could be expired and you can't be sure they contain any of the actual medicine. Some counterfeits could also contain too much or too little of the needed ingredients and may cause allergic reactions, harmful side effects, or even death.



Counterfeit medicine can be found as a generic drug or a brand-name drug, and can be almost anything—including pet medicines, antibiotics, painkillers, and drugs to treat conditions such as erectile dysfunction, heart problems, mental health issues, HIV, AIDS, diabetes, and cancer. These fake medicines often come from countries where government enforcement is weak; however, they can be manufactured anywhere. Additionally, fake online pharmacies may falsely claim to be located in countries such as Canada or the United States.

Interpol, the world police agency, says more than 1 million people worldwide die each year from counterfeit medications and estimates that up to 30 percent of drugs sold worldwide are counterfeit.

The National Association of Boards of Pharmacy (NABP) warns that the vast majority of websites selling prescription drugs online are doing so illegally—many of them sell unapproved, substandard, expired, and counterfeit medicine. The U.S. supply chain is a highly regulated distribution chain, and legitimate drug manufacturers will not sell their medications to rogue drug distribution outlets that pose as pharmacies.

NABP has reviewed nearly 11,000 online drug outlets selling prescription medications and found that 96 percent are not in compliance with U.S. pharmacy laws and practice standards that protect the public health. Of the websites NABP identifies as "not recommended," nearly half offer foreign drugs or drugs not approved by the U.S. Food and Drug Administration (FDA) for sale in the United States.

Additionally, NABP noted that 20 new, illegal websites claiming to be pharmacies appear on the Internet every day. Not only are the medications they sell questionable, these rogue pharmacies can also steal your credit card numbers, and identity and health information.

Now There's .pharmacy

To aid consumers who wish to safely buy medications online, NABP has worked for two years to establish a .pharmacy (called "dot pharmacy") domain name

that ensures participating pharmacies comply with FDA laws for drugs sold to U.S.located patients, so the public can purchase medications on the Internet with confidence. According to NABP's website, .pharmacy is a secure and trustworthy top-level domain where consumers can be sure the medications they buy online are legitimate.

Virginia Herold, Executive Officer of the California State Board of Pharmacy (Board), serves on the executive board for .pharmacy. She said about 25 boards of pharmacy are currently using .pharmacy suffixes along with a number of pharmacies. The Board is one of these boards, which if you enter **www.CAboard. pharmacy** will take you to the Board's website (which also uses its State government Web address of **www.pharmacy.ca.gov**). She noted more states and additional companies are pursuing .pharmacy domain names as they complete NABP's vetting process.

"Buying on the Internet can be a safe way to purchase medication IF you can be certain you are dealing with

a licensed pharmacy that follows state and federal laws," Herold said. "In a few years, the use of .pharmacy should become the dominant form of transactions for patients seeking legitimate online pharmacies."

Always Buy From a Licensed Pharmacy

Herold said buying your prescription medicine from a pharmacy licensed by the Board is one way to ensure you are dealing with legitimate pharmacies. All pharmacies, including online pharmacies

What's REALLY in your prescription bottle?

If you ordered it from a rogue online pharmacy, it could be anything!

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A new poster from by the California State Board of Pharmacy warns of the dangers of rogue online pharmacies and promotes the new .pharmacy domain name.

located in other states that dispense prescription medicine to California patients, must be licensed by the Board.

Licensed pharmacies are regulated and inspected. Under California and federal laws, it is illegal to sell prescription medicine without a valid doctor's prescription. Also, if a pharmacy is located in a state outside of California and sells to California residents, it must be licensed in both its home state as well as in California.



Lower Your Risk

Unfortunately, the making and selling of counterfeit medicine happens and it's hard to tell a fake just by looking at it—you may need chemical testing to identify it as a counterfeit.

Be aware and protect yourself by always getting a prescription from a licensed health care provider and filling it at a licensed pharmacy that you know is licensed, whether or not its location is online. Don't buy medicines off of Craigslist or from street vendors.

