

Department of Consumer Affairs
Veterinary Medical Board

Department of Consumer Affairs
1747 N. Market Blvd.
1st Floor Hearing Room
Sacramento, California

Wednesday, August 29, 2018
10:00 a.m.

Thursday, August 30, 2018
9:00 a.m.

Board Members

Cheryl Waterhouse, DVM, President
Richard Sullivan, DVM, Vice President
Jaymie Noland, DVM
Mark Nunez, DVM
Jennifer Loredo, RVT
Kathy Bowler, Public Member
Judie Mancuso, Public Member
Alana Yanez, Public Member

Executive Officer

Jessica Sieferman

1747 North Market Blvd., Ste 230 • Sacramento, CA 95834 • www.vmb.ca.gov
916-515-5220 • 916-928-6849 (Fax)

Board Members

Cheryl Waterhouse, DVM, President
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Alana Yanez

Veterinary Medical Board

1747 N. MARKET BOULEVARD, SUITE 230, SACRAMENTO, CA 95834
TELEPHONE: 916-515-5220 FAX: 916-928-6849 | WWW.VMB.CA.GOV



**2nd AMENDED QUARTERLY MEETING AGENDA
August 29-30, 2018
and NOTICE OF TELECONFERENCE
August 29, 2018**

Main Meeting Location:
Department of Consumer Affairs
1747 N. Market Blvd.
1st Floor Hearing Room
Sacramento, California 95834

**Additional location via teleconference on
Wednesday, August 29, 2018:**
The Pets for Life Facility
2940 E. 1st Street
Los Angeles, CA 90033

***ACTION MAY BE TAKEN ON ANY ITEM
ORDER OF ITEMS SUBJECT TO CHANGE***

10:00 a.m. Wednesday, August 29, 2018

1. Call to Order/Roll Call/Establishment of a Quorum
2. Introductions
3. Review and Approval of May 23-24, 2018 Board Meeting Minutes
4. Report and Update from Department of Consumer Affairs
5. Multidisciplinary Advisory Committee (MDC) Report – Dr. Jeff Pollard
 - A. Review, Discussion, and Possible Board Action on MDC Items and Recommendations ([MDC Agenda](#))
6. Update, Discussion, and Possible Action on Proposed Regulations:
 - A. Status of Pending Regulations
 - B. Amend Sections [2030-2030.5](#), Article 4, Division 20, Title 16 of the California Code of Regulations (CCR) Regarding Minimum Standards for Veterinary Premises/Practices
 - C. Amend Sections [2032.15](#) and [2032.25](#), Article 4, Division 20, Title 16 of the CCR Regarding Veterinarian-Client-Patient Relationships (VCPRs).
 - D. Amend Sections 2036.1, [2064](#), [2065](#), 2065.1, 2065.2, [2065.6](#), [2065.7](#), [2065.8](#), [2066](#), and [2068.5](#) of Article 6, Division 20, Title 16 of the CCR Regarding Registered Veterinary Technician (RVT) School Approval and RVT Student Exemption
 - E. Amend Section [2006](#), Article 1, Division 20, Title 16 of the CCR Regarding Board [Disciplinary Guidelines](#)

MISSION: To protect consumers and animals by regulating licensees, promoting professional standards, and diligent enforcement of the California Veterinary Medicine Practice Act.

7. 2018 Legislation Report; Possible Action to Adopt Positions on Legislative Items:
 - A. AB [710](#) (Wood, Chapter 62, Statutes of 2018) Cannabidiol
 - B. AB [1753](#) (Low, 2018) Controlled substances: CURES database
 - C. AB [1776](#) (Steinorth, 2018) Emergency medical transport of police dogs: pilot project
 - D. AB [2138](#) (Chiu, 2018) Licensing boards: denial of application: revocation or suspension of licensure: criminal conviction
 - E. AB [2215](#) (Kalra, 2018) Cannabis: veterinarians: animals
 - F. AB [2300](#) (Maienschein, 2018) Continuing education: veterinarians
 - G. AB [2362](#) (Rubio, 2018) Safe transportation of dogs and cats
 - H. AB [2483](#) (Voepel, 2018) Indemnification of public officers and employees: antitrust awards
 - I. AB [2589](#) (Bigelow, Chapter 81, Statutes of 2018) Controlled substances: human chorionic gonadotropin
 - J. AB [2958](#) (Quirk, 2018) State bodies: meetings: teleconference
 - K. AB [3013](#) (Chu, 2018) Veterinary medicine: animal physical rehabilitation
 - L. SB [1305](#) (Glazer, 2018) Emergency medical services providers: dogs and cats
 - M. SB [1480](#) (Hill, 2018) Professions and vocations
 - N. SB [1491](#) (Committee on Business, Professions and Economic Development, 2018) Healing arts

8. Discuss and Possible Action on Amendments to the Board and Committee Member Administrative Procedure Manual

9. Discussion and Possible Action on American Association of Veterinary State Boards (AAVSB) Resolution 2018-1 and Practice Act Model Changes

10. Board President Report – Dr. Cheryl Waterhouse

11. Discuss and Possible Action on Office of Professional Examination Services Review Report Regarding Veterinary Technician National Examination Validation and Occupational Analysis– Heidi Lincer, Chief, Office of Professional Examination Services, Department of Consumer Affairs

12. Executive Officer & Staff Reports
 - A. Administrative/Budget
 1. Review and Possible Action on Diversion Program MAXIMUS Participant Costs for Consideration of Fee Increase
 - B. Enforcement
 - C. Licensing/Examination
 - D. Hospital Inspection
 - E. 2015-2019 Strategic Plan Objectives Update
 - F. DCA Internal Audits

13. Public Comment on Items Not on the Agenda

VISION: An environment in which Californians have access to high-quality veterinary care for all animals.

Note: The Board may not discuss or act on any matter raised during this public comment section, except to decide whether to place the matter on the agenda of a future meeting. (Government Code Sections [11125](#), [11125.7\(a\)](#).)

14. Future Agenda Items

15. Recess until August 30, 2018 at 9:00 a.m.

9:00 a.m. Thursday, August 30, 2018

16. Reconvene - Establishment of a Quorum

17. Introductions

18. Special Order of Business

- A. Petition for Modification of Penalty – Jessica Salgado, RVT, Registration No. [11644](#)
- B. Petition for Modification of Penalty – Meaghan Speers, RVT, Probationary Registration No. [12121](#)
- C. Petition for Modification of Penalty – Jeffrey Hare, DVM License No. [21564](#)

CLOSED SESSION

19. Pursuant to Government Code Section [11126\(c\)\(3\)](#), the Board Will Deliberate on the Above Petitions and Disciplinary Actions.

RETURN TO OPEN SESSION

20. Reconvene Open Session

21. Adjournment

This agenda can be found on the Veterinary Medical Board website at www.vmb.ca.gov. Action may be taken on any item on the agenda. The time and order of agenda items are subject to change at the discretion of the Board President and may be taken out of order. Items scheduled for a particular day may be moved to an earlier or later day to facilitate the effective transaction of business. In accordance with the Bagley-Keene Open Meeting Act, all meetings of the Board are open to the public. This meeting will be webcast, provided there are no unforeseen technical difficulties or limitations. To view the webcast, please visit thedcapage.wordpress.com/webcasts/. The meeting will not be cancelled if webcast is not available. If you wish to participate or to have a guaranteed opportunity to observe and participate, please plan to attend at a physical location. Meeting adjournment may not be webcast if it is the only item that occurs after a closed session.

Government Code section 11125.7 provides the opportunity for the public to address each agenda item during discussion or consideration by the Board prior to the Board taking any action on said item. Members of the public will be provided appropriate opportunities to comment on any issue before the Board, but the Board President may, at his or her discretion, apportion available time among those who wish to speak. Individuals may appear before the Board to discuss items not on the agenda; however, the Board can neither discuss nor take official action on these items at the time of the same meeting (Government Code sections 11125, 11125.7(a)).

VALUES: *Consumer Protection*Integrity*Professionalism*Responsiveness*Transparency*

The meeting locations are accessible to the physically disabled. A person who needs disability-related accommodations or modifications to participate in the meeting may make a request by contacting the Board at (916) 515-5220, email: ymb@dca.ca.gov, or send a written request to the Veterinary Medical Board, 1747 N. Market St., Suite 230, Sacramento, CA 95834. Providing your request at least five (5) business days prior to the meeting will help ensure availability of the requested accommodations. TDD Line: (916) 326-2297.

VISION: An environment in which Californians have access to high-quality veterinary care for all animals.

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MEETING MINUTES VETERINARY MEDICAL BOARD

May 23-24, 2018
1747 N. Market Blvd.
1st Floor Hearing Room
Sacramento, California 95834

10:00 a.m. Wednesday, May 23, 2018

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

Dr. Cheryl Waterhouse called the Veterinary Medical Board (Board) meeting to order at 10:01 a.m. Interim Executive Officer, Mr. Ethan Mathes, called roll; eight members of the Board were present, and a quorum was established.

2. Board President's Remarks, Board Member Comments and Introductions

Dr. Waterhouse thanked Mr. Mathes for stepping up as Interim Executive Officer and for all of his hard work. She also informed the Board that there was a minor change to the agenda. During the Multidisciplinary Advisory Committee (MDC) Report in agenda item 5, the Board will also be discussing agenda item 11(B)(3).

Members Present

Cheryl Waterhouse, Doctor of Veterinary Medicine (DVM), President
Richard Sullivan, DVM, Vice President
Jaymie Noland, DVM
Mark Nunez, DVM
Jennifer Loredo, Registered Veterinary Technician (RVT)
Kathy Bowler, Public Member
Judie Mancuso, Public Member
Alana Yanez, Public Member

Staff Present

Ethan Mathes, Interim Executive Officer
Candace Raney, Enforcement Program Manager
Amanda Drummond, Administrative Program Analyst
Tara Welch, Legal Counsel

Guests Present

Stuart Eckmann

Nancy Ehrlich, RVT, California Registered Veterinary Technician Association (CaRVTA)

Valerie Fenstermaker, California Veterinary Medical Association (CVMA)

Cindy Gonzalez, RVT

Paul Hansbury, Lovingly and Legally Grown

Jon Klingborg, DVM, MDC

Kevin Lazarcheff, DVM

Patrick Le, Department of Consumer Affairs (DCA)

Grant Miller, DVM, CVMA

Ken Pawlowski, CVMA

Kristi Pawlowski, MDC

Cindy Savely, RVT, Sacramento Valley Veterinary Technician Association (SVVTA)

Leah Shufelt, RVT, CVMA

Susan Tibbon, Lovingly and Legally Grown

Linda Tripp, RVT, SVVTA and University of California (UC) Davis

Meg Warner, DVM

3. Review and Approval of February 21-22, 2018 Board Meeting Minutes

The Board made minor changes to the February 21-22, 2018 meeting minutes. They requested staff review Board discussion regarding feline declaw before approving the minutes.

The Board voted to approve the minutes on May 24, 2018, after a review of the February webcast had been completed.

- Dr. Richard Sullivan moved, and Dr. Mark Nunez seconded, the motion to approve the minutes as amended. The motion carried 6-0-1. Dr. Jaymie Noland abstained. Ms. Alana Yanez was absent.

4. Review and Approval of March 8, 2018 Board Teleconference Meeting Minutes

The Board made minor changes to the March 8, 2018 meeting minutes.

- Ms. Jennifer Loreda, RVT, moved, and Ms. Kathy Bowler seconded, the motion to approve the minutes as written. The motion carried 6-0-2. Dr. Jaymie Noland and Ms. Alana Yanez abstained.

5. Multidisciplinary Advisory Committee Report – Dr. Jon Klingborg

Dr. Jon Klingborg addressed the Board and updated them on discussions from the MDC meetings from the prior day. He advised that the MDC is still discussing Minimum Standards for Shelter Premises and will continue this item to their next meeting. They discussed RVT duties regarding

dental extractions and determined that the regulations, as written, are working and do not recommend changes to existing regulations. He also reported that he and three other MDC members have termed out, so the MDC elected a new chair, Dr. Jeff Pollard; they will elect a new vice-chair at the August meeting.

Ms. Judie Mancuso raised questions regarding the RVT dental extraction discussion and if the MDC discussed dental radiography protocols. Dr. Klingborg advised that the discussion was solely in regards whether it was appropriate for RVTs to perform dental extractions. After some discussion, the Board decided it was appropriate to investigate the need for developing protocols for dental radiographs after teeth extractions.

- Ms. Judie Mancuso moved, and Ms. Alana Yanez seconded, the motion to delegate to the MDC to investigate developing protocols regarding dental radiographs. The motion carried 8-0.

The Board also discussed California Code of Regulations (CCR) section 2035, Duties of a Supervising Veterinarian, and voted on these proposed regulations. Minutes for this action are documented under agenda item 11(B)(3).

6. Conduct Interviews for the Possible Appointment of Applicants to the Multidisciplinary Advisory Committee

Dr. Waterhouse addressed the Board that there are four vacancies on the MDC; two veterinarian, one RVT and one public member. There is also an RVT position eligible for re-appointment. The Board interviewed Ms. Kristi Pawlowski, who asked to be considered for re-appointment to her RVT position on the MDC.

- Dr. Mark Nunez moved, and Dr. Richard Sullivan seconded, the motion to re-appoint Ms. Kristi Pawlowski to her position on the MDC. The motion carried 8-0.

The Board interviewed Dr. Kevin Lazarcheff and Dr. Margaret Warner for the two vacant veterinarian positions with the MDC.

- Dr. Jaymie Noland moved and Dr. Richard Sullivan seconded the motion to appoint Dr. Kevin Lazarcheff and Dr. Margaret Warner to the two vacant veterinary positions on the MDC. The motion carried 8-0.

The Board interviewed Ms. Leah Shufelt and Ms. Linda Tripp for the vacant RVT position with the MDC.

- Dr. Richard Sullivan moved, and Ms. Judie Mancuso seconded, the motion to appoint Ms. Leah Shufelt to the vacant RVT position on the MDC. The motion carried 8-0.

The Board interviewed Mr. Stuart Eckmann for the vacant public position with the MDC.

- Dr. Richard Sullivan moved, and Ms. Judie Mancuso seconded, the motion to appoint Mr. Stuart Eckmann to the vacant public member position on the MDC. The motion carried 8-0.

7. **2018 Legislation of Interest; Review and Possible Board Action to Adopt Positions on Legislative Bills**

A. **AB 710 (Wood, 2018) Cannabidiol**

Mr. Mathes provided a brief introduction into the bill. Assembly Bill (AB) 710 has passed through Assembly and is currently with the Senate. The bill states that if cannabidiol (CBD) is rescheduled by the federal government and made legal, that veterinarians with a drug enforcement agency (DEA) license would be authorized to prescribe CBD products to patients.

- Dr. Richard Sullivan moved, and Ms. Kathy Bowler seconded, the motion to watch AB 710. The motion carried 7-1-0. Ms. Alana Yanez abstained.

B. **AB 1753 (Low, 2018) Controlled substances: CURES database.**

Mr. Mathes stated that the Board adopted a watch status at the February Board meeting. AB 1753 has since been amended and will no longer limit the number of printers for prescription pads to three, but the bill would require the Department of Justice (DOJ) to limit or reduce the number of printers. The Board agreed to continue with their watch position for this bill.

C. **AB 1776 (Steinorth, 2018) The County of San Bernardino pilot project: Emergency medical transport of police dogs: pilot project.**

Mr. Mathes stated that the Board adopted a watch status at the February Board meeting. AB 1776 has since been amended and will now be a pilot project for San Bernardino county that will still allow for the medical transportation of police and service dogs to veterinary clinics.

- Ms. Judie Mancuso moved and Ms. Jennifer Loreda seconded the motion to update the Board position for AB 1776 from watch to support. The motion carried 6-2. Dr. Richard Sullivan and Dr. Jaymie Noland voted nay.

D. **AB 2138 (Chiu, 2018) Licensing boards: denial of application: revocation or suspension of licensure: criminal conviction.**

Mr. Mathes stated that staff has determined AB 2138 has a fiscal impact of \$95,000 annually and that this bill would significantly and negatively impact how enforcement activities are conducted.

- Dr. Richard Sullivan moved, and Ms. Kathy Bowler seconded, the motion to oppose AB 2138. The motion carried 8-0.

E. [AB 2215 \(Kalra, 2018\) Cannabis: veterinarians: animals.](#)

Dr. Waterhouse updated on the status of AB 2215. At its last meeting, the Board adopted a neither support nor oppose position, and instead voted to work with the bill author, Assemblyperson Kalra to address Board concerns with the bill. Executive staff submitted a letter to Kalra's office and the bill was amended. The bill authorizes a veterinarian to discuss the use of cannabis with client as well as require guidelines to be developed. The Executive Committee had previously adopted a support position for this bill.

The Board and members of the public discussed the various aspects of AB 2215 and expressed their concerns, but ultimately identified that this bill would provide regulation of the cannabis products for pets and would provide a step in the right direction for addressing cannabis usage in pets. Because of the Executive Committee's support position, and the remaining Board members expressing the same sentiment, a motion was not needed as the Board would continue to support this bill.

