



## TELEHEALTH COMMITTEE MINUTES

This committee meeting was webcasted. A record of the webcast is available at the following link: [https://www.youtube.com/watch?v=u\\_kwMcvPB\\_M](https://www.youtube.com/watch?v=u_kwMcvPB_M).

**DATE** June 8, 2023

**MEETING PLATFORM** WebEx Video/Phone Conference

**TIME** 9:30 a.m.

### ATTENDEES

**Members Present:** Christopher (Chris) Jones, Chair, LEP Member  
Susan Friedman, Public Member  
Kelly Ranasinghe, Public Member

**Members Absent:** *All members present*

**Staff Present:** Steve Sodergren, Executive Officer  
Marlon McManus, Assistant Executive Officer  
Rosanne Helms, Legislative Manager  
Christina Kitamura, Administrative Analyst  
Sabina Knight, Legal Counsel  
Christy Berger, Regulatory Analyst

**Other Attendees:** Public participation via WebEx video conference/phone conference

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

Chris Jones, Chair of the Telehealth Committee (Committee) called the meeting to order at 9:38 a.m. Roll was called, and a quorum was established.

**2. Introductions**

Committee members, Board staff, and remote public attendees introduced themselves.

**3. Consent Calendar: Discussion and Possible Approval of March 16, 2023 Committee Meeting Minutes**

Motion: Approve the March 16, 2023 Committee Meeting Minutes.

M/S: Ranasinghe/Friedman

Public Comment: None

Motion carried. Support: 3 Oppose: 0

Board Member	Vote
Friedman	Yes
Jones	Yes
Ranasinghe	Yes

**4. Overview of the Committee’s Roles and Tasks**

The Committee members and stakeholders have discussed the following:

- Future topic areas for Committee discussion.
- The Board’s existing statutes and regulations related to telehealth.
- Laws of several other states that pertain to temporary practice across state lines. A temporary practice allowance has been approved to run as legislation as AB 232.
- Telehealth coursework requirement, which was signed into law via AB 1759.
- Clarification of telehealth laws for associates and trainees, which was signed into law via AB 1759.
- Allow supervision via videoconferencing in all settings, which was signed into law via AB 1758.
- Discussion of online-only therapy platforms and other alternative modes of therapy. Discussion will continue.
- Development of a telehealth best practices document. Documents approved at the last meeting; web posting is in process.

## 5. Discussion and Possible Recommendation Regarding Online-Only Therapy Platforms Survey Results

A survey was released to licensees and associates who have experience working for online-only therapy platforms and alternative methods of therapy. The survey was conducted between April 10<sup>th</sup> through May 15<sup>th</sup>. The results were presented and discussed.

### Committee Discussion

Ranasinghe: Concerns expressed: 1) 40% of clinicians on an online platform state that the platform does not provide an emergency response plan. 2) 70% indicated that the platform handled the informed consent agreement. 3) 82% stated that the platform is serving as a custodian of records. 4) Platforms are matching clinicians with people that are out-of-state. Wants to see regulation of the platforms. Wants representative from the platforms to come before the board to testify in response to the results of the survey.

Jones: Encouraged by the fact that majority of services are done online with video, and that there is very little texting.

Friedman: Expressed concern that there is no guidance for suicide.

Sodergren: The Board cannot regulate the platforms and those businesses. The Board can only regulate the therapist's license.

Friedman: Disagreed that the Board only regulates therapists. The Board must speak with the platforms to express "how things are supposed to be."

Jones: Reiterated that the Board does not have the authority to tell the platforms how to run their business; the Board governs the therapists.

After further discussion about holding the online platforms responsible for the concerns outlined, staff offered to seek legislative guidance and discuss concerns regarding the platforms.

### Public Comment

Karen Kochenburg: The emergency plan is the responsibility of the therapist. Believes that these platforms are cashing in on mental health needs, and they're not supporting the therapists sufficiently.

Dr. Leah Brew: It is the responsibility of the therapist to have an emergency plan, not the platform. As for advocacy, suggested that Mr. Sodergren attend the American Association of State Counseling Boards (AASCB) meetings, and the equivalent organizations for social work and marriage and family therapy, and tackle this issue at the state board perspective. If the board makes it clear that

the licensee is responsible, then licensees should not use platforms where they cannot ensure that they're practicing legally and ethically.

Alain Montgomery, California Association of Marriage and Family Therapists (CAMFT): Expressed CAMFT's concerns: 1) Echoes concerns that have been mentioned. 2) Text-based services and the efficacy of that modality. 3) Platform that offer 24/7 text message accessibility to mental health providers and the impacts that may have on the therapeutic boundaries. 3) Addressed emerging issues that providers have an interest in ChatGPT and generative AI; concerns about the standard of care surrounding those practices and how that aligns with a provider's obligation to utilize their clinical and professional judgments. 4) Whether platforms are following California law, hiring practices, and making the appropriate disclosures to consumers.

Janet Delancy: The fact that there are very few complaints regarding online platforms should be taken at face value. Clients are finding that these platforms are helpful and does not see a dire sense of urgency.

#### Action

Helms recommendations: 1) Staff will reach out to representatives at the legislature, share the results of the survey, and request feedback. 2) Consider drafting a letter to the online platform companies to express the board's concerns. Helms will provide an update at the next Committee meeting.

## **6. Discussion and Possible Recommendation Regarding the Social Work Interstate Compact and the Counseling Interstate Compact**

Sodergren presented an overview of the licensure compacts under consideration by other states for the practice of social work and clinical counseling. He also provided a brief overview of the endorsement process that the Board currently has in place for out-of-state licensed marriage and family therapists, licensed clinical social workers, and licensed professional clinical counselors.

A list of staff concerns regarding interstate compacts were provided. Based on those concerns, staff does not recommend joining the compact but recommends monitoring the compacts.

#### Committee Discussion

Jones: Shares the same concerns expressed by Board staff.

Ranasinghe: Agreed with Sodergren and board staff. Also has concerns that therapists practicing conversion therapy will not abide by California laws.

Friedman: Agrees with staff's recommendation.

## Public Comment

Rebecca Gonzales, National Association of Social Workers, California Chapter (NASW-CA): NASW-CA has concerns that the states involved in the compact are utilizing the ASWB exam, which is in question due to the racial disparities and fairness of the exam. For this reason, NASW-CA would caution into entering a compact at this time.

Denise Tugade: Echoed concerns stated by Sodergren, and expressed the need for cultural competency and ensuring that behavioral health professionals are aligned with the values of California.

Dr. Brew: There were 525 bills in the last year in 41 states that discriminate against LGBTQ community and the counselor education programs. They are not allowed to teach appropriate diversity and accurate history. There are practitioners who have not been appropriately trained in culture and diversity. Considering that public protection is the board's jurisdiction, and with these discriminatory laws, she supports not taking a "wait-and-see" approach and not joining the compact.

Janet Delancy: Agrees that cultural competencies are important but feels that California therapists should be able to treat consumers in other states. Stated that it is very concerning that the Board would make a decision to not do this based on politics.

Gonzales, NASW-CA: NASW-CA shares concerns that practitioners are culturally competent and adhere to laws in California, and that therapists should be culturally competent to treat California consumers.

## Action

The committee will wait and watch. No action was taken.

## **7. Suggestions for Future Agenda Items**

Ranasinghe: Update from Helms regarding her discussion with representatives of the legislature regarding online platforms.

## **8. Public Comment for Items not on the Agenda**

None

## **9. Adjournment**

The Committee adjourned at 11:04 a.m.