If you suspect you received counterfeit medicine, contact the pharmacy where you purchased it and notify:

California State Board of Pharmacy: (916) 574-7900: www.pharmacy.ca.gov

U.S. Food and Drug Administration: (800) 332-1088: www.fda.gov

For more information on counterfeit prescription medications, go to **www.pharmacy.ca.gov/publications/counterfeit_drugs.pdf**.

Is it a Fake?

Counterfeits often look exactly like real medicine and can even fool health care professionals, but here are some signs that your prescription drugs could be counterfeit:

- The container label has a name for a drug you did not order.
- The pills are chipped or cracked.
- The container and packaging have changed.
- The label on the container is crooked.
- Foreign language text appears on the label.
- The medicine is in a baggie, not a prescription container.
- The drug looks or tastes differently than it did before.
- The drug causes a different reaction or does not work as well as the medicine you are used to.
 - Security seals are broken and there are signs of tampering.
 - There is no customs declaration or postal label declaring the contents as medicines.
 - The batch number and expiry date on the primary internal packaging does not match the batch number and expiry date on the secondary (external) packaging.

Be Sure Your Privacy is Protected

- Look for privacy and security policies that are easy-to-find and easy-to-understand.
 - Don't give any personal information such as your Social Security number, credit card number, or medical or health history unless you are sure the website is legitimate.
 - Make sure that the website will not sell your information unless you agree to the sharing.

AVOIDING THE WAIT:OUALIFYING FOR COVERED CALIFORNIA'S SPECIAL ENROLLMENT

Open Enrollment is still months away, but you may still be able to enroll. Generally, you can only sign up for Covered California during the Open Enrollment period, which starts in the fall. But there are exceptions.

With Special Enrollment, if you experienced a qualifying life changing event, you can get coverage anytime of the year.

"Life happens. Whether it's the joy of getting married or the upheaval that comes with losing a job, things can get complicated in a hurry," says James Scullary, spokesperson for Covered California, California's health insurance marketplace. Under the Patient Protection and Affordable Care Act (ACA), Covered California makes affordable health care coverage available for individuals and small businesses.

Life changing events that may qualify you for Special Enrollment include:

- Having or adopting a child.
- Changing where you permanently live.
- Being released from jail or prison.
- Turning 26 and no longer covered by your parent's plan.
- Returning from active duty military service.
- Having exhausted your COBRA coverage.
- Becoming a citizen, national, or permanent legal resident.

Although signing up through Special Enrollment is available year-round, be aware there's still a deadline: You must enroll within 60 days from the date of your qualifying life event. For example, if you have a baby on March 1, then you have until April 30 to notify Covered California, complete an application, choose a health plan, and pay. Also, it's important to note that there is a Shared Responsibility Payment tax penalty if you don't get health coverage for your newborn.



The same goes for you and other family members. The tax penalty is nothing to ignore and has increased significantly over the past two years. You must pay the penalty if you can afford insurance but don't buy it. This year, the penalty is the greater of:

- \$695 for each adult and \$347.50 for each child, up to \$2,085 per family, OR
- 2.5 percent of the tax filer's annual household income minus the federal tax filing threshold.

To estimate your potential penalty, use the Tax Policy Center ACA Tax Calculator at www.taxpolicycenter.org/interactive tools/aca-tax calculator.

If you feel you can't afford coverage, you may be able to qualify for financial help, either through Covered California or Medi-Cal. Similar to Special Enrollment, you can apply for Medi-Cal anytime of the year.