F. [AB 2300 \(Maienschein, 2018\) Continuing education: veterinarians.](#)

Mr. Mathes updated on AB 2300. This concept was discussed at the February meeting but was not introduced into a bill at that time. AB 2300 would allow for veterinarians to perform pro-bono spay and neuter surgeries to low income neighborhoods and obtain continuing education (CE) credit for that work. The bill was amended from 6 CE credits to allow for 4 CE credits. This bill has passed through Assembly and is currently in the Senate.

The Board discussed the importance of CE and that the veterinarians who likely need CE may be the ones who utilize this provision while not obtaining the needed training and education that traditional CE provides.

- Dr. Mark Nunez moved, and Ms. Kathy Bowler seconded, the motion to oppose AB 2300. The motion carried 8-0.

G. [AB 2362 \(Rubio, 2018\) Safe transportation of dogs and cats.](#)

Mr. Mathes stated that AB 2362 has moved to the Senate and the bill seeks to establish health safety standards by providing heating, cooling ventilation and lighting in vehicles that provide transportation of pets.

- Dr. Richard Sullivan moved, and Dr. Mark Nunez seconded, the motion to watch AB 2362. The motion carried 7-0. Ms. Mancuso recused herself from the vote.

H. **[AB 2409 \(Kiley, 2018\) Professions and vocations: occupational regulations.](#)**

Dr. Waterhouse stated that AB 2409 has failed to pass Assembly and has died and thus does not need a Board position.

I. **[AB 2483 \(Voepel, 2018\) Indemnification of public officers and employees: antitrust awards.](#)**

Legal counsel, Ms. Tara Welch, summarized AB 2483 addresses civil suits against Board members, specifically in regard to antitrust claims when there is a settlement or an award of damages, and states that any court settlement would not be a liability on any one members, but on the Board. This bill has passed from Assembly and is currently with Senate.

- Dr. Richard Sullivan moved, and Ms. Judie Mancuso, seconded the motion to support AB 2483. The motion carried 8-0.

J. **[AB 2589 \(Bigelow, 2018\) Controlled substances: human chorionic gonadotropin.](#)**

Mr. Mathes reviewed AB 2589 which allows veterinarians to purchase, transfer and administer human chorionic gonadotropin (HCG). The Board discussed that this medicine is used primary in large animal practice and this bill would specifically move HCG from DEA Scheduled 3 requirements when purchased by a veterinarian for veterinary purposes.

- Dr. Mark Nunez moved and Dr. Jaymie Noland seconded the motion to support AB 2589. The motion carried 8-0.

K. **[AB 3013 \(Chu, 2018\) Veterinary medicine: animal physical rehabilitation.](#)**

Dr. Waterhouse updated that the Executive Committee adopted an opposed position on AB 3013 and submitted an opposition letter. This bill would create a significant fiscal impact to the Board and mandate that the Board provide accreditation services, inspections, and license physical rehabilitation premises with no veterinary supervision.

Because of the Executive Committee's oppose position, and the remaining Board members expressing the same sentiment, a motion was not needed as the Board will continue to oppose this bill.

L. [SB 1305 \(Glazer, 2018\) Emergency medical services providers: dogs and cats: immunity.](#)

Mr. Mathes stated that Senate Bill (SB) 1305 has moved to Assembly. This bill would authorize certain emergency medical services may be provided to felines and canines, including providing oxygen, bandaging and restricting bleeding.

- Dr. Richard Sullivan moved and Ms. Jennifer Loreda seconded the motion to watch SB 1305. The motion carried 8-0.

M. [SB 1441 \(Stern, 2018\) Animal cruelty: declawing.](#)

Dr. Waterhouse updated the Board that SB 1441 was not reviewed at the last Board meeting due to the language not being introduced until April. The Executive Committee met and adopted an opposed position on this bill based on the belief that a veterinary procedure should not be in the penal code. The bill has since failed to pass through Assembly and has died and thus does not need a Board position.

N. [SB 1480 \(Hill, 2018\) Professions and vocations.](#)

Mr. Mathes stated that SB 1480 is the Board's Committee bill and it is currently held in suspense in the Senate Appropriations Committee . This bill was recently amended to also include drug counseling language that had been previously approved by the Board to promulgate regulations. Language that addresses disciplining a managing licensee and premises owner when the Board takes action against a premises was left out of this bill, and Mr. Mathes stated that he has been in contact with the bill author's office to get that language added.

- Dr. Richard Sullivan moved, and Ms. Kathy Bowler seconded, the motion to support SB 1480. The motion carried 8-0.

O. [SB 1491 \(Committee on Business, Professions and Economic Development, 2018\) Healing arts.](#)

Mr. Mathes stated that SB 1491 is another Committee bill and it is currently in Assembly. This bill would allow for the electronic administration of the Veterinary Law Exam (VLE).

- Dr. Mark Nunez moved and Dr. Jaymie Noland seconded the motion to support SB 1491. The motion carried 8-0.

8. Discussion Regarding American Association of Veterinary State Boards' (AAVSB) Draft Policy on Telehealth; Possible Board Action to Adopt Position or Comment on AAVSB Draft Telehealth Policy

Dr. Sullivan updated the Board that the AAVSB does not have the draft policy available at this time, and since the last meeting staff drafted a response outlining the Board's concerns with the draft telehealth policy language. AAVSB responded that received the letter and they would attempt to pass along the Board's concerns.

Ms. Bowler also noted that the AAVSB received over 280 comments regarding their telehealth language and they are meeting in early June to consider comments and make changes to the draft policy. There is also a special session dedicated to the collect additional input regarding telemedicine at the AAVSB annual meeting in September.

Dr. Sullivan added he is working on getting appointed to the AAVSB's Regulatory Policy Task Force next year.

9. Review and Select Delegate(s) to Represent the Board at the AAVSB Annual Meeting in Washington D.C.

Dr. Waterhouse stated that she is planning on attending the annual meeting in September in Washington D.C. Mr. Mathes added that the requests for traveling out-of-state have been submitted for both Dr. Waterhouse and for the new Executive Officer (EO).

10. Review and Discuss American Veterinary Medical Association (AVMA) Concerns Regarding Federal Drug Administration's (FDA) Proposed Changes to Drug Compounding Guidelines; Possible Board Action to Adopt Position or Comment on FDA Drug Compounding Guidelines

Dr. Richard Sullivan reviewed that the US Pharmacopeia (USP) is a non-profit organization that establishes standards for medication and guidelines for compounding products. The USP standards for compounding were used in part to develop the standards for California veterinary compounding regulations. Dr. Sullivan stated that USP is updating their compounding standards restrict clinicians to perform certain compounding. Dr. Sullivan has contacted the USP to address these concerns. Dr. Sullivan stated he will keep the Board informed as the issue progresses.

11. Proposed Regulations

A. Status of Pending Regulations

Mr. Mathes updated the Board about the status of pending regulations and relayed to the Board that the regulatory packages for Consumer Protection Enforcement Initiative (CPEI), Telemedicine and Fee Schedule have all been submitted to DCA for the initial review process and prior to public notice. He also provided an update to the Board about

how the regulatory process works and identified the 25-step process that a regulatory package must go through before regulation(s) can go into effect.

B. Discussion and Possible Board Action on the following Regulatory Proposals:

1. [Amend Section 2069, Article 6, Division 20, Title 16 of the California Code of Regulations \(CCR\) Regarding Emergency Animal Care to Include a Provision Authorizing Registered Veterinary Technicians \(RVTs\) to Euthanize Animals in an Emergency](#)

The Board previously requested legal counsel provide guidance on the use of the terms “pharmacological agents” or “drugs” in the proposed language. Ms. Welch advised that per Business and Professions Code (BPC) Section 4836.1 the correct term should be “drug(s)” or “controlled substances” rather than “pharmacological agents”. The proposed language has been modified to reflect this, as well as to include an addition to subdivision (b)(3), as voted on at the February Board meeting, and to include BPC 4836.1 in the regulatory reference section.

- Dr. Richard Sullivan moved and Ms. Judie Mancuso seconded the motion to approve the proposed regulatory changes to Section 2069, Article 6, Division 20, Title 16 of the CCR as modified, direct the Executive Officer to take all steps necessary to initiate the rulemaking process, authorize the Executive Officer to make any technical or non-substantive changes to the rulemaking package, notice the proposed text for a 45-day public comment period and if no adverse comments are received during the 45-day comment period and no hearing is requested, adopt the proposed regulatory changes as modified. The motion carried 8-0.

2. [Amend Section 2036, Article 4, Division 20, Title 16 of the CCR Regarding Tasks RVTs may Perform Under Indirect Supervision](#)

Mr. Mathes updated that this issue was brought before the Board at the February Board meeting the Board requested legal counsel look into the history of RVT delegated tasks in regulation. Legal counsel determined that current specific delegated tasks were paired down from an originally larger list. Mr. Mathes did note that there is a numbering issue so if the Board wanted to proceed, they would need to motion to include changes to 2036(b) to correct the numbering.

- Ms. Jennifer Loreda moved and Ms. Kathy Bowler seconded the motion to approve the proposed regulatory changes to Section 2036, Article 4, Division 20, Title 16 of the CCR as modified, direct the Executive Officer to take all steps necessary to initiate the rulemaking process, authorize the Executive Officer to make any technical or non-substantive changes to the rulemaking package, notice the proposed text for a 45-day public comment period and if no adverse comments are received during the 45-day comment period and no hearing is requested, adopt the proposed regulatory changes as modified. The motion carried 8-0.

3. [Amend Section 2035, Article 6, Division 20, Title 16 of the CCR Regarding Supervision Requirements for Veterinarians Delegating Tasks to RVTs](#)

Dr. Jon Klingborg addressed the Board that this Agenda item mistakenly brought to the Board prematurely; the item had failed in a 4-2 vote at the MDC and should have returned to the MDC for further discussion. The Board discussed two versions of the language as presented and expressed support for the proposed language to add specific criteria to the list of verified abilities a supervising veterinarian should attest when delegating an animal health care task.

Legal counsel, Ms. Tara Welch, also suggested other changes to provide clarity to the proposed regulations.

- Ms. Judie Mancuso moved and Dr. Mark Nunez seconded the motion to approve the proposed regulatory changes to Section 2035, Article 6, Division 20, Title 16 of the CCR as modified, direct the Executive Officer to take all steps necessary to initiate the rulemaking process, authorize the Executive Officer to make any technical or non-substantive changes to the rulemaking package, notice the proposed text for a 45-day public comment period and if no adverse comments are received during the 45-day comment period and no hearing is requested, adopt the proposed regulatory changes as modified. The motion carried 8-0.

12. [Public Comment on Items Not on the Agenda](#)

Dr. Waterhouse requested that the Board consider moving the Board and MDC meetings back to a January, April, July and October cycle.

13. [Recess until Thursday, May 24, 2018, at 9:00 a.m.](#)

9:00 a.m., Thursday, May 24, 2018

14. [Reconvene - Establishment of a Quorum](#)

Dr. Waterhouse called the Board meeting to order at 9:04 a.m. Mr. Mathes called roll; seven members of the Board were present and thus a quorum was established. Ms. Yanez was absent.

15. [Introductions](#)

Mr. Dean Grafilo, Director of DCA introduced himself and presented the Board a timeline of the Board's regulatory history in honor of its 125th anniversary of regulated veterinary medicine in California.

Members Present

Cheryl Waterhouse, DVM, President
Richard Sullivan, DVM, Vice President
Mark Nunez, DVM
Jennifer Loreda, RVT
Kathy Bowler, Public Member
Judie Mancuso, Public Member

Staff Present

Ethan Mathes, Interim Executive Officer
Candace Raney, Enforcement Program Manager
Patty Rodriguez, Hospital Inspection Program Manager
Amanda Drummond, Administrative Program Analyst
Tara Welch, Legal Counsel

Guests Present

Christopher Castrillo, Deputy Director, Officer of Board and Bureau Services
Nancy Ehrlich, RVT, CaRVTA
Dean Grafilo, Director DCA
Cindy Gonzalez, RVT
Patrick Le, DCA
Cindy Savely, RVT, SVVTA

16. Board President Report – Dr. Cheryl Waterhouse

Dr. Waterhouse updated the Board regarding the EO interviews and stated that the Executive Selection Committee conducted pre-screening phone interviews and also interviewed five of the six candidates. She also updated the Board regarding working with Assembly Member Kalra's office on AB 2215, as well as sending opposition letters for AB 301 and SB 1441.

17. RVT Report – Jennifer Loreda, RVT

Ms. Nancy Ehrlich expressed concern regarding the Veterinary Technical Notational Exam (VTNE) pass rate statistics and inquired as to the availability of prior statistics. She also asked about the requirements for RVT schools to post their pass rates and to be within 10% of the average pass rate on either the national or the California RVT examinations. The Board discussed and requested staff provide more information on national and State pass rates.

Ms. Loreda also updated the Board that the new version of the VTNE would be available in July and, per the vote yesterday, casting and splinting was moved as a task that RVTs can perform under indirect supervision. Ms. Loreda also requested that the Board look into adding drug compounding as an additional job task that RVTs can perform under CCR section 2036.

18. Executive Officer & Staff Reports

A. Administrative/ Budget

Mr. Mathes updated the Board on the budget. Since the last meeting the Board obtained a mid-year increase to its Attorney General (AG) augmentation due to ongoing AG costs exceeding appropriations. Fee schedule regulations have gone into effect and, since they were emergency regulations, staff is continuing to work on the full rulemaking file to make the regulations permanent.

B. Enforcement

Ms. Candace Raney updated on the enforcement program's status and stated that there will likely be over 1,100 complaints submitted to the Board this year. Board staff is actively monitoring 104 probationers and there are currently 12 petitions to revoke. Ms. Raney also included statistics on complaints and reported that in Fiscal Year (FY) 2012/2013 that there were 400 complaints submitted to the Board, which reflects a drastic increase in the number of complaints that are being currently received. The Board questioned whether it was only this Board seeing an increase in complaints and requested staff research and provide other DCA board statistics on number of complaints submitted and any increases to complaint volume.

C. Licensing/ Examination

Mr. Mathes updated the Board on the status of the examinations and licensing and that Veterinary Assistant Controlled Substance Permit (VACSP) applications continue to be submitted at a high volume. He also reported that the RVT/AAVSB RVT job analysis and the report from the Office of Professional Examination Services (OPES) is nearly complete and should be available for the August meeting.

D. Hospital Inspection

Ms. Patty Rodriguez updated the Board regarding the hospital inspection program. Program inspections have been suspended since November of 2017 due to a lack of funds and total inspections are estimated to be approximately 12% of total veterinary premises inspected for FY 2017/2018. She also updated that staff are currently recruiting inspectors and inspections will resume in August.

19. Future Agenda Items and Next Meeting Dates –

A. Agenda Items for Next Meeting –

1. Agenda Items for Next Board Meetings

- Diversion Evaluation Member Appointments
- RVT Drug Compounding
- Corporate Practice of Veterinary Medicine

- DEA facility license
- Review Board Admin Procedures Manual:
 - MDC Term Limits
 - Voting for MDC members/Board
 - Re-appointment to Board
- OPES Job Analysis and Exam Study
- Review MAXIMUS Diversion Program Costs
- Legislation Updates
- National Drug Compounding Policy Update
- Rodeo Injury Reporting to Date
- RVT Average Pass Rates
- Minimum Standards for Premises – delegated from MDC
- Increase in complaints and complaint trends

The next Board meeting will be August 29-30, 2018 in Sacramento. The following Board meeting will be November 14-15, 2018 in Sacramento.

B. **Multidisciplinary Advisory Committee Meetings –**

1. Items Delegated to the MDC:
 - Possible regulatory discussion on pet ambulances
 - Dental radiology standard of care

The next MDC meeting is tentatively scheduled August 28, 2018 in Sacramento but may be moved to August 21, 2018 due to scheduling conflicts. The final date will be posted on the website.

CLOSED SESSION

20. Pursuant to Government Code Section 11126(c)(3), the Board Will Meet in Closed Session to Deliberate and Vote on Disciplinary Matters, Including Stipulations and Proposed Decisions.

In the Matter of the Accusation Against Amy Louise Frazee, DVM applicant – Board Case No. 4602018000540

The Board rejected the stipulated settlement and submitted a counter offer.

In the Matter of the Accusation Against Deborah Sylvia Proctor, DVM, and Dr. Deb’s House Calls and Consulting Service – Board Case No. 1002012115

The Board adopted the stipulated settlement.

In the Matter of the Accusation Against Luis Miguel Aldaco, RVT Applicant - Board Case No. 4602018000188

The Board adopted the Proposed Decision with minor and technical corrections.

In the Matter of the Accusation Against Marie Ann Delgado, VACSP Applicant - Board Case No. 4602018000142

The Board adopted the Proposed Decision with minor and technical corrections.

In the Matter of the Accusation Against Vallard Forsythe, DVM and Altimira Veterinary Hospital - Board Case No. 1002460791

The Board adopted the Proposed Decision with minor and technical corrections.

In the Matter of the Accusation Against Margarita Belen Peraza, VACSP Applicant- Board Case No. 4602018000141

The Board moved to non-adopt the Proposed Decision.

21. Pursuant to Government Code Section 11126(a)(1), the Board Will Meet in Closed Session to Conduct Interviews and Possible Appointment of Executive Officer.

The Board conducted interviews and selected a candidate for the Executive Officer position.

RETURN TO OPEN SESSION

22. Reconvene Open Session

Open Session reconvened at 4:05 p.m.

