

TELEHEALTH COMMITTEE MINUTES

1	
2	
3	
4	DATE December 8, 2022
5	
6	MEETING PLATFORM WebEx Video/Phone Conference
7	
8	TIME 9:00 a.m.
9	
10	ATTENDEES
11	Members Present: Christopher (Chris) Jones, Chair, LEP Member
12	Susan Friedman, Public Member
13	Kelly Ranasinghe, Public Member
14	
15	Members Absent: <i>All members present</i>
16	
17	Staff Present: Steve Sodergren, Executive Officer
18	Marlon McManus, Assistant Executive Officer
19	Rosanne Helms, Legislative Manager
20	Christina Kitamura, Administrative Analyst
21	Sabina Knight, Legal Counsel
22	
23	Other Attendees: Public participation via WebEx video conference/phone
24	conference
25	
26	

1 **I. Call to Order and Establishment of Quorum**

2
3 Chris Jones, Chair of the Telehealth Committee (Committee) called the
4 meeting to order at 9:00 a.m. Roll was called, and a quorum was established.
5

6 **II. Introductions**

7
8 Committee members, Board staff, and remote public attendees introduced
9 themselves.
10

11 **III. Consent Calendar: Discussion and Possible Approval of June 3, 2022**
12 **Committee Meeting Minutes**

13
14 Motion: Approve the June 3, 2022 Committee Meeting Minutes as amended.

15
16 M/S: Ranasinghe/Friedman

17
18 Public Comment: None

19
20 Motion carried. Support: 3 Oppose: 0 Abstain: 0
21

Board Member	Vote
Friedman	Yes
Jones	Yes
Ranasinghe	Yes

22
23 **IV. Overview of the Committee’s Roles and Tasks**

24
25 The Committee members and stakeholders have discussed the following:
26

- 27 • Future topic areas for Committee discussion.
- 28 • The Board’s existing statutes and regulations related to telehealth.
- 29 • Laws of several other states that pertain to temporary practice across state
30 lines.
- 31 • Having a baseline telehealth coursework requirement, which was signed
32 into law via AB 1759.
- 33 • Clarification of telehealth laws for associates and trainees, which was
34 signed into law via AB 1759.
- 35 • Allowing supervision via videoconferencing in all settings, which was signed
36 into law via AB 1758.
- 37 • Development of a telehealth best practices document. Discussion
38 continues on this topic.
39

1 **V. Discussion and Possible Recommendation Regarding Online-Only**
2 **Therapy Platforms and Other Alternative Modes of Therapy**
3

4 A discussion took place regarding whether online-only therapy platforms and
5 alternative methods of therapy pose any new public protection concerns.
6

7 Committee/Staff Discussion

8 The following concerns raised by the Committee and public:

- 9
- 10 • Interaction between online therapy platforms and the continuity of care law;
 - 11 • Educating consumers who are seeking online therapy regarding oversight of
California licensed therapists and where to file complaints;
 - 12 • Lack of clinical oversight or leadership;
 - 13 • Text-based care;
 - 14 • Standards of practice.
- 15

16 The Committee directed to staff to:

- 17
- 18 • Work on educating consumers (outreach);
 - 19 • Begin discussions with the legislature regarding regulation of online platform
entities;
 - 20 • Draft a survey for licensees and associates and bring it back to the
21 Committee.
- 22

23 **VI. Discussion and Possible Recommendation Regarding Business and**
24 **Professions Code Sections 4980.31, 4980.44, 4989.48, 4996.7, and**
25 **4999.70, and California Code of Regulations Title 16, Sections 1811 and**
26 **1815.5: Required Display of License or Registration**
27

28 Two options were presented that would update the law requiring a licensee or
29 registrant to display their license or registration certificate in their primary place
30 of practice.
31

32 • **Option 1:**

33 *A licensee or registrant shall display his or her their license or registration in*
34 *a conspicuous place in the licensee's their primary place of practice. If*
35 *practice is via telehealth, display of the license or registration is not*
36 *required, but the license or registration number shall be provided to the*
37 *client in compliance with board regulations.*
38

- 39 • **Option 2:** Require all licensees and registrants to either provide their
40 license or registration number, or to provide a copy of their license or
41 registration certificate, upon initiation of psychotherapeutic services. If the
42 Board chooses to do this, it may also reasonably choose to delete or amend
43 the sections in statute requiring the display of the license in a conspicuous
44 place in the primary place of practice.