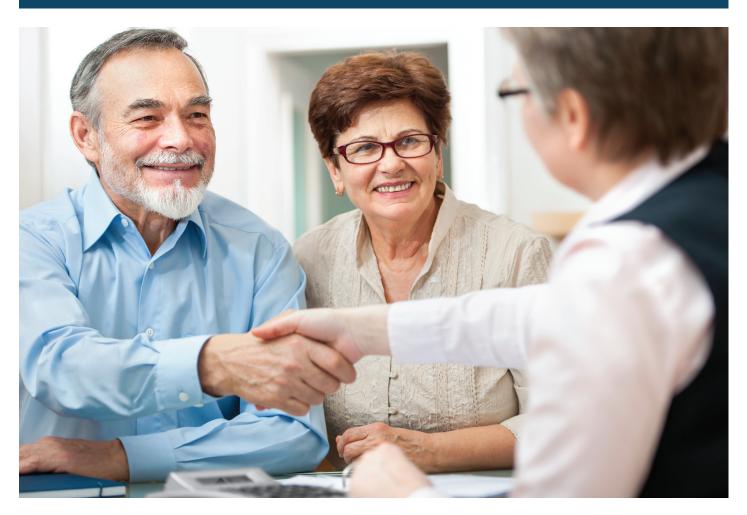
Having health insurance is a smart move—not only to avoid the tax penalty but also the larger financial risk of huge medical bills if an unexpected health issue arises.

To find out more about Covered California's Special Enrollment, visit **www.coveredCA.com** or call (800) 300-1506.



Don't Leave it to Chance . . .

. . . or to the State



Get an Estate Plan in Place Now.

Surprisingly, Prince didn't have a will. Unfortunately, about half of all Americans don't either.

Is dying without a will—called dying intestate—an issue? It can be if it's important to you whom gets what. When you die intestate, state law determines how your assets are distributed. In general, all goes to your closest relatives. For example, in California, if you die with children but have no spouse, parents, or siblings, your kids will get everything; and if you die with a spouse but have no children, parents, or siblings, your spouse will inherit everything. If you have young children and you and your spouse die or the surviving parent is determined unfit, the state will also decide who will take care of your children. Another downside to not having a will: Your estate will definitely go into probate, which is a lengthy and expensive court process for distributing your assets.

According to a 2012 survey by online legal services company Rocket Lawyer, a large percentage of people don't have wills. The survey reported that 50 percent of Americans with children and 41 percent of baby boomers (age 55–64) do not have a will.

That all being said, it's a smart idea to have a solid estate plan in place and have control of what will happen to your assets and family after your death.

Wills and living trusts

A will, also called "last will and testament," is a legal document that details your final wishes and takes effect and becomes public after your death. A will also names an executor—the person responsible for making sure the terms of your estate are adhered to.

Unlike a will, a living trust can take effect while you're still alive, remains private, and is not subject to probate proceedings. You, as the trustee, can transfer your property into a living trust while alive and continue to manage the property (sell, exchange, invest) in the trust. The trust is also revocable, meaning the creator of the living trust can change or dissolve it at any time as long as he or she is mentally competent. The trust names successor trustees, who can be your children or a trusted relative who can take over your living trust at the time of your death or if you become incapacitated. However, if you don't have someone you feel you can trust as the successor trustee, an option is a professional fiduciary. (Visit the California Professional Fiduciaries Bureau website at www.fiduciary.ca.gov to learn more about professional fiduciaries and the services they can provide.)

A living trust, like a will, is set up so your beneficiaries receive the assets after your death. Any assets not included in the living trust at the time of death can be transferred to the trust through a pour-over will. Although a

ESTATE PLAN SCAMMING

Nothing is off limits to scammers, including estate planning. Unscrupulous sales agents prey on seniors and use high-pressure scare tactics to get them to buy overpriced living trusts or to get ahold of personal and financial information.

According to the California Office of the Attorney General (OAG), sales agents pass themselves off as being experts in living trusts and call themselves "trust advisors," "senior estate planners," or even paralegals. They sometimes hold free seminars in places where seniors gather such as assisted living facilities and churches.

The OAG warns consumers not to become victims of living trust mills and other estate planning scams. Here are some red flags:

- Living trust mills' sales agents are usually not attorneys and not experts in estate planning.
- Be wary of companies that sell trusts and also try to sell annuities or other investments.
- Living trust mills' sales agents don't disclose possible adverse tax consequences or early withdrawal penalties incurred when transferring stocks, bonds, certificates of deposit or other investments to annuities.