23. Report on Actions Taken During Close Session Regarding Executive Officer Appointment

Dr. Waterhouse reported that during closed session pursuant to Government Code section 11126(a)(1), the Board selected a candidate for the Executive Officer position.

24. Adjournment

- Dr. Richard Sullivan moved, and Ms. Kathy Bowler seconded, to adjourn the meeting.

The meeting adjourned at 4:06 p.m.



MEETING NOTICE and AGENDA MULTIDISCIPLINARY ADVISORY COMMITTEE

Committee Members

Jeff Pollard, DVM, Chair
Allan Drusys, DVM
Kevin Lazarcheff, DVM
Margaret Warner, DVM
Kristi Pawlowski, RVT
Leah Shufelt, RVT
Stuart Eckmann, Public Member
Jennifer Loreda, RVT
Richard Sullivan, DVM

August 28, 2018
1747 N. Market Blvd.
1st Floor Hearing Room
Sacramento, California

Action may be taken on any item listed on the agenda.

10:00 a.m. Tuesday, August 28, 2018

1. Call to Order/ Roll Call/ Establishment of a Quorum
2. Committee Chair's Remarks, Committee Member Comments, and Introductions
3. Review and Approval of May 22, 2018 Committee Meeting Minutes
4. Election of Multidisciplinary Advisory Committee Vice-Chair
5. Update from the Complaint Process Audit Subcommittee; Potential Recommendation to Full Board
6. Update from the Public and Private Shelters and Minimum Standards and Protocols for Shelter Medicine Subcommittee; Potential Recommendation to Full Board
7. Minimum Standards and Protocols for Dental Radiography Procedures; Potential Recommendation to Full Board
8. Minimum Standards and Protocols for Pet Ambulances; Potential Recommendation to Full Board
9. Public Comment on Items Not on the Agenda
Note: The Committee may not discuss or take action on any matter raised during this public comment section, except to decide whether to place the matter on the agenda of a future meeting. (Government Code Sections 11125 and 11125.7(a).)
10. Future Agenda Items and Next Meeting Dates
 - November 13, 2018, Sacramento
 - A. Multidisciplinary Advisory Committee Assignment Priorities
 - B. Agenda Items for Next Meeting

11. Adjournment

This agenda can be found on the Veterinary Medical Board website at www.vmb.ca.gov. Action may be taken on any item on the agenda. The time and order of agenda items are subject to change at the discretion of the Committee Chair and may be taken out of order. In accordance with the Bagley-Keene Open Meeting Act, all meetings of the Committee are open to the public.

This meeting will be webcast, provided there are no unforeseen technical difficulties or limitations. To view the webcast, please visit thedcapage.wordpress.com/webcasts/. The meeting will not be cancelled if webcast is not available. If you wish to participate or to have a guaranteed opportunity to observe and participate, please plan to attend at a physical location. Meeting adjournment may not be webcast if it is the only item that occurs after a closed session.

Government Code section 11125.7 provides the opportunity for the public to address each agenda item during discussion or consideration by the Committee prior to the Committee taking any action on said item. Members of the public will be provided appropriate opportunities to comment on any issue before the Committee, but the Committee Chair may, at his or her discretion, apportion available time among those who wish to speak. Individuals may appear before the Committee to discuss items not on the agenda; however, the Committee can neither discuss nor take official action on these items at the time of the same meeting (Government Code sections 11125, 11125.7(a)).

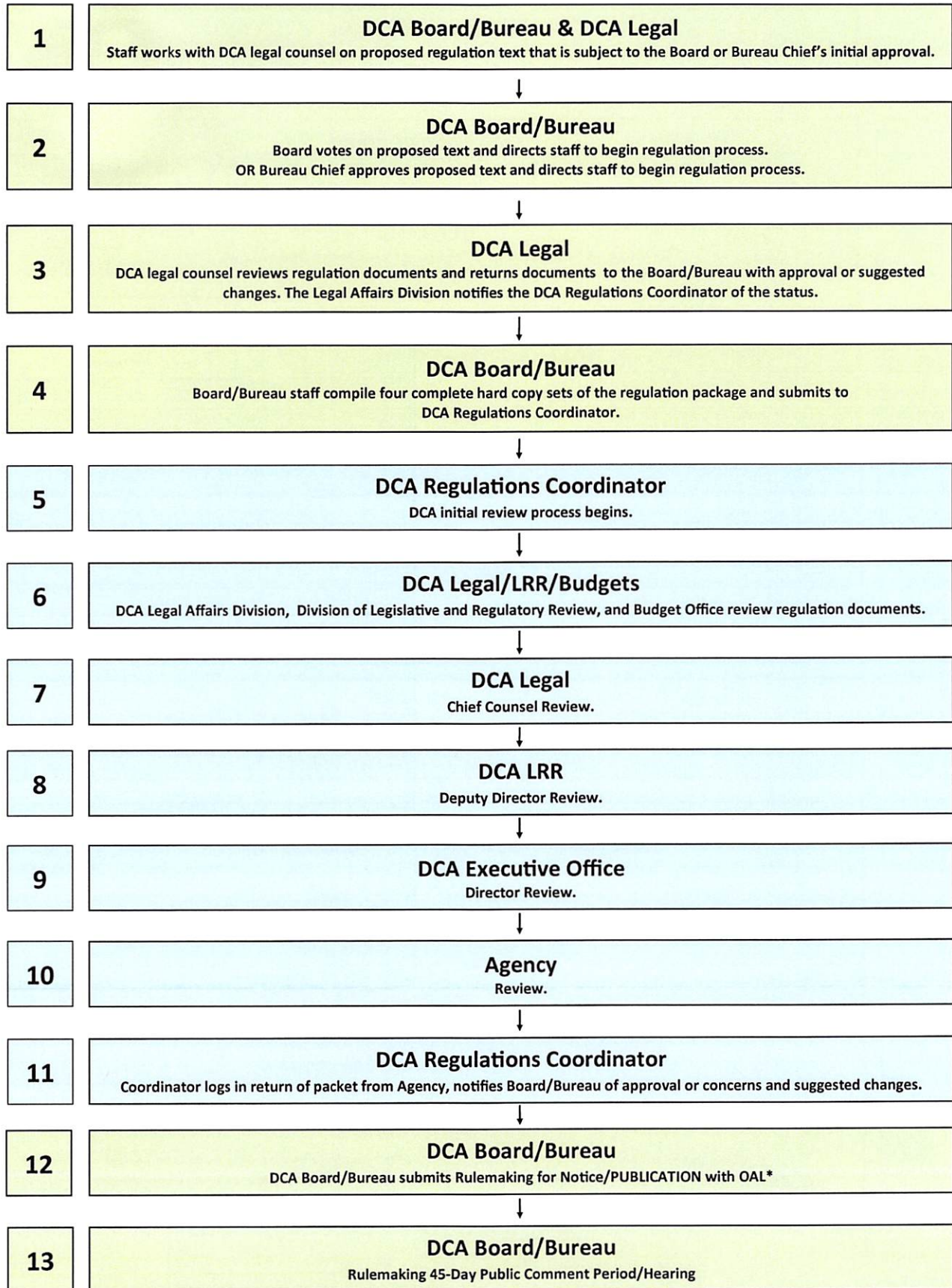
The meeting locations are accessible to the physically disabled. A person who needs disability-related accommodations or modifications to participate in the meeting may make a request by contacting the Committee at (916) 515-5220, email: vmb@dca.ca.gov, or sending a written request to the Veterinary Medical Board, 1747 N. Market St., Suite 230, Sacramento, CA 95834. Providing your request at least five (5) business days prior to the meeting will help ensure availability of the requested accommodations. TDD Line: (916) 326-2297.

MISSION

The mission of the Veterinary Medical Board is to protect consumers and animals by regulating licensees, promoting professional standards and diligent enforcement of the practice of veterinary medicine.

REGULAR RULEMAKING PROCESS—DCA BOARDS/BUREAUS

INITIAL PHASE



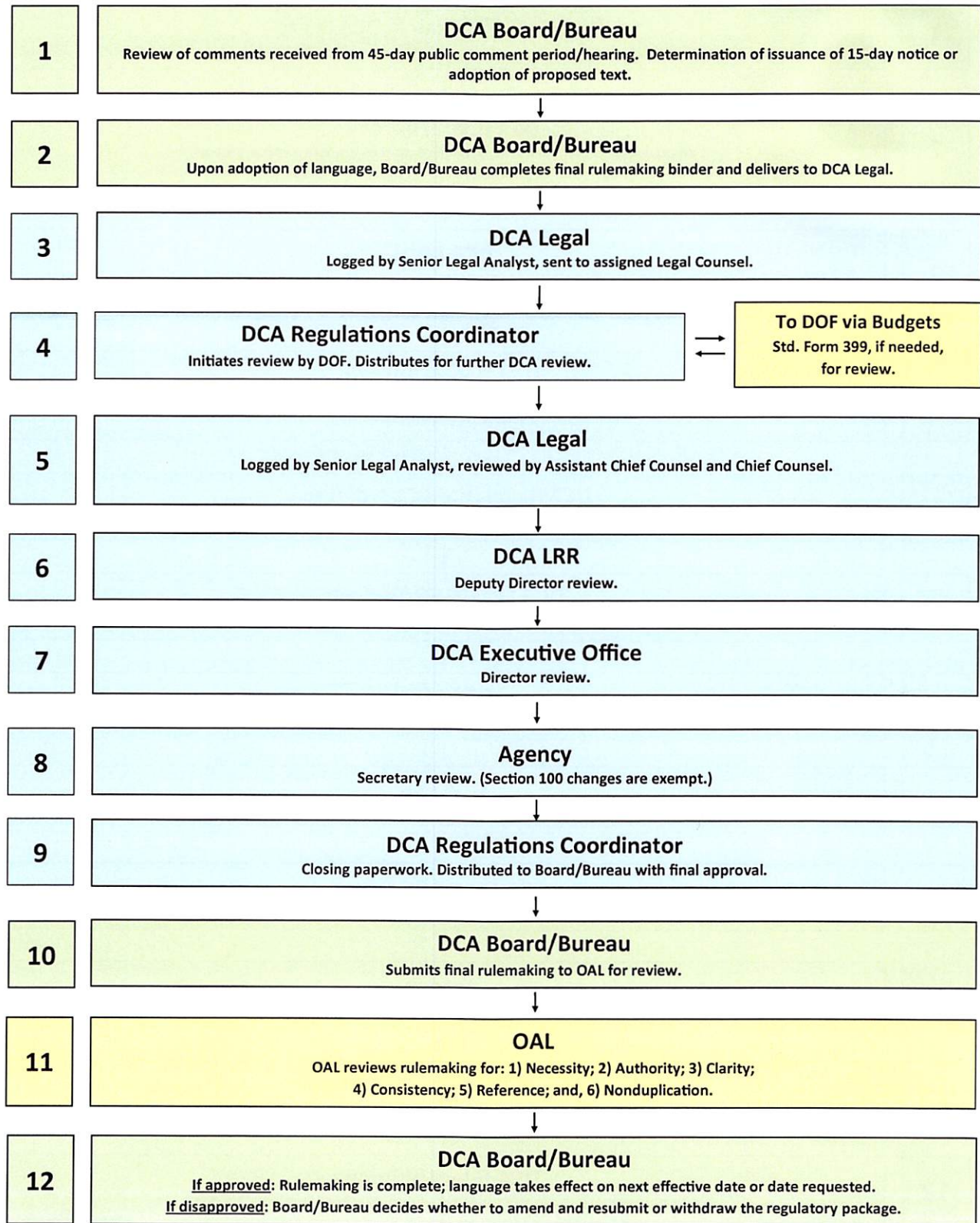
Legend

DCA – Department of Consumer Affairs
LRR – Division of Legislative Regulatory Review
OAL – Office of Administrative Law

* If any changes to language last approved by the Board are needed, a vote by the Board may be necessary.

REGULAR RULEMAKING PROCESS—DCA BOARDS/BUREAUS

FINAL PHASE



Legend

DCA – Department of Consumer Affairs
 LRR – Division of Legislative Regulatory Review
 OAL – Office of Administrative Law
 DOF – Department of Finance
 Std. Form 399 – Economic and Fiscal Impact Statement

Status of Pending VMB Regulations – August 2018

Fee Schedule



CCR Section: 2070, 2071

Notes: The emergency rulemaking package was approved 05/05/2018 and a standard rulemaking package has been submitted to DCA for pre-review effective 04/27/2018. A re-adoption of the emergency regulations package was submitted to OAL on July 26, 2018.

Consumer Protection Enforcement Initiative (CPEI)



CCR Section: 2003, 2017, 2042

Notes: The CPEI rulemaking package was originally submitted through DCA for pre-review in 07/2017, but due to recommendations received from Legal Affairs, the package was returned to the Board and amendments were made to the proposed language effective 02/2018. The rulemaking package has been re-submitted to DCA for pre-review effective 05/02/2018.

Telemedicine

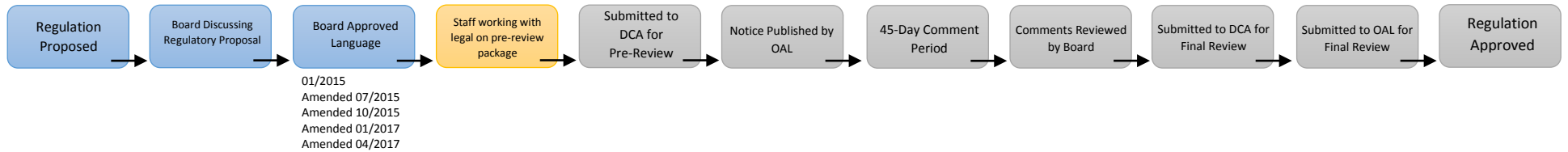


CCR Section: 2032.1

Notes: The Telemedicine proposed language was approved in 04/15 and then amended in 02/2018. Staff is working with legal to develop the initial rulemaking package prior to submitting to DCA for pre-review. The rulemaking package has been submitted to DCA for pre-review effective 05/14/2018.

Status of Pending VMB Regulations – August 2018

Disciplinary Guidelines



CCR Section: 2006

Notes: The Disciplinary Guidelines rulemaking package proposed language was approved in 01/15 and then amended 07/2015, 10/2015, 01/2017 and 04/2017. Staff is working with legal to develop the initial rulemaking package prior to submitting to DCA for pre-review.

RVT Education



CCR Section: 2036.1, 2064, 2065.1, 2065.2, 2065.6, 2065.7, 2065.8, 2066 and 2068.5

Notes: *RVT Alternate Route:* In 02/2015 the MDC approved proposed language. In 07/2015 the Board approved proposed language.
RVT Student Exemption: In 07/2015 the MDC approved proposed language. In 10/2015 the Board approved proposed language.
RVT AVMA School Approval: In 07/2016 the Board approved proposed language.
 The RVT Alternate Route, RVT Student Exemption and RVT AVMA School Approval were combined and approved in 07/2017. Staff is currently working with legal to develop the initial rulemaking package prior to submitting to DCA for pre-review.

Drug Compounding



CCR Section: 2090-2096

Notes: The Drug Compounding rulemaking package proposed language was approved in 10/2017.

Status of Pending VMB Regulations – August 2018

Emergency Animal Care



CCR Section: 2069

Notes: The Emergency Animal Care rulemaking package proposed language was approved by the Board in 10/2017 but brought back for further discussion at its 02/2018 meeting. The Board approved language at the 05/2018 meeting.

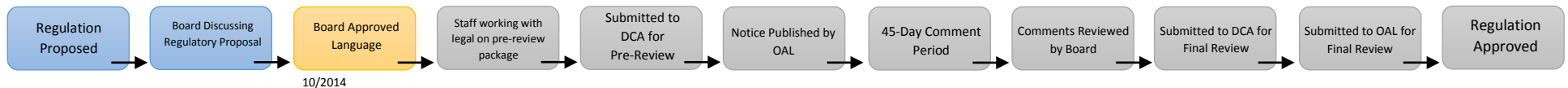
RVT Tasks Under Indirect Supervision



CCR Section: 2036

Notes: The RVT Tasks rulemaking package proposed language was approved by the MDC at their 10/2017 meeting and discussed at the Board’s 02/2018 meeting. The Board approved language at the 05/2018 meeting.

Uniform Standards for Abuse

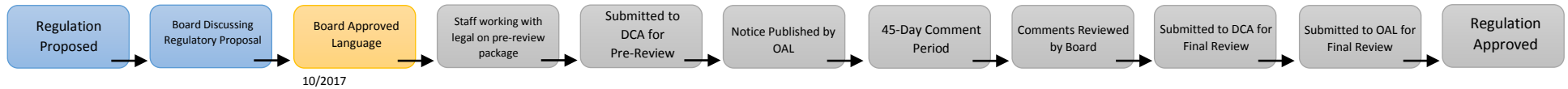


CCR Section: 2006, 2006.5, 2076

Notes: The Uniform Standards for Abuse rulemaking proposed language was approved in 10/2014 and was on hold per legal from 04/2015-03/2016. Pending amendments to be re-submitted to the Board for review and approval.

Status of Pending VMB Regulations – August 2018

Animal Rehabilitation



CCR Section: 2038.5

Notes: The Animal Rehabilitation rulemaking package was previously filed with OAL and withdrawn in 11/2015. Three taskforce meetings were held to discuss this issue (06/2016, 10/2016, 02/2017). In 10/2017 the Board approved proposed language.