1 Jones preferred Option 1. Friedman did not favor Option 1.

2
3 Public Comment

- 4 • Regardless of which option is chosen, the requirement should be consistent
- 5 between in-person and telehealth.
- 6 • Ensuring that clients have access to the provider’s licensure information is
- 7 most important.
- 8 • Allow the licensee to decide how they will display their license/provide
- 9 licensure information.
- 10 • The license display requirement is problematic in terms of privacy.
- 11 Suggested that licensure information is provided alongside the requirement
- 12 to provide notice of complaint process.
- 13

14 Committee/Staff Discussion

- 15 • Add an additional sentence to the notice provided to the client, stating the
- 16 name, license type and license number of the provider.
- 17 • Provide name and license number to the client upon providing services.
- 18 Doesn’t matter how it’s presented.
- 19

20 The Committee directed staff to draft language to require the licensee/associate

21 provide their license or registration number and expiration date to clients upon

22 initiation of each service provided, as well as to include it on the informed

23 consent.

24

25 **VII. Discussion and Possible Recommendation Regarding Telehealth Best**

26 **Practices Guidance Document**

27

28 At its last meeting on June 3, 2022, the Committee suggested that the Board’s

29 best practice document for telehealth should present a broad overview of best

30 practices and should highlight ethical guidelines to consider when providing

31 service through telehealth. Staff was directed to continue developing the

32 guidance document.

33

34 The goal of the Board’s document is to help employers and supervisors better

35 assess acceptable work settings and conditions for telehealth and to clarify the

36 expectations for all parties utilizing telehealth. Board staff believes it would be

37 best to present telehealth best practices in two documents: one document

38 focusing on the use of videoconferencing for supervision and another focusing

39 on the general use of telehealth when delivering services.

40

41 The following draft documents were presented:

- 42 1. Document 1: Best Practices for Utilizing Videoconferencing in Supervision
- 43 2. Document 2: Best Practices when Utilizing Telehealth to Deliver Services
- 44

1 Committee/Staff Discussion

2 Jones: One important item that stood out is regarding crisis situations when a
3 supervisor is not physically present to walk the supervisee through the
4 situation.

5
6 Ranasinghe: Suggested including language in the 2nd document on platforming
7 when utilizing telehealth as an independent contractor inside of a platform
8 versus doing it on one's own platform

9
10 Public Comment

11 Dr. Leah Brew: The Board should consider creating three documents. One
12 would be a broad supervision best practices document (regardless of modality),
13 which would be a large labor-intensive project, which could be done with the
14 assistance of the associations. The next would be tele-mental health and tele-
15 supervision as two separate documents. Those documents would need to be
16 reviewed annually to ensure that they are up to date. Does not recommend
17 that any information regarding particular platforms should be included.

18
19 Dr. Ben Caldwell:

- 20 • Expressed concern that these documents will worsen existing confusion
21 about what telehealth practices are mandated versus what is recommended.
22 Although they are recommendations, they will be interpreted as mandates
23 because it's coming from BBS.
- 24 • The supervision document contains language of recommended, need to, and
25 should.
- 26 • Encouraged the Board to narrow the scope of this project to clarifying the
27 existing telehealth regulation that requires therapists utilizing telehealth to us
28 industry best practices to ensure client confidentiality and the security of the
29 communication platform.

30
31 Cathy Atkins, California Association of Marriage and Family Therapists
32 (CAMFT): These documents are needed but it is a very gray area. Agrees that
33 the associations should work with BBS on this project.

34
35 Jon Swanson: It will be helpful if the various modalities are addressed
36 considering both initial diagnostic evaluations and follow-up treatment, so both
37 licensees and supervisors understand the appropriate use of telehealth for initial
38 and follow-up visits.

39
40 Committee/Public Discussion

41 The Committee encouraged staff to be mindful about how deep this could get as
42 to not lose focus on the intent of the document.

43
44 Sodergren: Suggested focusing on an in-depth FAQ concerning current
45 regulations and statutes and refer to the best practice documents.

1 The Committee liked the FAQ idea. Staff will continue to work with Dr. Brew to
2 develop the documents.

3
4 **VIII. Suggestions for Future Agenda Items**

5
6 Ranasinghe: Requesting an inquiry regarding therapy being conducted in the
7 online gaming environment. Is this something that BBS needs to follow?

8
9 **IX. Public Comment for Items not on the Agenda**

10
11 None

12
13 **X. Adjournment**

14
15 The Committee adjourned at 10:56 a.m.