If you feel you've been the victim of estate planning fraud, report the incident to your local district attorney's consumer fraud unit and to the California Department of Insurance. You can also file complaints online at the OAG website.

www.oag.ca.gov.



trust is not subject to probate, a pour-over will is. This may seem to negate one of the important benefits of having a living trust. However, if you've set up your trust properly, you've already transferred your large and most valuable assets to the trust before death. All that should be left for the pour-over will are minor-value assets.

Which one?

What type of estate plan you choose should depend on your preferences and circumstances.

In general, a living trust is more expensive to set up than a will; the cost depends on the complexity and size of your assets and investments, as well as where you live. *Kiplinger's Personal Finance* magazine states that an estate plan that includes a trust costs \$1,000 to \$3,000, versus \$300 or less for a simple will.

Unfortunately, California doesn't use the Uniform Probate Code, which can help simplify the probate process. So if your estate is complex, it may be worthwhile to go with a living trust and avoid the State's probate process. However, be aware that

California does have a simplified probate process for small estates (under \$150,000); in that case, you may want to opt to use a will. This process can be helpful for your pour-over will: If your assets are under the \$150,000 threshold, then you can take advantage of this faster, simpler probate process.

Although estate size and complexity are two important factors to consider when deciding whether to go

with a will or a living trust, consult a qualified estate attorney or other qualified and reputable financial and estate planner on the best choice. Visit the State Bar of California website for a list of certified estate planning specialists referral services: www.calbar. ca.gov/lrs or call the State Bar at (888) 460-7364.

According to the State Bar, other estate planning documents that you should have are a durable power of attorney to allow someone to manage your affairs—financial and legal—if you become incapacitated. You may also want to consider having an advance health care directive, which allows someone to make health care decisions for you if you become ill or incapacitated. In your advance health care directive, you can indicate what your wishes are for decisions such as end-of-life, do not resuscitate (DNR) orders, and organ donation.

Obviously, if you don't have an estate plan, you won't be around to worry about probate and expenses after death—but think about what your loved ones will have to go through. Spare your family a great deal of stress, time, and money by having one in place that works for everyone.



THE RISKS OF DIY BR - CES

There's no denying it—braces are expensive.

According to CostHelper.com, the average cost of braces is \$4,937 without dental insurance, and \$3,407 with dental insurance.

Faced with these kinds of numbers, especially when multiple children in a family need braces, consumers are increasingly turning to do-it-yourself (DIY) measures that, although inexpensive, aren't considered safe and can lead to long-term dental issues and high costs.

"While it's cool to do some things on your own, when it comes to the health of your teeth and gums, the do-it-yourself approach can leave you with very little to smile about," as stated in an American Association of Orthodontists (AAO) 2015 public service announcement video. "Trying to close a gap or straighten your teeth yourself can increase the risk of infection and serious damage to your teeth and gums, including tooth loss. Replacing lost teeth is expensive and a person may require multiple replacements over the course of a lifetime."

DIY ways to straighten your teeth are posted in viral YouTube videos, with people demonstrating and explaining the virtues of closing gaps in teeth using rubber bands, or "gap bands." Other videos show people using items such as paper clips and dental floss. Unfortunately, the possibility of negative consequences is not mentioned during the videos. For example, a rubber band can gradually make its way into your gums, tearing attachments between the tooth and gums and causing permanent tooth loss.

Professionals also warn consumers about mail-order teeth straightening kits. With the kits, consumers are sent materials to take a tooth impression that they then send back to the company.

Next, the mail-order

teeth aligners and treatment plan are sent back to the consumer. Professionals stress that safe and effective orthodontics requires regular visits and supervision by a trained and qualified orthodontist; it's not a one-time shot.