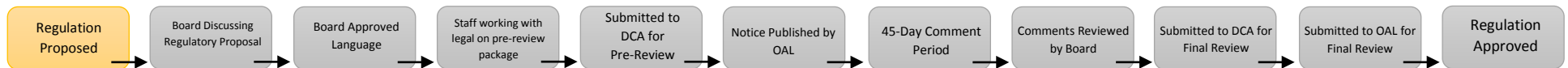
Duties of a Supervising Veterinarian



CCR Section: 2035

Notes: The Duties of a Supervising Veterinarian proposed regulations were approved by the Board at the 05/2018 meeting. This regulation was previously called “Extended Duty” for Registered Veterinary Technicians.

Minimum Standards for Alternate Veterinary Premises



CCR Section: 2030, 2030.05, 2030.1, 2030.15, 2030.2, 2030.3, 2030.4, 2030.45, 2030.5, 2034, 2032.4, 2036.5

Notes: The Minimum Standards for Alternate Veterinary Premises proposed regulations were approved by the MDC at their 02/2018 meeting and forwarded to the Board for discussion.

Status of Pending VMB Regulations – August 2018

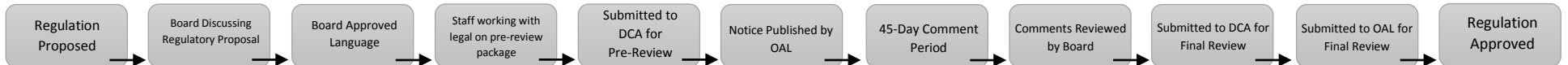
Veterinary Student Exemption/RVT Exam Eligibility



CCR Section: 2027, 2027.5

Notes: The Veterinary Student Exemption proposal was discussed and conceptionally approved 04/2017. This regulation is pending updates required to BPC 4841.2 in SB 1480 (Hill, 2018).

Shelter Minimum Standards



CCR Section: 4840

Notes: The Shelter Minimum Standards concept is currently being discussed by the MDC and has not been submitted to the Board.

Veterinary Medical Board

1747 N. MARKET BOULEVARD, SUITE 230, SACRAMENTO, CA 95834
TELEPHONE: 916-515-5220 FAX: 916-928-6849 | WWW.VMB.CA.GOV



MEMORANDUM

DATE	August 13, 2018
TO	Veterinary Medical Board
FROM	Amanda Drummond, Administrative Programs Coordinator
SUBJECT	Amend Sections 2030-2030.5, Article 4, Division 20, Title 16 of the California Code of Regulations (CCR) Regarding Minimum Standards for Alternate Veterinary Premises/Practices

Background:

The Minimum Standards for Alternate Veterinary Premises/Practices has been an ongoing project between the Multidisciplinary Advisory Committee (MDC) Premises Permit Subcommittee, Veterinary Medical Board (Board) staff, the California Veterinary Medical Association (CVMA) and various stakeholders. The Board originally requested the CVMA to initiate a taskforce to discuss premise practice types.

At the October 2017 MDC meeting, CVMA reported on their findings and recommendations for revisions to the regulations. The discussion of Minimum Standards for Alternate Veterinary Premises was further discussed at the February 2018 MDC meeting where Dr. Sullivan reviewed that he and Ms. Annemarie Del Mugnaio participated in meetings with CVMA and multiple stakeholders to ensure that multiple types of veterinary premises were identified. The MDC discussed, made additional recommendations, and approved the proposed language for Minimum Standards for Alternate Veterinary Premises/Practices at the February 2018 MDC meeting.

The proposed regulations are now before the Board for your review and consideration.

Attachments:

- Amended version of the proposed changes to CCR sections 2030-2030.5 showing the proposed revisions that the MDC voted on (changes are denoted with strike through and underline)
- Clean version of the proposed changes to CCR sections 2030-2030.5 (without strikethrough and underline)

Minimum Standards for Alternate Premises
Proposed Language – Original Version with Edits

2030. Minimum Standards - Fixed Veterinary Premises.

All fixed premises where veterinary medicine and its various branches are being practiced, and all instruments, apparatus and apparel used in connection with those practices, shall be kept clean and sanitary at all times and shall conform to or possess the following minimum standards: The facilities and practice types in sections 2030.1 through 2030.5 are premises pursuant to section 4853 of the code and shall be registered with the board and meet all of the requirements in section 2030.05. If the facility or practice type is operated from a building or facility that is the licensee manager's principal place of business and the building or facility is registered with the board, the facility or practice type shall be considered a mobile unit and exempt from independent registration with the board.

(a) Indoor lighting for halls, wards, reception areas, examining and surgical rooms shall be adequate for their intended purpose.

(b) A reception room and office, or a combination of the two.

(c) An examination room separate from other areas of the facility and of sufficient size to accommodate the doctor, assistant, patient and client.

(d) If animals are housed or retained for treatment, the following shall be provided:

(1) Compartments for animals which are maintained in a comfortable and sanitary manner.

(2) Effective separation of known or suspected contagious animals.

(3) If there are to be no personnel on the premises during any time an animal is left at the veterinary facility, prior notice of this fact shall be given to the client. For purposes of this paragraph, prior notice may be accomplished by posting a sign in a place and manner conspicuous to the clients at the entrance of the premises, stating that there may be times when there are no personnel on the premises.

(e) When a veterinary premises is closed, a sign shall be posted and visible outside the primary entrance with a telephone number and location where emergency care is available. An answering machine or service shall be used to notify the public when the veterinary premises will be re-opened and where after hours emergency care is available. If no after hours emergency care is available, full disclosure shall be provided to the public prior to rendering services.

(f) The veterinary premises shall meet the following standards:

(1) Fire precautions shall meet the requirements of local and state fire prevention codes.

(2) The facility, its temperature, and ventilation shall be maintained so as to assure the comfort of all patients.

(3) The disposal of waste material shall comply with all applicable state, federal, and local laws and regulations.

(4) The veterinary premises shall have the capacity to render diagnostic radiological services, either on the premises or through other commercial facilities. Radiological procedures shall be conducted in accordance with Health and Safety Code standards.

(5) Clinical pathology and histopathology diagnostic laboratory services shall be available within the veterinary premises or through outside services.

(6) All drugs and biologicals shall be maintained, administered, dispensed and prescribed in compliance with state and federal laws.

(7) Sanitary methods for the disposal of deceased animals shall be provided and maintained.

(8) Veterinary medical equipment used to perform aseptic procedures shall be sterilized and maintained in a sterile condition.

(9) Current veterinary reference materials shall be readily available on the premises.

(10) Anesthetic equipment in accordance with the procedures performed shall be maintained in proper working condition and available at all times.

(11) The veterinary premises shall have equipment to deliver oxygen in emergency situations.

~~(12) Appropriate drugs and equipment shall be readily available to treat an animal emergency.~~

~~(g) A veterinary premises which provides aseptic surgical services shall comply with the following:~~

~~(1) A room, separate and distinct from all other rooms shall be reserved for aseptic surgical procedures which require aseptic preparation. A veterinarian may perform emergency aseptic surgical procedures in another room~~

~~when the room designated for aseptic surgery is occupied or temporarily unavailable.~~

~~(A) A veterinary premises which is currently registered with the board, but does not have a separate room reserved for aseptic surgical procedures, shall obtain compliance with this subdivision on or before January 1, 2014.~~

~~(B) The board may exempt a veterinary premises which is currently registered with the board, but does not have a separate aseptic surgery room, where it determines that it would be a hardship for the veterinary premises to comply with the provisions of this subdivision.~~

~~In determining whether a hardship exists, the board shall give due consideration to the following factors:~~

~~1. Zoning limitations.~~

~~2. Whether the premises constitutes a historical building.~~

~~3. Whether compliance with this requirement would compel the veterinary practice to relocate to a new location.~~

~~(2) Storage in the surgery room shall be limited to items and equipment normally related to aseptic surgery and surgical procedures. Equipment not normally related to surgery and surgical procedure includes, but is not limited to, equipment used for dental prophylaxis, autoclaves and non-surgical radiographic equipment.~~

~~(3) Open shelving is prohibited in the surgical room.~~

~~(4) The surgery room shall not contain a functional sink with an open drain.~~

~~(5) The doors into the surgery room must be able to be fully closed, fill the entire door space, be made of non-porous material and not provide access from outside the hospital. In cases where the size of the animal prevents entry to the hospital via a regularly-sized door, doors for outside access are permitted as long as such doors are able to be fully closed, fill the entire door space and be made of non-porous material.~~

~~(6) The surgery room shall be well lighted, shall have equipment for viewing radiographs and shall have effective emergency lighting with a viable power source.~~

~~(7) The floors, table tops, and counter tops of the surgery room shall be of a non-porous material suitable for regular disinfecting, and cleaning, and shall be cleaned and disinfected regularly.~~

~~(8) Surgical instruments and equipment shall be:~~

~~(A) Adequate for the type of surgical procedures performed.~~

~~(B) Sterilized as required by the surgical procedure performed and instruments used.~~

~~(9) In any sterile procedure, a separate sterile pack shall be used for each animal.~~

~~(10) All instruments, packs and equipment that have been sterilized shall have an indicator that reacts to and verifies sterilization.~~

~~(11) The following attire shall be required for aseptic surgery:~~

~~(A) Each member of the surgical team shall put on an appropriate sanitary cap and sanitary mask which covers his or her hair and mouth, nose and any facial hair, except for eyebrows or eyelashes. All members of the surgical team who will be handling the instruments or touching the surgical site shall wear sterilized surgical gowns with long sleeves and sterilized gloves.~~

~~(B) Ancillary personnel in the surgery room shall wear clean clothing, footwear, sanitary cap and mask.~~

~~(h) When performing clean surgery, the instruments used to perform such surgery shall have been sterilized and the surgeon(s) and ancillary personnel shall wear clean clothing and footwear when appropriate. For purposes of this section, "clean surgery" shall mean the performance of a surgical operation for the treatment of a condition and under circumstances which, consistent with the standards of good veterinary medicine, do not warrant the use of aseptic surgical procedures.~~

Note: Authority cited: Sections 4808 and 4854, Business and Professions Code. Reference: Sections 4853, 4854, and 4883, Business and Professions Code.

2030.05. Minimum Standards - Licensee Manager.

(a) A Licensee Manager is the California licensed veterinarian named as the Licensee Manager on a facility's premises permit.

(b) The Licensee Manager is responsible for ensuring that the premises for which he/she is manager complies with the requirements in sections 4853, 4854, 4855 and 4856 of the ~~Business and Professions Code, Division 2, Chapter 11, Article 3~~ code. The Licensee Manager is responsible for ensuring that the physical and operational components of a premises meet the minimum standards of practice as set forth in sections 2030 through 2032.5 of the California Code of Regulations, Title 16, Division 20, Article 4.

(c) The Licensee Manager is responsible for ensuring that no unlicensed activity is occurring within the premises or in any location where any function of veterinary medicine, veterinary surgery or veterinary dentistry is being conducted off the premises under the auspices of this premises license.

(d) The Licensee Manager shall maintain whatever physical presence is reasonable within the facility to ensure that the requirements in subdivisions (a) – through (c) are met.

(e) Each licensed veterinarian shall be responsible for their individual violations of the Veterinary Medicine Practice Act or any regulation adopted thereunder.

Note: Authority cited: Sections 4808 and 4854, Business and Professions Code. Reference: Sections 4853, 4854, 4855, 4856, and 4883, Business and Professions Code.

2030.1. Minimum Standards - Small Animal Fixed ~~Premises~~Facility.

For purposes of these ~~rules and~~ regulations, a "small animal fixed premises facility" shall mean a ~~fixed veterinary premises which concentrates in providing building where veterinary medicine and its various branches are being practiced and where veterinary services are being provided to common domestic household pets. In addition to the requirements in section 2030, small animal fixed premises shall provide:~~ A small animal fixed facility shall meet the following minimum standards:

(a) All instruments, apparatus, and apparel shall be kept clean and sanitary at all times.

(b) Indoor lighting for halls, wards, reception areas, examining and surgical rooms shall be adequate for their intended purpose.

(c) Fire precautions shall meet the requirements of local and state fire prevention codes.

(d) The facility, temperature, and ventilation shall be maintained so as to assure the comfort of all patients.

(e) The floors, table tops, and counter tops in areas where animals are being treated shall be made of a material suitable for regular disinfecting and cleaning, and shall be cleaned and disinfected regularly.

(f) Shall have a reception area and office, or a combination of the two.

(g) Shall have an examination room separate from other areas of the facility and of sufficient size to accommodate the doctor, assistant, patient, and client.

(h) Current veterinary reference materials shall be readily available at the facility.

(i) All drugs and biologicals shall be stored and maintained according to the manufacturer's recommendations and administered, prescribed, and dispensed in compliance with state and federal laws.

(j) Shall have the ability to provide diagnostic radiological services. Radiological procedures shall be conducted in accordance with Health and Safety Code standards.

(k) Shall have the ability to provide clinical pathology and histopathology diagnostic laboratory services.

(l) Shall have appropriate drugs, including oxygen, and equipment to provide immediate emergency care.

(m) The disposal of waste material shall comply with all applicable federal, state, and local laws and regulations.

(n) If animals are housed or retained for treatment, the following shall be provided:

(1) Compartments or exercise runs or areas for animals shall be consistent with husbandry standards and shall be comfortable, sanitary, and provide for effective separation of animals and waste products.

(2) Effective separation of known or suspected contagious animals.

(3) Prior notice shall be given to the client if there are to be no personnel on-site during any time an animal is left at the facility. For purposes of this paragraph, prior notice may be accomplished by posting a sign in a place and manner conspicuous to the clients at the primary entrance of the premises, stating that there may be times when there are no personnel on the premises.

(4)(a) When medically and/or species appropriate for a given species, ~~where~~ where animals are kept on the veterinary premises for 24 hours or more, the animals shall be provided with an opportunity for proper exercise. Compliance with this section may be achieved by the use of exercise runs/areas or by providing the animal with the opportunity for outdoor walks. ~~Where a premises has exercise runs, they shall be clean and sanitary and provide for effective separation of animals and their waste products.~~

(o) When the facility is closed, a sign shall be posted and visible outside the primary entrance with a telephone number and location where emergency care is available. An answering machine or service shall be used to notify the public when the facility will be re-opened and where after-hours emergency care is available. If no after-hours emergency care is available, full disclosure shall be provided to the public prior to rendering services.

(p) Anesthetic equipment in accordance with the procedures performed shall be maintained in proper working condition and available at all times.

(q) Sanitary methods for the disposal of deceased animals shall be provided.

(r)(b) When the client has not given the veterinarian authorization to dispose of his or her deceased animal, the veterinarian shall be required to retain the carcass in a freezer for at least 14 days prior to disposal.

(s) If aseptic surgery is performed, the following shall be provided:

(1) A room, separate and distinct from all other rooms shall be reserved for aseptic surgical procedures which require aseptic preparations. A veterinarian may perform emergency aseptic surgical procedures in another room when the room designated for aseptic surgery is occupied or temporarily unavailable. The board may exempt a facility which is currently registered with the board, but does not have a separate aseptic surgery room, where it determines that it would be a hardship for the facility to comply with the provisions of this section. In determining whether a hardship exists, the board shall give due consideration to the following factors:

(A) Zoning limitations.

(B) Whether the facility constitutes a historical building.

(C) Whether compliance with this requirement would compel the veterinary practice to relocate to a new location.

(2) Storage in the surgery room shall be limited to items and equipment normally related to aseptic surgery and surgical procedures. Equipment not normally related to surgery and surgical procedure includes, but in not limited to, equipment used for dental prophylaxis, autoclaves and non-surgical radiographic equipment.

(3) Open shelving is prohibited in the surgical room.

(4) The surgical room shall not contain a functional sink with an open drain.

(5) Surgery room doors shall be able to be fully closed, fill the entire door space, be made of a material suitable for regular disinfecting and cleaning, and shall be cleaned and disinfected regularly, and not provide access from outside the facility when aseptic surgery services are provided.

(6) The surgery room shall be well lighted, shall have equipment for viewing radiographs and shall have effective emergency lighting with a viable power source.

(7) Surgical instruments and equipment shall be:

(A) Adequate for the type of surgical procedures performed.

(B) Sterilized as required by the surgical procedure performed and instruments used.

(8) In any sterile procedure, a separate sterile pack shall be used for each animal.

(9) All instruments, packs, and equipment shall be sterilized and have an indicator that reacts to and verifies sterilization.

(10) The following attire shall be required for aseptic surgery:

(A) Each member of the surgical team shall put on an appropriate sanitary cap and sanitary mask which covers his or her hair and mouth, nose and any facial hair, except for eyebrows or eyelashes.

All members of the surgical team who will be handling the instruments or touching the surgical site shall wear sterilized surgical gowns with long sleeves and sterilized gloves. Ancillary personnel in the surgery room shall wear clean clothing, footwear, sanitary cap and mask.

(t) When performing clean surgery, the instruments used to perform such surgery shall have been sterilized and the surgeon(s) and ancillary personnel shall wear appropriate apparel. For purposes of this section, "clean surgery" shall mean the performance of a surgical procedure for the treatment of a condition and under circumstances which, consistent with the standards of good veterinary medicine, do not warrant the use of aseptic surgical procedures.