But what do you do if you can't afford orthodontics? Because of the costs involved, most orthodontists will offer flexible payment plans. Lower-cost treatments may also be available at orthodontics schools. Another option is the AAO Donated Orthodontic Services (DOS) Program, which will expand nationally this year to be available in every state; right now, it's only offered in Tennessee, Virginia, North Carolina, Michigan, Illinois, Indiana, Kansas, New Jersey, and Rhode Island. The DOS program will be administered by Dental Lifeline Network and will work with AAO. Through the program, time and services will be donated by qualified orthodontists, and low-income children will receive orthodontic care at no cost. Visit the AAO website at www.aaoinfo.org to learn more.

"This isn't like home remodeling where if you get into trouble, you can always call a professional later," says Dr. Brent Larson, trustee for the Midwestern Society of Orthodontists, in an April 2016

AAO release. "DIY fixes may seem like an inexpensive alternative, but unfortunately the adage holds up: You get what you pay for."

Take the time to choose a professional who is experienced, licensed, and qualified.

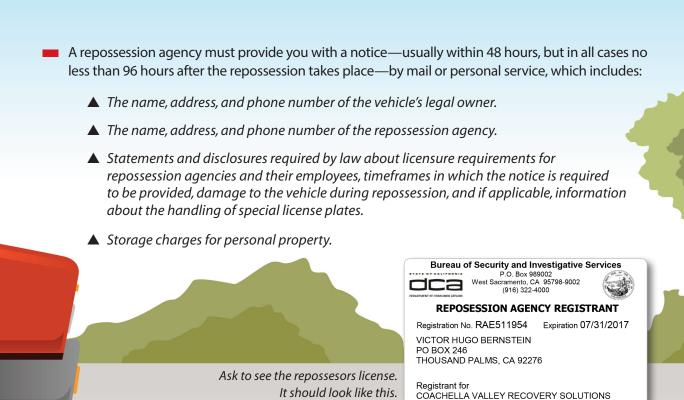
Orthodontists are licensed by the Dental Board of California (Board), and you can check the status of a license on the Board's website, www.dbc.ca.gov.



Falling behind on car payments, possibly due to losing a job or unforeseen medical expenses, may put you in the position of facing repossession.

Many of the activities before, during, and after repossession are regulated by state and federal laws, with the Department of Consumer Affairs' Bureau of Security and Investigative Services (BSIS) overseeing repossession agencies and employees statewide. Consumers should be aware of several factors if their vehicle is repossessed:

- A repossession agent can repossess your vehicle whether or not you're present.
- A repossession agent cannot enter private property or a locked, enclosed area without the consent of the property owner or a lessor/renter of an owner to repossess a vehicle.
- Consumers have a right to request proof that the individual carrying out the repossession is licensed as a repossession agency, qualified manager, or agent.
- A repossession agent is not required to allow a consumer to remove personal property from the vehicle at the time of repossession. However, it is not prohibited—consumers should ask to remove their personal property from the vehicle. In addition, the repossession agent must inventory all personal items found in the vehicle and store the personal property for a minimum of 60 days.
- A repossession agency can discard any personal items not claimed after 60 days, but must keep the inventory list along with information on how the items were disposed of on file for four years.



License No. 1528

See reverse for expiration information

Receipt No

In some cases, a bank, financial lender, or other legal owner will send their own employees to recover the vehicle. These employees are not mandated to be licensed as repossession agency employees.

A licensed repossession agency must display its license number or its business name, address, and phone number on both sides of its tow vehicle. Also, a licensed repossession agent must notify local law enforcement within one hour of repossessing a vehicle. If contact is not made, continued attempts are required until the repossession is recorded with the local agency. Written notice to local law enforcement must also be made within one business day of the repossession.

BSIS has no jurisdiction over whether the vehicle's legal owner will reinstate a consumer's vehicle contract. For reinstatement, consumers need to provide the repossession agency a release from the legal owner stating that the consumer can redeem the vehicle, and show proof of having paid the administrative filing fee (\$15–\$20) to the police or sheriff's office where the repossession was reported.

While the vast majority of repossession cases involve vehicles, any personal property subject to a security agreement—furniture, appliances, jewelry, etc.—can be repossessed.