Note: Authority cited: Sections 4808 and 4854, Business and Professions Code. Reference: Sections 4854 and 4883, Business and Professions Code.

2030.15 Minimum Standards – Large Animal Fixed Facility

For purposes of these regulations, a "large animal fixed facility" shall mean a building where veterinary medicine and its various branches are being practiced and where veterinary services are being provided to equine and food animals and livestock as defined in section 4825.1 (c) and (d) of the code. A large animal fixed facility shall meet the following minimum standards:

(a) All instruments, apparatus, and apparel shall be kept clean and sanitary at all times.

(b) Indoor lighting for halls, wards, reception areas, examining and surgical rooms shall be adequate for their intended purpose.

(c) Fire precautions shall meet the requirements of local and state fire prevention codes.

(d) The facility, temperature, and ventilation shall be maintained so as to assure the comfort of all patients.

(e) The floors, table tops, and counter tops in areas where animals are being treated shall be made of a material suitable for regular disinfecting and cleaning, and shall be cleaned and disinfected regularly.

- (f) Shall have a reception area and office, or a combination of the two.
- (g) Shall have an examination room separate from other areas of the facility and of sufficient size to accommodate the doctor, assistant, patient, and client.
- (h) Current veterinary reference materials shall be readily available at the facility.
- (i) All drugs and biologicals shall be stored and maintained according to the manufacturer's recommendations and administered, prescribed, and dispensed in compliance with state and federal laws.
- (j) Shall have the ability to provide diagnostic radiological services. Radiological procedures shall be conducted in accordance with Health and Safety Code standards.
- (k) Shall have the ability to provide clinical pathology and histopathology diagnostic laboratory services.
- (l) Shall have appropriate drugs and equipment to provide immediate emergency care.
- (m) The disposal of waste material shall comply with all applicable federal, state, and local laws and regulations.
- (n) If animals are housed or retained for treatment, the following shall be provided:
- (1) Compartments or exercise areas for animals shall be consistent with husbandry standards and shall be comfortable, sanitary, and provide for effective separation of animals and waste products.
 - (2) Effective separation of known or suspected contagious animals.
 - (3) Prior notice shall be given to the client if there are to be no personnel on-site during any time an animal is left at the facility. For purposes of this paragraph, prior notice may be accomplished by posting a sign in a place and manner conspicuous to the clients at the primary entrance of the premises, stating that there may be times when there are no personnel on the premises.
 - (4) When medically appropriate for a given species, where animals are kept at the facility for 24 hours or more, the animals shall be provided with an opportunity for proper exercise. Compliance with this section may be achieved by the use of exercise areas or by providing the animal with the opportunity for outdoor walks.
- (o) When the facility is closed, a sign shall be posted and visible outside the primary entrance with a telephone number and location where emergency care is available. An answering machine or service shall be used to notify the public when the facility will be re-opened and where after-hours emergency care is available. If no after-hours emergency care is available, full disclosure shall be provided to the public prior to rendering services.
- (p) Anesthetic equipment in accordance with the procedures performed shall be maintained in proper working condition and available at all times.
- (q) Sanitary methods for the disposal of deceased animals shall be provided.
- (r) If aseptic surgery is performed, the following shall be provided:
- (1) A room, separate and distinct from all other rooms shall be reserved for aseptic surgical procedures which require aseptic preparations. A veterinarian may perform emergency aseptic surgical procedures in another room when the room designated for aseptic surgery is occupied or temporarily unavailable. The board may exempt a facility which is currently registered with the board, but does not have a separate aseptic surgery room, where it determines that it would be a hardship for the facility to comply with the provisions of this section. In determining whether a hardship exists, the board shall give due consideration to the following factors:
 - (A) Zoning limitations.
 - (B) Whether the facility constitutes a historical building.
 - (C) Whether compliance with this requirement would compel the veterinary practice to relocate to a new location.
 - (2) Storage in the surgery room shall be limited to items and equipment normally related to aseptic surgery and surgical procedures. Equipment not normally related to surgery and surgical procedure includes, but is not limited to, equipment used for dental prophylaxis, autoclaves and non-surgical radiographic equipment.
 - (3) Open shelving is prohibited in the surgical room.

(4) Surgery room doors shall be able to be fully closed, fill the entire door space, be made of a material suitable for regular disinfecting and cleaning, and shall be cleaned and disinfected regularly, and not provide access from outside the facility when aseptic surgery services are provided. In cases where the size of the animal prevents entry to the hospital via a regularly-sized door, doors for outside access are permitted as long as such doors are able to be fully closed, fill the entire door space and be made of a material suitable for regular disinfecting and cleaning, and shall be cleaned and disinfected regularly.

(5) The surgery room shall be well lighted, shall have equipment for viewing radiographs and shall have effective emergency lighting with a viable power source.

(6) Surgical instruments and equipment shall be:

(A) Adequate for the type of surgical procedures performed.

(B) Sterilized as required by the surgical procedure performed and instruments used.

(7) In any sterile procedure, a separate sterile pack shall be used for each animal.

(8) All instruments, packs, and equipment shall be sterilized and have an indicator that reacts to and verifies sterilization.

(9) The following attire shall be required for aseptic surgery:

(A) Each member of the surgical team shall put on an appropriate sanitary cap and sanitary mask which covers his or her hair and mouth, nose and any facial hair, except for eyebrows or eyelashes. All members of the surgical team who will be handling the instruments or touching the surgical site shall wear sterilized surgical gowns with long sleeves and sterilized gloves.

(B) Ancillary personnel in the surgery room shall wear clean clothing, footwear, sanitary cap and mask.

(s) When performing clean surgery, the instruments used to perform such surgery shall have been sterilized and the surgeon(s) and ancillary personnel shall wear appropriate apparel. For purposes of this section, "clean surgery" shall mean the performance of a surgical procedure for the treatment of a condition and under circumstances which, consistent with the standards of good veterinary medicine, do not warrant the use of aseptic surgical procedures.

Note: Authority cited: Sections 4808 and 4854, Business and Professions Code. Reference: Sections 4854 and 4883, Business and Professions Code.

2030.2. Minimum Standards - Small Animal Mobile-Clinic Facility.

For purposes of these regulations, a "small animal mobile clinic facility" shall mean a trailer or mobile facility established to function as a veterinary premises which concentrates in providing unit or vehicle where veterinary medicine and its various branches are being practiced and where veterinary services are being provided to common domestic household pets and is required by section 4853 of the code to be registered with the board.

(a) A small animal mobile clinic facility shall have meet the following minimum standards:

(a) All instruments, apparatus, and apparel shall be kept clean and sanitary at all times.

(b)(1) Shall have H hot and cold water.

(c)(2) Shall have Aa 110-volt power source for diagnostic equipment.

(d)(3) Shall have Aa collection tank for disposal of waste material.

(4) Lighting adequate for the procedures to be performed in the mobile clinic.

(5) Floors, table tops, and counter tops shall be of a non-porous material suitable for regular disinfecting, and cleaning, and shall be cleaned and disinfected regularly.

(6) Compartments to transport or hold animals, if applicable.

~~(b) A small animal mobile clinic shall also have:~~

~~(e)(1) Indoor lighting for halls, wards, reception areas, examining and surgical rooms, which shall be adequate for its intended purpose.~~

~~(2) an examination room separate from other areas of the facility, which shall be of sufficient size to accommodate the doctor, assistant, patient and client.~~

~~(f)(3) Fire precautions that meet the requirements of local and state fire prevention codes,~~

~~(g)(4) The facility, temperature, and ventilation controls adequate shall be maintained so as to assure the comfort of all patients.~~

~~(5) a small animal mobile clinic which provides aseptic surgical services shall also have a room separate and distinct from other rooms, which shall be reserved for aseptic surgical procedures. Storage in the surgery room shall be limited to items and equipment normally related to surgery and surgical procedures. A veterinarian may perform emergency aseptic surgical procedures in another room when the room designated for aseptic surgery is occupied or temporarily unavailable. A small animal mobile clinic which provides aseptic surgical services and that is currently registered with the board, but does not have a separate room reserved for aseptic surgical procedures, shall provide the board with the vehicle identification number of the mobile clinic and obtain compliance with this subdivision on or before January 1, 2006.~~

~~(A) A small animal mobile clinic that provides aseptic surgery shall also have an examination area separate from the surgery room that is large enough to conduct an examination.~~

~~(c) A small animal mobile clinic shall have the ability and equipment to provide immediate emergency care at a level commensurate with the specific veterinary medical services it is providing.~~

~~(d) A small animal mobile clinic shall provide either after hours emergency services to its patients or, if no after hours emergency care is available, full disclosure to the public prior to rendering services.~~

~~(h) The floors, table tops, and counter tops shall be made of a material suitable for regular disinfecting and cleaning, and shall be cleaned and disinfected regularly.~~

~~(i) Shall have an examination room of sufficient size to accommodate the doctor, assistant, patient, and client.~~

~~(j) Current veterinary reference materials shall be readily available at the facility.~~

~~(k) All drugs and biologicals shall be stored and maintained according to the manufacturer's recommendations and administered, prescribed, and dispensed in compliance with state and federal laws.~~

~~(l) Shall have the ability to provide diagnostic radiological services, on the premises or through other commercial facilities. Radiological procedures shall be conducted in accordance with Health and Safety Code standards.~~

~~(m) Shall have the ability to provide clinical pathology and histopathology diagnostic laboratory services.~~

~~(n) Shall have appropriate drugs, including oxygen, and equipment to provide immediate emergency care.~~

~~(o) The disposal of waste material shall comply with all applicable federal, state, and local laws and regulations.~~

~~(p) If animals are housed or retained for treatment, the following shall be provided:~~

~~(1) Compartments or exercise runs or areas for animals shall be consistent with husbandry standards and shall be comfortable, sanitary, and provide for effective separation of animals and waste products.~~

~~(2) Effective separation of known or suspected contagious animals.~~

~~(3) When medically appropriate for a given species, where animals are kept at the facility for 24 hours or more, the animals shall be provided with an opportunity for proper exercise. Compliance with this section may be achieved by the use of exercise runs/areas or by providing the animal with the opportunity for outdoor walks.~~

~~(4) Prior notice shall be given to the client if there are to be no personnel on-site during any time an animal is left at the facility.~~

~~(q) Prior notice shall be given to the client when the facility is closed. An answering machine or service shall be used to notify the public when the facility will be re-opened and where after hour emergency care is available. If emergency services are not provided by the facility, a legible list of contact information for facilities or practices~~

that provide emergency services shall be provided to the client. If no after-hour emergency care is available, full disclosure shall be provided to the public prior to rendering services.

(r) Anesthetic equipment in accordance with the procedures performed shall be maintained in proper working condition and available at all times.

(s) Sanitary methods for the disposal of deceased animals shall be provided.

(t)(e) When the client has not given the veterinarian authorization to dispose of his or her deceased animal, the veterinarian shall be required to retain the carcass in a freezer for at least 14 days prior to disposal.

(u) If aseptic surgery is performed, the following shall be provided:

(1) A room, separate and distinct from all other rooms, which shall be reserved for aseptic surgical procedures. A veterinarian may perform emergency aseptic surgical procedures in another room when the room designated for aseptic surgery is occupied or temporarily unavailable.

(2) Shall have an examination area separate from the surgery room.

(3) Storage in the surgery room shall be limited to items and equipment normally related to surgery and surgical procedures. Equipment not normally related to surgery and surgical procedure includes, but is not limited to, equipment used for dental prophylaxis, autoclaves, and non-surgical radiographic equipment.

(4) Open shelving is prohibited in the surgical room.

(5) The surgical room shall not contain a functional sink with an open drain.

(6) The surgery room shall be well lighted, shall have equipment for viewing radiographs and shall have effective emergency lighting with a viable power source.

(7) Surgical instruments and equipment shall be:

(A) Adequate for the type of surgical procedures performed.

(B) All instruments, packs, and equipment shall be sterilized and have an indicator that reacts to and verifies sterilization

(C) A separate sterile pack shall be used for each animal.

(8) Surgery room doors shall be able to be fully closed, fill the entire door space, be made of a material suitable for regular disinfecting and cleaning, and shall be cleaned and disinfected regularly.

(9) The following attire shall be required:

(A) Each member of the surgical team shall put on an appropriate sanitary cap and sanitary mask which covers his or her hair and mouth, nose and any facial hair, except for eyebrows or eyelashes. All members of the surgical team who will be handling the instruments or touching the surgical site shall wear sterilized surgical gowns with long sleeves and sterilized gloves.

(B) Ancillary personnel in the surgery room shall wear clean clothing, footwear, sanitary cap and mask.

(10) When performing clean surgery, the instruments used to perform such surgery shall have been sterilized and the surgeon(s) and ancillary personnel shall wear appropriate apparel. For purposes of this section, "clean surgery" shall mean the performance of a surgical procedure for the treatment of a condition and under circumstances which, consistent with the standards of good veterinary medicine, do not warrant the use of aseptic surgical procedures.

Note: Authority cited: Sections 4808 and 4854, Business and Professions Code. Reference: Sections 4853 and 4854, Business and Professions Code.

2030.3. Minimum Standards - Small Animal Vaccination Clinic Practice.

~~(a) The term~~For purposes of these regulations, an “small-animal vaccination clinic practice” shall mean a privately or publicly supported vaccination clinic where a veterinarian performs vaccinations and/or immunizations against disease on multiple animals, and where the veterinarian may also perform location where the scope of veterinary practice is limited to only vaccinations and preventative procedures for parasitiae control. An animal vaccination practice shall meet the following minimum standards:

~~(a)~~ All instruments, apparatus, and apparel shall be kept clean and sanitary at all times.

~~(b)~~ Diagnostic tests shall not be performed, and dangerous drugs shall not be prescribed or dispensed.

~~(c)(b)~~ A veterinarian must remain on site throughout the duration of a vaccination clinic practice and must maintain responsibility for all medical decisions made. The veterinarian is responsible for proper immunization and parasiticvaccination and preventative procedures for parasite control and the completeness of recommendations made to the public by the paraprofessional staff that the veterinarian supervises or employs. The veterinarian is responsible for documenting that the patient appears healthy enough to receive vaccines or preventable parasiticides as well as providing consultation and referral of clients when disease is detected or suspected.

~~(d)~~ Lighting shall be adequate for the procedures to be performed in the vaccination practice.

~~(e)~~ Fire precautions shall meet the requirements of local and state fire prevention codes.

~~(f)~~ When applicable, floors, table tops, and counter tops in areas where animals are being treated shall be made of a material suitable for regular disinfecting and cleaning, and shall be cleaned and disinfected regularly.

~~(g)(c)~~ The disposal of waste material shall comply with all applicable state, federal, and local laws and regulations.

~~(h)~~ Current veterinary reference materials shall be readily available at the practice.

~~(i)(d)~~ All drugs and biologicals shall be stored, and maintained, administered, dispensed and prescribed according to the manufacturer’s recommendations and administered and in compliance with state and federal laws.

~~(j)~~ Shall have the appropriate drugs and equipment to provide immediate emergency care at a level commensurate with the specific veterinary medical services provided.

~~(e)~~ Lighting shall be adequate for the procedures to be performed in the vaccination clinic.

~~(f)~~ Floors, table tops, and counter tops shall be of a non-porous material suitable for regular disinfecting, and cleaning, and shall be cleaned and disinfected regularly.

~~(k)(g)~~ Equipment shall be of the type and quality to provide for the delivery of vaccines and parasiticides in the best interest of the patient and with safety to the public.

~~(l)(h)~~ Fresh, clean water shall be available for sanitizing and first aid. Disposable towels and soap shall be readily available.

~~(i)~~ A vaccination clinic shall have the ability and equipment to provide immediate emergency care at a level commensurate with the specific veterinary medical services it is providing.

~~(m)(j)~~ The vaccination clinic shall provide a legible list of the name, address, and hours of operation of all contact information for facilities or practices that provide or advertise emergency services and, when applicable, the location of other clinics provided by the same entity on that day, that are located within a 30-minute or 30-mile radius shall be provided to the client.

~~(n)(k)~~ The vaccination clinic shall maintain all vaccination records for a minimum of three (3) years from the date of the vaccination that they were administered.

~~(l)~~ If any diagnostic tests are performed or dangerous drugs are provided, administered, prescribed or dispensed, then a valid veterinary-client-patient relationship must be established, including a complete physical exam and Medical Records as set forth in section 2032.3.

~~(o)(m)~~ The veterinarian shall be identifiable to the public, including, but not limited to the posting of a copy of the veterinarian’s license, as set forth in section 4850 of the codeBusiness and Professions Code.

Note: Authority cited: Sections 4808 and 4854, Business and Professions Code. Reference: Sections 4853, 4854, and 4883, Business and Professions Code.

2030.4. Minimum Standards – Small Animal House Call Practice.

For purposes of these regulations, a “small animal house call practice” shall mean one in which veterinary medicine and its various branches are being practiced and where veterinary services are being provided to household pets at the location where the animal resides. A small animal house call practice shall meet the following minimum standards:

(a) All instruments, apparatus, and apparel shall be kept clean and sanitary at all times.

(b) General anesthesia and aseptic surgical procedures shall not be performed.

(c) Prior notice shall be given to the client when the practice is closed. An answering machine or service shall be used to notify the public when the practice will be re-opened and where after-hours emergency care is available. If no after-hours emergency care is available, full disclosure shall be provided to the public prior to rendering services.

(d) A legible list of contact information for facilities or practices that provide emergency services shall be provided to the client.

(e) The disposal of waste material shall comply with all applicable federal, state, and local laws and regulations.

(f) Shall have the ability to provide diagnostic radiological services. Radiological procedures shall be conducted in accordance with Health and Safety Code standards.

(g) Shall have the ability to provide clinical pathology and histopathology diagnostic laboratory services.

(h) All drugs and biologicals shall be stored and maintained according to the manufacturer’s recommendations and administered, prescribed, and dispensed in compliance with state and federal laws.

(i) Sanitary methods for the disposal of deceased animals shall be provided.

(j) When the client has not given the veterinarian authorization to dispose of his or her deceased animal, the veterinarian shall be required to retain the carcass in a freezer for at least 14 days prior to disposal.

(k) Shall have the appropriate drugs and equipment to provide immediate emergency care at a level commensurate with the specific veterinary medical services provided.

(l) Current veterinary reference materials shall be readily available.

(m) When performing clean surgery, the instruments used to perform such surgery shall have been sterilized and the surgeon(s) and ancillary personnel shall wear appropriate apparel.

(n) For purposes of this section, “clean surgery” shall mean the performance of a surgical procedure for the treatment of a condition and under circumstances which, consistent with the standards of good veterinary medicine, do not warrant the use of aseptic surgical procedures.

Note: Authority cited: Sections 4808 and 4854, Business and Professions Code. Reference: Sections 4854 and 4883, Business and Professions Code.

2030.5. Minimum Standards – Large Animal Ambulatory Practice.

For purposes of these regulations, a “large animal ambulatory practice” shall mean a practice where veterinary medicine and its various branches are being practiced either at the location of the animal or by operating in more than one location providing veterinary services to large animals belonging to multiple clients that are not permanently housed or boarded at that location(s). For purposes of this section, large animal pertains to equine and food animals and livestock, as defined in subdivisions (c) and (d) of section 4825.1 of the code. A large animal ambulatory practice shall meet the following minimum standards:

(a) All instruments, apparatus, and apparel shall be kept clean and sanitary at all times.

(b) Prior notice shall be given to the client when the practice is closed. An answering machine or service shall be used to notify the public when the facility will be re-opened and where after-hours emergency care is available. If no after-hours emergency care is available, full disclosure shall be provided to the public prior to rendering services.

(c) The disposal of waste material shall comply with all applicable federal, state, and local laws and regulations.

(d) Shall have the ability to provide diagnostic radiological services. Radiological procedures shall be conducted in accordance with Health and Safety Code standards.

(e) Shall have the ability to provide clinical pathology and histopathology diagnostic laboratory services

(f) All drugs and biologicals shall be stored and maintained according to the manufacturer’s recommendations and administered, prescribed, and dispensed in compliance with state and federal laws.

(g) Current veterinary reference materials shall be readily available.

(h) Shall have the appropriate drugs and equipment to provide immediate emergency care at a level commensurate with the specific veterinary medical services provided.

(i) When performing clean surgery, the instruments used to perform such surgery shall have been sterilized and the surgeon(s) and ancillary personnel shall wear appropriate apparel. For purposes of this section, “clean surgery” shall mean the performance of a surgical procedure for the treatment of a condition and under circumstances which, consistent with the standards of good veterinary medicine, do not warrant the use of aseptic surgical procedures.

Note: Authority cited: Sections 4808 and 4854, Business and Professions Code. Reference: Sections 4825.1 , 4854, and 4883, Business and Professions Code.

Minimum Standards for Alternate Premises
Proposed Language – Clean Version with No Markup

Section 2030. Minimum Standards - Fixed Veterinary Premises.

The facilities and practice types in sections 2030.1 through 2030.5 are premises pursuant to section 4853 of the code and shall be registered with the board and meet all of the requirements in section 2030.05. If the facility or practice type is operated from a building or facility that is the licensee manager's principal place of business and the building or facility is registered with the board, the facility or practice type shall be considered a mobile unit and exempt from independent registration with the board.

Note: Authority cited: Sections 4808 and 4854, Business and Professions Code. Reference: Sections 4853, 4854, and 4883, Business and Professions Code.

Section 2030.05 Minimum Standards - Licensee Manager.

- (a) A Licensee Manager is the California licensed veterinarian named as the Licensee Manager on a facility's premises permit.
- (b) The Licensee Manager is responsible for ensuring that the premises for which he/she is manager complies with the requirements in sections 4853, 4854, 4855 and 4856 of the code. The Licensee Manager is responsible for ensuring that the physical and operational components of a premises meet the minimum standards of practice as set forth in sections 2030 through 2032.5 of the California Code of Regulations, Title 16, Division 20, Article 4.
- (c) The Licensee Manager is responsible for ensuring that no unlicensed activity is occurring within the premises or in any location where any function of veterinary medicine, veterinary surgery or veterinary dentistry is being conducted off the premises under the auspices of this premises license.
- (d) The Licensee Manager shall maintain whatever physical presence is reasonable within the facility to ensure that the requirements in subdivisions (a) through (c) are met.
- (e) Each licensed veterinarian shall be responsible for their individual violations of the Veterinary Medicine Practice Act or any regulation adopted thereunder.

Note: Authority cited: Sections 4808 and 4854, Business and Professions Code. Reference: Sections 4853, 4854, 4855, 4856, and 4883, Business and Professions Code.

2030.1. Minimum Standards - Small Animal Fixed Facility.

For purposes of these regulations, a “small animal fixed facility” shall mean a building where veterinary medicine and its various branches are being practiced and where veterinary services are being provided to household pets. A small animal fixed facility shall meet the following minimum standards:

In addition to the requirements in section 2030, small animal fixed premises shall provide:

- (a) All instruments, apparatus, and apparel shall be kept clean and sanitary at all times.
- (b) Indoor lighting for halls, wards, reception areas, examining and surgical rooms shall be adequate for their intended purpose.
- (c) Fire precautions shall meet the requirements of local and state fire prevention codes.
- (d) The facility, temperature, and ventilation shall be maintained so as to assure the comfort of all patients.
- (e) The floors, table tops, and counter tops in areas where animals are being treated shall be made of a material suitable for regular disinfecting and cleaning, and shall be cleaned and disinfected regularly.
- (f) Shall have a reception area and office, or a combination of the two.
- (g) Shall have an examination room separate from other areas of the facility and of sufficient size to accommodate the doctor, assistant, patient, and client.
- (h) Current veterinary reference materials shall be readily available at the facility.
- (i) All drugs and biologicals shall be stored and maintained according to the manufacturer’s recommendations and administered, prescribed, and dispensed in compliance with state and federal laws.
- (j) Shall have the ability to provide diagnostic radiological services. Radiological procedures shall be conducted in accordance with Health and Safety Code standards.
- (k) Shall have the ability to provide clinical pathology and histopathology diagnostic laboratory services.
- (l) Shall have appropriate drugs, including oxygen, and equipment to provide immediate emergency care.
- (m) The disposal of waste material shall comply with all applicable federal, state, and local laws and regulations.
- (n) If animals are housed or retained for treatment, the following shall be provided:
 - (1) Compartments or exercise runs or areas for animals shall be consistent with husbandry standards and shall be comfortable, sanitary, and provide for effective separation of animals and waste products.
 - (2) Effective separation of known or suspected contagious animals.
 - (3) Prior notice shall be given to the client if there are to be no personnel on-site during any time an animal is left at the facility. For purposes of this paragraph, prior notice may be accomplished by posting a sign in a place and manner conspicuous to the clients at the primary entrance of the premises, stating that there may be times when there are no personnel on the premises.
 - (4) When medically and/or species appropriate for a given species, where animals are kept on the veterinary premises for 24 hours or more, the animals shall be provided with an opportunity for proper exercise. Compliance with this section may be achieved by the use of exercise runs/areas or by providing the animal with the opportunity for outdoor walks.
- (o) When the facility is closed, a sign shall be posted and visible outside the primary entrance with a telephone number and location where emergency care is available. An answering machine or service shall be used to notify the public when the facility will be re-opened and where after-hours emergency care is available. If no after-hours emergency care is available, full disclosure shall be provided to the public prior to rendering services.
- (p) Anesthetic equipment in accordance with the procedures performed shall be maintained in proper working condition and available at all times.
- (q) Sanitary methods for the disposal of deceased animals shall be provided.
- (r) If aseptic surgery is performed, the following shall be provided:

- (1) A room, separate and distinct from all other rooms shall be reserved for aseptic surgical procedures which require aseptic preparations. A veterinarian may perform emergency aseptic surgical procedures in another room when the room designated for aseptic surgery is occupied or temporarily unavailable. The board may exempt a facility which is currently registered with the board, but does not have a separate aseptic surgery room, where it determines that it would be a hardship for the facility to comply with the provisions of this section. In determining whether a hardship exists, the board shall give due consideration to the following factors:
 - (A) Zoning limitations.
 - (B) Whether the facility constitutes a historical building.
 - (C) Whether compliance with this requirement would compel the veterinary practice to relocate to a new location.
- (2) Storage in the surgery room shall be limited to items and equipment normally related to aseptic surgery and surgical procedures. Equipment not normally related to surgery and surgical procedure includes, but is not limited to, equipment used for dental prophylaxis, autoclaves and non-surgical radiographic equipment.
- (3) Open shelving is prohibited in the surgical room.
- (4) Surgery room doors shall be able to be fully closed, fill the entire door space, be made of a material suitable for regular disinfecting and cleaning, and shall be cleaned and disinfected regularly, and not provide access from outside the facility when aseptic surgery services are provided.
- (5) The surgery room shall be well lighted, shall have equipment for viewing radiographs and shall have effective emergency lighting with a viable power source.
- (6) Surgical instruments and equipment shall be:
 - (A) Adequate for the type of surgical procedures performed.
 - (B) Sterilized as required by the surgical procedure performed and instruments used.
- (7) In any sterile procedure, a separate sterile pack shall be used for each animal.
- (8) All instruments, packs, and equipment shall be sterilized and have an indicator that reacts to and verifies sterilization.
- (9) The following attire shall be required for aseptic surgery:
 - (A) Each member of the surgical team shall put on an appropriate sanitary cap and sanitary mask which covers his or her hair and mouth, nose and any facial hair, except for eyebrows or eyelashes. All members of the surgical team who will be handling the instruments or touching the surgical site shall wear sterilized surgical gowns with long sleeves and sterilized gloves.
 - (B) Ancillary personnel in the surgery room shall wear clean clothing, footwear, sanitary cap and mask.
- (s) When performing clean surgery, the instruments used to perform such surgery shall have been sterilized and the surgeon(s) and ancillary personnel shall wear appropriate apparel. For purposes of this section, "clean surgery" shall mean the performance of a surgical procedure for the treatment of a condition and under circumstances which, consistent with the standards of good veterinary medicine, do not warrant the use of aseptic surgical procedures.

Note: Authority cited: Sections 4808 and 4854, Business and Professions Code. Reference: Sections 4854 and 4883, Business and Professions Code.

2030.2. Minimum Standards - Small Animal Mobile Facility.

For purposes of these regulations, a “small animal mobile facility” shall mean a mobile unit or vehicle where veterinary medicine and its various branches are being practiced and where veterinary services are being provided to household pets. A small animal mobile facility shall meet the following minimum standards:

- (a) All instruments, apparatus, and apparel shall be kept clean and sanitary at all times.
- (b) Shall have hot and cold water.
- (c) Shall have a 110-power source for diagnostic equipment.
- (d) Shall have a collection tank for disposal of waste material.
- (e) Indoor lighting for halls, wards, reception areas, examining and surgical rooms, which shall be adequate for its intended purpose.
- (f) Fire precautions shall meet the requirements of local and state fire prevention codes.
- (g) The facility, temperature, and ventilation controls shall be maintained so as to assure the comfort of all patients.
- (h) The floors, table tops, and counter tops shall be made of a material suitable for regular disinfecting and cleaning, and shall be cleaned and disinfected regularly.
- (i) Shall have an examination room of sufficient size to accommodate the doctor, assistant, patient, and client.
- (j) Current veterinary reference materials shall be readily available at the facility.
- (k) All drugs and biologicals shall be stored and maintained according to the manufacturer’s recommendations and administered, prescribed, and dispensed in compliance with state and federal laws.
- (l) Shall have the ability to provide diagnostic radiological services. Radiological procedures shall be conducted in accordance with Health and Safety Code standards.
- (m) Shall have the ability to provide clinical pathology and histopathology diagnostic laboratory services.
- (n) Shall have appropriate drugs, including oxygen, and equipment to provide immediate emergency care.
- (o) The disposal of waste material shall comply with all applicable federal, state, and local laws and regulations.
- (p) If animals are housed or retained for treatment, the following shall be provided:
 - (1) Compartments or exercise runs or areas for animals shall be consistent with husbandry standards and shall be comfortable, sanitary, and provide for effective separation of animals and waste products.
 - (2) Effective separation of known or suspected contagious animals.
 - (3) When medically appropriate for a given species, where animals are kept at the facility for 24 hours or more, the animals shall be provided with an opportunity for proper exercise. Compliance with this section may be achieved by the use of exercise runs/areas or by providing the animal with the opportunity for outdoor walks.
 - (4) Prior notice shall be given to the client if there are to be no personnel on-site during any time an animal is left at the facility.
- (q) Prior notice shall be given to the client when the facility is closed. An answering machine or service shall be used to notify the public when the facility will be re-opened and where after hour emergency care is available. If emergency services are not provided by the facility, a legible list of contact information for facilities or practices that provide emergency services shall be provided to the client. If no after-hour emergency care is available, full disclosure shall be provided to the public prior to rendering services.
- (r) Anesthetic equipment in accordance with the procedures performed shall be maintained in proper working condition and available at all times.
- (s) Sanitary methods for the disposal of deceased animals shall be provided.
- (t) When the client has not given the veterinarian authorization to dispose of his or her deceased animal, the veterinarian shall be required to retain the carcass in a freezer for at least 14 days prior to disposal.

- (u) If aseptic surgery is performed, the following shall be provided:
- (1) A room, separate and distinct from all other rooms, which shall be reserved for aseptic surgical procedures. A veterinarian may perform emergency aseptic surgical procedures in another room when the room designated for aseptic surgery is occupied or temporarily unavailable.
 - (2) Shall have an examination area separate from the surgery room.
 - (3) Storage in the surgery room shall be limited to items and equipment normally related to surgery and surgical procedures. Equipment not normally related to surgery and surgical procedure includes, but is not limited to, equipment used for dental prophylaxis, autoclaves, and non-surgical radiographic equipment.
 - (4) Open shelving is prohibited in the surgical room.
 - (5) The surgical room shall not contain a functional sink with an open drain.
 - (6) The surgery room shall be well lighted, shall have equipment for viewing radiographs and shall have effective emergency lighting with a viable power source.
 - (7) Surgical instruments and equipment shall be:
 - (A) Adequate for the type of surgical procedures performed.
 - (B) All instruments, packs, and equipment shall be sterilized and have an indicator that reacts to and verifies sterilization
 - (C) A separate sterile pack shall be used for each animal.
 - (8) Surgery room doors shall be able to be fully closed, fill the entire door space, be made of a material suitable for regular disinfecting and cleaning, and shall be cleaned and disinfected regularly.
 - (9) The following attire shall be required:
 - (A) Each member of the surgical team shall put on an appropriate sanitary cap and sanitary mask which covers his or her hair and mouth, nose and any facial hair, except for eyebrows or eyelashes. All members of the surgical team who will be handling the instruments or touching the surgical site shall wear sterilized surgical gowns with long sleeves and sterilized gloves.
 - (B) Ancillary personnel in the surgery room shall wear clean clothing, footwear, sanitary cap and mask.
 - (10) When performing clean surgery, the instruments used to perform such surgery shall have been sterilized and the surgeon(s) and ancillary personnel shall wear appropriate apparel. For purposes of this section, "clean surgery" shall mean the performance of a surgical procedure for the treatment of a condition and under circumstances which, consistent with the standards of good veterinary medicine, do not warrant the use of aseptic surgical procedures.

Note: Authority cited: Sections 4808 and 4854, Business and Professions Code. Reference: Sections 4853 and 4854, Business and Professions Code.