To verify a repossession agency license or employee registration, visit **www.breeze.ca.gov** and click on "Verify a License."

Complaints against a repossession agency or employee can also be made at **www.breeze.ca.gov** by clicking on "File a Complaint."

DCA's New Consumer Publications

All of the following new publications are available online. For printed copies to be mailed out at no charge, call the Publications Hotline at (866) 320-8652 and leave your name and mailing address and the name of the publication you would like mailed.

Orders can also be placed online at www.dca.ca.gov/publications/publications_list.pdf.

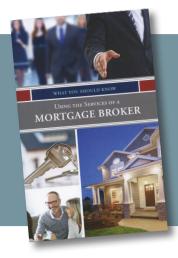
From the California Bureau of Real Estate

Consumer Recovery Account

http://bre.ca.gov/files/pdf/re3.pdf

The newly updated *Consumer Recovery Account* brochure outlines how a person who was defrauded by a real estate licensee in a transaction requiring a license and who satisfies specific requirements can recover all or a portion of his or her loss when the licensee lacks personal assets to pay for the loss. It details the requirements a consumer must meet as well as how to file an application for payment.





Using the Services of a Mortgage Broker

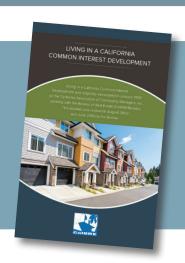
www.dre.ca.gov/files/pdf/re35a.pdf

This 36-page revised booklet covers a wide range of topics for consumers relating to mortgage brokers. Among the topics covered are commissions and lender fees; defining points, a yield spread premium, and loan lock; a detailed overview of the loan process; paying off a balloon payment loan; and how to decide the length of a loan term. It also features cautionary advice about avoiding predatory lending and the importance of knowing what you can afford.

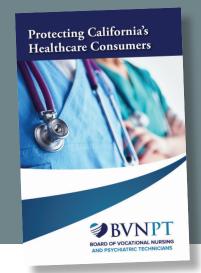
Living in a California Common Interest Development

http://www.dre.ca.gov/files/pdf/re39.pdf

This booklet provides general information in response to some of the more frequently asked questions regarding living in a common interest development—such as single-family detached housing communities, townhomes, and multistory high rises. It discusses Covenants, Conditions, and Restrictions (CC&Rs); governing bylaws; homeowners associations; and the responsibilities of a board of directors.



From the Board of Vocational Nursing and Psychiatric Technicians



Protecting California's Healthcare Consumers

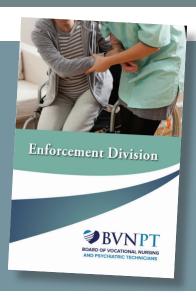
http://bvnpt.ca.gov/pdf/protecting_consumers.pdf

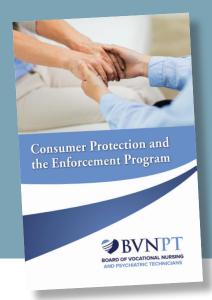
The Board of Vocational Nursing and Psychiatric Technicians' (BVNPT's) new brochure discusses how the Board sets educational standards, licenses applicants, and takes legal action against behaviors that put patients at risk. Learn also about how the more than 130,000 VNs and 15,000 PTs in the State provide services in a variety of healthcare settings, including skilled nursing, residential mental health, and residential care facilities.

Enforcement Division

http://bvnpt.ca.gov/pdf/enforcement_division.pdf

If you feel your VN or PT acted in an unsafe or unprofessional manner, BVNPT's Enforcement Division may be able to help. BVNPT's new publication gives important information about the enforcement process and potential outcomes of disciplinary actions.





Consumer Protection and the Enforcement Program

http://bvnpt.ca.gov/pdf/consumer_protection.pdf

Understand your rights when it comes to the healthcare services provided by VNs and PTs. This new BVNPT publication also details its complaint process and the different types of violations for which VNs and PTs may be disciplined.



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