2030.3. Minimum Standards - Animal Vaccination Practice.

For purposes of these regulations, an “animal vaccination practice” shall mean a location where the scope of veterinary practice is limited to only vaccinations and preventative procedures for parasitic control. An animal vaccination practice shall meet the following minimum standards:

- (a) All instruments, apparatus, and apparel shall be kept clean and sanitary at all times.
- (b) Diagnostic tests shall not be performed, and dangerous drugs shall not be prescribed or dispensed.
- (c) A veterinarian must remain on site throughout the duration of a vaccination practice. The veterinarian is responsible for proper vaccination and preventative procedures for parasite control and the completeness of recommendations made to the public by the paraprofessional staff that the veterinarian supervises or employs. The veterinarian is responsible for documenting that the patient appears healthy enough to receive vaccines or preventable parasiticides as well as providing consultation and referral of clients when disease is detected or suspected.
- (d) Lighting shall be adequate for the procedures to be performed in the vaccination practice.
- (e) Fire precautions shall meet the requirements of local and state fire prevention codes.
- (f) When applicable, floors, table tops, and counter tops in areas where animals are being treated shall be made of a material suitable for regular disinfecting and cleaning, and shall be cleaned and disinfected regularly.
- (g) The disposal of waste material shall comply with all applicable federal, state, and local laws and regulations.
- (h) Current veterinary reference materials shall be readily available at the practice.
- (i) All drugs and biologicals shall be stored and maintained according to the manufacturer’s recommendations and administered in compliance with state and federal laws.
- (j) Shall have the appropriate drugs and equipment to provide immediate emergency care at a level commensurate with the specific veterinary medical services provided.
- (k) Equipment shall be of the type and quality to provide for the delivery of vaccines and parasiticides in the best interest of the patient and with safety to the public.
- (l) Fresh, clean water shall be available for sanitizing and first aid. Disposable towels and soap shall be readily available.
- (m) A legible list of contact information for facilities or practices that provide or advertise emergency services shall be provided to the client.
- (n) Maintain records of all vaccinations and drugs administered to each patient for a minimum of three (3) years from the date that they were administered.
- (o) The veterinarian shall be identifiable to the public, including, but not limited to the posting of the veterinarian’s license, as set forth in section 4850 of the code.

Note: Authority cited: Sections 4808 and 4854, Business and Professions Code. Reference: Sections 4853, 4854, and 4883, Business and Professions Code.

Section 2030.4. Minimum Standards – Small Animal House Call Practice.

For purposes of these regulations, a “small animal house call practice” shall mean one in which veterinary medicine and its various branches are being practiced and where veterinary services are being provided to household pets at the location where the animal resides. A small animal house call practice shall meet the following minimum standards:

- (a) All instruments, apparatus, and apparel shall be kept clean and sanitary at all times.
- (b) General anesthesia and aseptic surgical procedures shall not be performed.
- (c) Prior notice shall be given to the client when the practice is closed. An answering machine or service shall be used to notify the public when the practice will be re-opened and where after-hours emergency care is available. If no after-hours emergency care is available, full disclosure shall be provided to the public prior to rendering services.
- (d) A legible list of contact information for facilities or practices that provide emergency services shall be provided to the client.
- (e) The disposal of waste material shall comply with all applicable federal, state, and local laws and regulations.
- (f) Shall have the ability to provide diagnostic radiological services. Radiological procedures shall be conducted in accordance with Health and Safety Code standards.
- (g) Shall have the ability to provide clinical pathology and histopathology diagnostic laboratory services.
- (h) All drugs and biologicals shall be stored and maintained according to the manufacturer’s recommendations and administered, prescribed, and dispensed in compliance with state and federal laws.
- (i) Sanitary methods for the disposal of deceased animals shall be provided.
- (j) When the client has not given the veterinarian authorization to dispose of his or her deceased animal, the veterinarian shall be required to retain the carcass in a freezer for at least 14 days prior to disposal.
- (k) Shall have the appropriate drugs and equipment to provide immediate emergency care at a level commensurate with the specific veterinary medical services provided.
- (l) Current veterinary reference materials shall be readily available.
- (m) When performing clean surgery, the instruments used to perform such surgery shall have been sterilized and the surgeon(s) and ancillary personnel shall wear appropriate apparel.
- (n) For purposes of this section, “clean surgery” shall mean the performance of a surgical procedure for the treatment of a condition and under circumstances which, consistent with the standards of good veterinary medicine, do not warrant the use of aseptic surgical procedures.

Note: Authority cited: Sections 4808 and 4854, Business and Professions Code. Reference: Sections 4854 and 4883, Business and Professions Code.

2030.5. Minimum Standards – Large Animal Ambulatory Practice.

For purposes of these regulations, a “large animal ambulatory practice” shall mean a practice where veterinary medicine and its various branches are being practiced either at the location of the animal or by operating in more than one location providing veterinary services to large animals belonging to multiple clients that are not permanently housed or boarded at that location(s). For purposes of this section, large animal pertains to equine and food animals and livestock, as defined in subdivisions (c) and (d) of section 4825.1 of the code. A large animal ambulatory practice shall meet the following minimum standards:

- (a) All instruments, apparatus, and apparel shall be kept clean and sanitary at all times.
- (b) Prior notice shall be given to the client when the practice is closed. An answering machine or service shall be used to notify the public when the facility will be re-opened and where after-hours emergency care is available. If no after-hours emergency care is available, full disclosure shall be provided to the public prior to rendering services.
- (c) The disposal of waste material shall comply with all applicable federal, state, and local laws and regulations.
- (d) Shall have the ability to provide diagnostic radiological services. Radiological procedures shall be conducted in accordance with Health and Safety Code standards.
- (e) Shall have the ability to provide clinical pathology and histopathology diagnostic laboratory services
- (f) All drugs and biologicals shall be stored and maintained according to the manufacturer’s recommendations and administered, prescribed, and dispensed in compliance with state and federal laws.
- (g) Current veterinary reference materials shall be readily available.
- (h) Shall have the appropriate drugs and equipment to provide immediate emergency care at a level commensurate with the specific veterinary medical services provided.
- (i) When performing clean surgery, the instruments used to perform such surgery shall have been sterilized and the surgeon(s) and ancillary personnel shall wear appropriate apparel. For purposes of this section, “clean surgery” shall mean the performance of a surgical procedure for the treatment of a condition and under circumstances which, consistent with the standards of good veterinary medicine, do not warrant the use of aseptic surgical procedures.

Note: Authority cited: Sections 4808 and 4854, Business and Professions Code. Reference: Sections 4825.1, 4854, and 4883, Business and Professions Code.

Veterinary Medical Board

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MEMORANDUM

DATE	August 13, 2018
TO	Veterinary Medical Board
FROM	Amanda Drummond, Administrative Programs Coordinator
SUBJECT	Amend Sections 2032.15 and 2032.25, Article 4, Division 20, Title 16 of the California Code of Regulations (CCR) Regarding Veterinarian-Client-Patient Relationships (VCPRs).

Background:

The Minimum Standards of Practice regulations were last amended and took effect January 1, 2014. Due to clarity questions that arose out of the newly enacted language, the Veterinary Medical Board (Board) delegated the issue of clarifying recent changes to the minimum standards to the Multidisciplinary Advisory Committee (MDC). At the October 2014 meeting, the MDC noted several amendments that would further clarify the intent of the minimum standards to make them consistent with other provisions in the Veterinary Medicine Practice Act and forwarded their recommendations to the Board.

In April of 2015, the Board reviewed the proposed regulations regarding Minimum Standards, agreed to various revisions to the proposed language, and approved the language as amended. The approved language originally included CCR amendments to sections 2030-2037.

The Board subsequently voted to separate out CCR section 2032.1 (Telemedicine) and push it through the regulatory rulemaking process as its own stand-alone regulation. During the same time period, the Board had also requested the California Veterinary Medical Association (CVMA) to initiate a taskforce and discuss premise practice types as part of the Minimum Standards of Practice. This discussion and the CVMA task force recommendation eventually became proposed regulations encompassing Minimum Standards for Alternate Veterinary Premises.

As a byproduct of separating out telemedicine and addressing alternate premises minimum standards separately, the previously approved CCR sections 2032.15 and 2032.25 (that were originally part of the approved April 2015 proposed regulations) were overlooked and did not move forward as their own separate rulemaking file. Additionally, the motion made by the Board at the April 2015 meeting did not meet requirements for a complete motion needed for Board staff to proceed with initiating the rulemaking file.

The proposed regulations regarding CCR sections 2032.15 and 2032.25 are now before the Board to review and make a complete motion to delegate Board staff to proceed with initiating the rulemaking file; alternatively, the Board may further review the previously approved language and recommend additional revisions.

Attachments:

- Proposed changes to CCR sections 2032.15 and 2032.25 as approved at the April 2015 Board meeting.

California Code of Regulations Sections 2032.15 and 2032.25 - VCPRs

2032.15. Veterinarian-Client-Patient Relationship in Absence of Client Communication

(a) A veterinary-client-patient relationship may continue to exist, in the absence of client communication, when:

(1) A veterinary-client-patient relationship was established with an original veterinarian, and another designated veterinarian serves at the same location where the medical records are kept in the absence of the original veterinarian, and;

(2) The designated veterinarian has assumed responsibility for making medical judgments regarding the health of the animal(s), and;

(3) The designated veterinarian has sufficient knowledge of the animal(s) to initiate at least a general or preliminary diagnosis of the medical condition of the animal(s). This means that the veterinarian is personally acquainted with the care of the animal(s) by virtue of an examination of the animal(s) or by medically appropriate and timely visits to the premises where the animal(s) is kept, or has consulted with the veterinarian who established the veterinary-client-patient relationship, and;

(4) The designated veterinarian has continued the medical, treatment, diagnostic and/or therapeutic plan that was set forth and documented in the medical record by the original veterinarian.

(b) If the medical, treatment, diagnostic and/or therapeutic plan differs from that which was communicated to the client by the original veterinarian, then the designated veterinarian must attempt to communicate the necessary changes with the client in a timely manner.

2032.25. Written Prescriptions in Absence of Originally Prescribing Veterinarian.

(a) Prescribing, dispensing, or furnishing dangerous drugs as defined in Section 4022 of the Business and Professions Code ~~without an appropriate prior examination and a medical indication,~~ absent establishing a veterinary-client-patient-relationship (VCPR) as defined in 2031.1 constitutes unprofessional conduct.

(b) No licensee shall be found to have committed unprofessional conduct within the meaning of this section if, at the time the drugs were prescribed, dispensed, or furnished, any of the following applies:

(1) The licensee was a veterinarian serving in the absence of the treating veterinarian and the drugs were prescribed, dispensed, or furnished on an emergency basis for a traveling patient only as necessary to maintain the health of animal patient until they can return of to the originally treating veterinarian, but in any case no longer than 72 hours. Prior to providing a prescription refill pursuant to this section, the veterinarian shall make a reasonable effort to contact the original prescribing veterinarian, and shall document the communication, or his or her attempt to contact the original prescribing veterinarian, in the medical record.

(2) The original prescribing veterinarian is unavailable to authorize the refill, and the veterinarian authorizing the refill is working in the same practice as the original prescribing veterinarian, and: The veterinarian transmitted the order for the drugs to another veterinarian or registered veterinary technician and both of the following conditions exist:

(A) ~~The licensee had consulted with the veterinarian or registered veterinary technician who had reviewed the patient's records.~~

(B) ~~The licensee was designated as the veterinarian to serve in the absence of the animal patient's veterinarian.~~

~~(3)~~ (A) The licensee was a veterinarian serving in the absence of the treating veterinarian, veterinarian authorizing the refill was in possession of and had reviewed the animal patient's records, and ordered the renewal of a medically indicated prescription for an amount not exceeding the original prescription in strength or amount or for more than one refill and enters the prescription refill in the patient's medical record.

(B) In the veterinarian's professional judgment, failure to refill the prescription may interrupt the patient's ongoing care and have an adverse effect on the patient's well-being.

Veterinary Medical Board

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MEMORANDUM

DATE	August 2018
TO	Veterinary Medical Board
FROM	Ethan Mathes, Operations Manager
SUBJECT	Amend Sections 2036.1, 2064, 2065, 2065.1, 2065.2, 2065.6, 2065.7, 2065.8, 2066, and 2068.5 of Title 16 of the California Code of Regulations (CCR) Regarding Registered Veterinary Technician (RVT) School Approval and RVT Student Exemption

Background:

Over the course of the last several years, the Board discussed and amended several RVT-related regulations. These proposed amendments included California RVT American Veterinary Medical Association accreditation and school approval, RVT “alternate route” program review and approval, and RVT student exemptions. The proposed regulation sections were originally approved by the Board at various Board meetings between July 2015 and July 2016, separated by each RVT-related issue.

Due to the similarity of RVT-related subject matter in the proposed regulations, and to expedite the filing of regulations, the sections were combined into one regulatory package which was reviewed and approved by the Board at its July 2017 meeting.

Staff subsequently initiated the preparation of the rulemaking file; however, upon review of the proposed language, staff determined additional technical and clarifying amendments to the proposed language should be considered. The proposed amendments are printed in color on the attached; the amendments propose changes to:

- CCR Section 2036.1 – technical cleanup
- CCR Section 2064 – technical cleanup
- CCR Section 2065 – technical cleanup and to make language consistent with other regulatory sections regarding monitoring of student pass rates to include both California and national examination
- CCR Section 2065.1 – technical cleanup and other amendments to make language consistent with other regulatory sections that provide allowance for programs to offer additional education units/hours beyond minimum requirements

- CCR Section 2065.2 – technical cleanup and to make language consistent with other regulatory sections regarding monitoring of student pass rates to include both California and national examination
- CCR Section 2065.7 – technical cleanup and to make language consistent with other regulatory sections regarding monitoring of student pass rates to include both California and national examination
- CCR Section 2065.8 – technical cleanup
- CCR Section 2066 – technical cleanup
- CCR Section 2068.5 – technical cleanup and update cutoff date to sunset the existing ad hoc “alternate route” pathway to align with expected timeline to enact regulations, create program inspection standards and application, conduct program review and inspection, and obtain Board approval of programs

Action(s) Requested

Review and discuss the attached proposed language and consider adopting amendments for public notice of the proposed regulatory action and 45-day public comment period.

Attachments:

- Proposed RVT Regulations—Registered Veterinary Technician (RVT) School Approval and RVT Student Exemption - Sections 2036.1, 2064, 2065, 2065.1, 2065.2, 2065.6, 2065.7, 2065.8, 2066, and 2068.5, of Title 16 of the California Code of Regulations

California Code of Regulations
Title 16. Professional and Vocational Regulations
Division 20. Veterinary Medical Board

PROPOSED LANGUAGE

Proposed amendments to the regulatory language are shown in single underline for new text and ~~single strikethrough~~ for deleted text.

§ 2036.1. Animal Health Care Tasks for R.V.T. Students.

(a) Notwithstanding section 2036, students in their final year of a board-approved veterinary technology program shall be exempt from R.V.T. registration by the board while performing animal health care tasks pursuant to Section 2036, as part of the clinical portion of their studies, as long as all of the following conditions are met:

(1) The students are under the immediate supervision of a California licensed veterinarian or ~~registered veterinary technician~~R.V.T. As used herein, "immediate supervision" means that the veterinarian or R.V.T. establishes a one-to-one relationship with the student, is directly engaged with the student treating the patient, and maintains continuous physical presence during the student's treatment of the patient.

(2) If students are supervised by an R.V.T., the R.V.T. shall be under the direct supervision of the veterinarian, notwithstanding any other provision of law or regulations.

(b) As used herein, "students in their final year of a board-approved veterinary technology program," are those individuals who, in the opinion of program instructors, have knowledge and familiarity with R.V.T animal health care tasks, and have completed a sufficient portion of the classroom and clinical instruction set forth in subsections (a)(1) and (a)(2) of section 2065 or ~~subsection~~ (b) of section 2065.1.

Note: Authority: Sections 4808 and 4841.1, Business and Professions Code. Reference: Sections ~~4808 and~~ 4841.1, Business and Professions Code.

§ 2064. Approval of Schools Accredited by the American Veterinary Medical Association.

For purposes of section 4843 of the code, ~~All~~ schools or degree programs fully accredited~~accredited~~ by the American Veterinary Medical Association (AVMA) shall be

deemed approved by the board to have met the minimum requirements of section 2065(a), (b), (d), and (e). Such schools and degree programs shall also be exempt from the initial inspection requirements of subsection (a) of section 2065.7(a). Re-approval inspections shall be at the discretion of the board. All other requirements of section 2065, and all other sections applicable to schools or degree programs seeking board approval, continue to apply and must be demonstrated in the school's or degree program's application for board re-approval. Nothing in this section shall be construed to prohibit the board from disapproving or withdrawing approval from any school or degree program not complying with the requirements of this division or of any provision of the Veterinary Medicine Practice Act. Approval under this section shall automatically terminate upon loss of accreditation by the AVMA.

Note: Authority cited: Section 4808, Business and Professions Code. Reference: Sections 4841.5 and 4843, Business and Professions Code.

§ 2065. Minimum Requirements for Approved Schools or Degree Programs.

Schools or degree programs seeking approval from the board shall meet all of the following minimum requirements:

(a) The curriculum shall consist of:

- (1) a minimum of 600 hours of classroom instruction,
- (2) a minimum of 200 hours of clinical instruction, and
- (3) an externship consisting of at least 200 hours.

(b) The curriculum shall cover applicable safety training in all coursework. Coursework shall include the following:

- (1) Principles of anatomy and physiology,
- (2) Biology and chemistry,
- (3) Applied mathematics,
- (4) Orientation to the vocation of veterinary technology,
- (5) Ethics and jurisprudence in veterinary medicine including applicable regulatory requirements,
- (6) Anesthetic nursing and monitoring including anesthetic evaluation, induction, and maintenance. It shall also include care and use of anesthetic and monitoring equipment,
- (7) Animal husbandry, including restraint, species and breed identification, sex determination and sanitation,
- (8) Animal nutrition and feeding,
- (9) Client communication,

(10) Dental care of companion and laboratory animals including prophylaxis and extractions,

(11) Diseases and nursing management of companion, food, and laboratory animals including zoonoses,

(12) Emergency and critical care nursing,

(13) Laboratory procedures to include clinical biochemistry, cytology, hematology, immunology, basic microbiology, parasitology, and urine analysis testing,

(14) Imaging to include radiography, basic endoscopy, ultrasound principles, and radiation safety principles,

(15) Medical terminology,

(16) Medical office management including medical record keeping and drug control,

(17) Basic necropsy techniques including specimen collection and handling,

(18) Pharmacology, and

(19) Surgical nursing and assisting including instrumentation, suturing, bandaging and splinting.

(c) Each student shall be supervised during the externship or clinical rotation by a veterinarian or registered veterinary technician who is located at the site of the externship or clinical rotation. The school or degree program shall have a written agreement with the site that specifies the expectations and responsibility of the parties. A staff member of the school or degree program shall visit the site prior to beginning the externship or clinical rotation relationship and at least once annually following the initial inspection.

(d) The library facilities of the school or degree program must be adequate for the conducting of the educational program.

(e) The physical plant and equipment used for instruction in the academic teaching shall be adequate for the purposes intended.

(f)(1) The faculty shall include a California licensed veterinarian employed by the school or degree program as an advisor, administrator, or instructor. Instructors shall include, but need not be limited to a California registered veterinary technician. If there is any change in the faculty, the board must be immediately notified.

(2) Instructors shall be knowledgeable, current, skillful, and possess at least two years of experience in performing or teaching in the specialized area in which they are teaching. Each instructor shall have or currently be receiving training in current teaching methods. The school or degree program shall effectively evaluate the teaching ability of each instructor.

(3) The school or degree program shall have a director who meets the requirements of ~~subdivision subsection~~ (f)(2) and who shall hold a current active California license as a veterinarian or registration as an RVT. The director shall have a minimum of three years' experience as a veterinarian or RVT. This shall include one year of experience

in teaching, administration, or clinical supervision or a combination thereof within the last five years. The director shall have completed or be receiving course work in administration.

(4) In the absence of a director, the school or degree program may appoint an interim director. The interim director shall meet the requirements of [subsection \(f\)\(3\)](#), except that the interim director may have applied for, but not yet have received licensure or registration. The school or degree program shall not have an interim director for a period exceeding eighteen months.

(g) The number of students enrolled shall be at a ratio to the number of faculty and size of the facilities which is not detrimental to the quality of education. When animal patients are used as part of the curriculum the ratio shall be adequate to protect the health and safety of the animal patients and the students, taking into consideration the species of animal being treated.

(h) All students admitted shall possess a high school diploma or its equivalent.

(i) The school or degree program shall be part of an institution that is approved by the Department of Consumer Affairs, Bureau for Private Postsecondary Education, or its successor agency, or accredited by a regional or national accrediting agency recognized by the United States Department of Education.

(j) Every school or degree program shall be in compliance with the laws regulating the practice of veterinary medicine and the regulations adopted pursuant thereto.

(k) Any instruction covered under subsection (a)(3) shall be in a facility that is in compliance with registration requirements of ~~Business and Professions Code~~ section 4853 [of the code](#).

(l) The schools or degree programs shall provide each prospective student, prior to enrollment, with literature which discloses the school's or degree program's pass rate for first time candidates and the state average pass rate for first time candidates on the [national veterinary technician examination and the California veterinary technician examination board's registered veterinary technician examination](#) during the two-year period immediately preceding the student's proposed enrollment and a description of the requirements for registration as a registered veterinary technician.

(m) The schools or degree programs shall provide each prospective veterinary technology student prior to enrollment written information regarding transferability of the units they receive in the courses that they take and shall post the information at all times in a conspicuous location at its facility so that there is ample opportunity for the veterinary technology students to read the information.

Note: Authority cited: Section 4808, Business and Professions Code. Reference: Sections 4830, 4841.5, 4843 and 4853, Business and Professions Code.

Commented [WT1]: Technical correction for consistency with other regulations.

Commented [ME2]: Clarify and make consistent with other sections that require a program's student's examination pass rates are measured against state average pass rate

§ 2065.1. Minimum Requirements for Practical Experience and Education Equivalent Programs.

Practical Experience and Education Equivalent Programs seeking approval from the board shall meet all of the following minimum requirements:

(a) The education shall consist of a **total minimum** of 20 semester units, 30 quarter units, or 300 hours of instruction. The education shall be provided by a postsecondary academic institution and shall be accumulated in the fundamentals and principles of all of the following subjects:

Commented [ME3]: Clarify and make consistent with 16 CCR 2065 and make allowance for programs to provide additional education if needed

- (1) Principles of anatomy and physiology.
- (2) Biology and chemistry.
- (3) Applied mathematics.
- (4) Orientation to the vocation of veterinary technology.
- (5) Ethics and jurisprudence in veterinary medicine, including applicable regulatory requirements.
- (6) Anesthetic nursing and monitoring, including anesthetic evaluation, induction, and maintenance. It shall also include care and use of anesthetic and monitoring equipment.
- (7) Animal husbandry, including restraint, species and breed identification, sex determination and sanitation.
- (8) Animal nutrition and feeding.
- (9) Client communication.
- (10) Dental care of companion and laboratory animals, including prophylaxis and extractions.
- (11) Diseases and nursing management of companion, food, and laboratory animals, including zoonoses.
- (12) Emergency and critical care nursing.
- (13) Laboratory procedures, including clinical biochemistry, cytology, hematology, immunology, basic microbiology, parasitology, and urine analysis testing.
- (14) Imaging, including radiography, basic endoscopy, ultrasound principles, and radiation safety principles.
- (15) Medical terminology.
- (16) Medical office management, including medical record keeping and drug inventory control.
- (17) Basic necropsy techniques, including specimen collection and handling.

(18) Pharmacology, and

(19) Surgical nursing and assisting, including instrumentation, suturing, bandaging, and splinting.

(b) The practical experience shall consist of at least 4,416 hours, completed in no less than 24 months, of directed clinical practice under the direct supervision of a California licensed veterinarian who shall attest to the completion of that experience at the time the application is made to the board for the registered veterinary technician examination. This experience shall have been completed by the applicant within five (5) years prior to the date of the examination and any subsequent re-examination for registration as a registered veterinary technician.

(c) The directed clinical practice required in ~~subdivision-subsection~~ (b) shall have provided the applicant with knowledge, skills, and abilities in the areas of communication with clients, patient examinations, emergency procedures, laboratory procedures, diagnostic imaging, surgical assisting, anesthesia, animal nursing, nutrition, dentistry, animal behavior, and pharmacology. The supervising veterinarian(s) shall complete a check list attesting to proficiency in specific skill areas within the preceding categories.

Note: Authority cited: Section 4808, Business and Professions Code. Reference: Sections 4841.5 and 4843, Business and Professions Code.

§ 2065.2. Practical Experience and Education Equivalent Program Criteria.

(a) Programs shall verify that students entering a program have completed 2,208 of the required 4,416 hours of directed clinical practice as defined in ~~subdivision-subsection~~ (b) of section 2065.1 within the five (5) years immediately preceding entrance into the program.

(b) The library facilities or on-line resources of the program must be adequate for the conducting of the educational program.

(c) Any equipment used for instruction shall be adequate for the purposes intended.

(d)(1) The faculty shall include a California licensed veterinarian employed by the program as an advisor, administrator, or instructor. Instructors shall include, but need not be limited, to a California registered veterinary technician. If there is any change in the faculty, the board must be immediately notified.

(2) Instructors shall be knowledgeable, skillful, and possess at least two years of experience in teaching in the specific area of instruction, or shall have two years of clinical experience in the specific area in which they are teaching. Each instructor shall currently be receiving training in teaching methods. The program shall effectively evaluate the teaching ability of each instructor.

(3) The program shall have a director who holds a current active California license as a veterinarian or registration as a registered veterinary technician. The director shall have

a minimum of three years of experience as a veterinarian or registered veterinary technician. This shall include one year of experience in teaching, administration, or clinical supervision or a combination thereof within the last five years. The director shall have completed or be receiving course work in administration.

(4) In the absence of a director, the program may appoint an interim director. The interim director shall meet the requirements of subsection (d)(3), except that the interim director may have applied for, but not yet have received licensure or registration. The program shall not have an interim director for a period exceeding eighteen months.

(e) The number of students enrolled shall be at a ratio to the number of faculty and size of the facilities which is not detrimental to the quality of education at the institution.

(f) All students admitted shall possess a high school diploma or its equivalent.

(g) Every program shall be in compliance with the laws regulating the practice of veterinary medicine and the regulations adopted pursuant thereto.

(h) If the veterinary technology program is offered by an institution that meets the definition of section 94858 of the Education Code, and is not otherwise exempt pursuant to section 94874 of Education Code, the institution shall be approved by the Department of Consumer Affairs, Bureau for Private Postsecondary Education, or its successor agency, to offer the program. Programs located out of state, must be part of an institution that is accredited by a regional or national accrediting agency recognized by the United States Department of Education and have the authority to offer the program in the state of origin.

(i) The program shall have adequate resources for conducting education and training and may include Internet resources.

(j) The program shall provide each prospective student, prior to enrollment, with literature which discloses the program's pass rate for first time candidates and the state average pass rate for first time candidates on the [national veterinary technician examination](#) and the [California veterinary technician examination board's registered veterinary technician examination](#) during the two-year period immediately preceding the student's proposed enrollment and a description of the requirements for registration as a registered veterinary technician.

Commented [ME4]: Clarify and make consistent with other sections that require a program's student's examination pass rates are measured against state average pass rate

(k) The program shall provide each prospective veterinary technology student prior to enrollment written information regarding transferability of the units they receive in the courses that they take and shall post the information at all times in a conspicuous location at its facility so that there is ample opportunity for the veterinary technology students to read the information.

Note: Authority cited: Section 4808, Business and Professions Code. Reference: Sections 4841.5 and 4843, Business and Professions Code.

§ 2065.6. School and Degree Program Approval Process.

The following procedures shall be applicable to a school or degree program applying to the board for initial approval of its registered veterinary technician curriculum in accordance with sections 2065 or 2065.1 of these rules:

(a) The board shall conduct a qualitative review and assessment of the school's or degree program's registered veterinary technician curriculum through a comprehensive onsite review process, performed by an inspection team impaneled by the board for that purpose.

(b) After reviewing the inspection team's evaluation report and recommendations, the board shall take one of the following actions:

(1) Grant provisional approval for a period not to exceed two years. An additional two-year provisional approval may be granted by the board for good cause.

(2) Disapprove the application.

(c) For a school or degree program that does not have American Veterinary Medical Association (AVMA) accreditation, but offers a registered veterinary technician curriculum in accordance with sections 2065 or 2065.1, the board shall not grant full approval until the curriculum has been in operation under provisional approval for at least two years and the board has determined that the curriculum is in full compliance with the provisions of sections 2065 or 2065.1.

(d) For a school or degree program that has full AVMA accreditation, the board may grant full approval.

(e) For a school or degree program that has provisional or probationary AVMA accreditation, the board shall grant provisional approval on the same terms as all other schools or degree programs until such time as the AVMA grants full accreditation, at which time the board may grant the school or degree program full approval subject to compliance with section 2064.

Note: Authority cited: Section 4808, Business and Professions Code. Reference: Sections 4841.5 and 4843, Business and Professions Code.

§ 2065.7. Inspections.

(a) Where either provisional or full approval has been granted, the board shall conduct subsequent inspections every 4 years, notwithstanding other provisions of this section.

(b) At the board's discretion, the board may conduct an audit, records review, and on-site inspection of a school or degree program which offers a registered veterinary technician curriculum in accordance with sections 2065 or 2065.1 at any time, including, but not limited to, where:

(1) It believes the school or degree program has substantially deviated from the standards for approval,

(2) For a period of two years, the approved school's or degree program's yearly average pass rate on the [national veterinary technician examination and the California veterinary technician examination](#) ~~Veterinary Technician National Examination registration examination~~ falls below 10 percentage points of the state average pass rate for first time candidates for the registered veterinary technician examination.

Commented [ME5]: Clarify and make consistent with other sections that require a program's student's examination pass rates are measured against state average pass rate

(3) There has been change of director in charge of the curriculum for training registered veterinary technicians.

(c) Schools and degree programs ~~accredited~~ accredited by the American Veterinary Medical Association in accordance with section 2064 shall be exempt from the initial inspection. ~~Inspections conducted for re-approval of such schools or degree programs shall be at the discretion of the board.~~ Following initial approval, such schools and degree programs shall be subject to periodic audits, records review, and on-site inspection at the discretion of the board.

Note: Authority cited: Section 4808, Business and Professions Code. Reference: Sections 4841.5 and 4843, Business and Professions Code.

§ 2065.8. Probation.

(a) The board may place a school or degree program on probation for a prescribed period of time not to exceed 2 years, in the following circumstances:

(1) The board determines that an approved school or degree program is not maintaining the standards for approval required by the board.

(2) For a period of two years the approved school's or degree program's yearly average pass rate for the first time candidates who have taken the [national veterinary technician examination and the California veterinary technician examination](#) ~~California registered veterinary technician examination and the Veterinary Technician National Examination registration examination~~ falls below 10 percentage points of the state average pass rate for first time candidates who have taken the registered veterinary technician examination during the same time period.

Commented [ME6]: Clarify and make consistent with other sections that require a program's student's examination pass rates are measured against state average pass rate

(3) The use of false or misleading advertising.

(4) Aiding or abetting in any acts that are in violation of any of the provisions of this division or any provision of the Veterinary Medicine Practice Act.

(b) During the period of probation, the school or degree program shall be subject to special monitoring. The conditions for probation may include the submission of periodic reports as prescribed by the board and special visits by authorized representatives of the board to determine progress toward total compliance.

(c) The board may extend the probationary period for good cause.

(d) The school or degree program shall notify in writing all current and prospective students and employees of the probationary status.

Note: Authority cited: Section 4808, Business and Professions Code. Reference: Sections 4841.5 and 4843, Business and Professions Code.

§ 2066. Out of State Schools.

(a) Candidates who have completed a course of study at a school or a degree program located outside of California and accredited by the American Veterinary Medical Association AVMA shall be deemed to have completed the equivalent of a two-year curriculum in veterinary technology.

(b) Candidates seeking to apply to the board to take the exam in accordance with section 2010 and who have obtained their minimum educational requirements from a school or degree program located outside of California and not approved by the board shall demonstrate to the board, (1) that the education they have received is equivalent to educational requirements of ~~subsections (a) and (b) of section 2065(a) and (b) or subsection (a) of section 2065.1(a)~~, and, (2) that the school or degree program has been approved by a licensing body in the U.S. state, Canadian province, or U.S. or Canadian territory. The burden to demonstrate educational equivalency is upon the candidate.

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Note: Authority cited: Section 4808, Business and Professions Code. Reference: Sections 4841.5 and 4843, Business and Professions Code.

§ 2068.5. Practical Experience and Education ~~As~~ Equivalent Curriculum.

Until July 1, ~~2020~~2024, in lieu of a two year curriculum in animal health technology, completion of a combination of practical experience and education in compliance with the following criteria is deemed to be "the equivalent thereof as determined by the board" pursuant to ~~§~~section 4841.5 of the code:

Commented [ME7]: Update due notice to allow for enacting regulations, review program development, and implementation

(a) The education shall consist of a total of 20 semester units, 30 quarter units, or 300 hours of instruction. The education shall be provided by a postsecondary academic institution or a qualified instructor, who satisfies the qualification requirements of subsection (f)(1) as defined by Section 2068.5(e). The education shall be accumulated in the fundamentals and principles of all of the following subjects:

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Commented [ME8]: Correct cross-reference section and make clarifying amendments

- (1) Dental prophylaxis and extraction.
- (2) Anesthetic instrumentation, induction and monitoring.
- (3) Surgical nursing and assisting, including instrumentation, suturing techniques, intravascular catheter placement and application of casts and splints.
- (4) Radiography and radiation safety.
- (5) Diseases and nursing of animals, including zoonotic diseases and emergency veterinary care.

(b) The education shall include instruction in chemistry, mathematics, biology, microbiology, anatomy and physiology, and medical terminology, or these subjects may be obtained as separate courses.

(c) All educational requirements in subsection (a) shall have been completed by the applicant within five (5) years prior to the date of the examination for registration as a registered veterinary technician.

(d) Interactive distance-learning shall be accepted if the course meets all the criteria listed in this section and the candidate achieves a documented passing score on the course final examination.

(e) The candidate shall provide the board with a syllabus or an outline for each course. The candidate shall provide documentation of attendance for each course in the form of one of the following:

(1) a certificate of attendance,

(2) an official transcript, or

(3) a letter on official stationery signed by the course instructor documenting that the candidate attended a particular course.

(f)(1) In order for ~~education~~ an instructor to be approved for ~~qualification~~ under Section 2068.5, the instructor must meet at least two of the following minimum requirements:

(A) A license, registration, or certificate in an area related to the subject matter of the course. The license, registration, or certificate shall be current, valid, and free from restrictions due to disciplinary action by this board or any other health care regulatory agency;

(B) A master's or higher degree from an educational institution in an area related to the subject matter of the course;

(C) Training, certification, or experience in teaching the subject matter of the course; or

(D) At least two years' experience in an area related to the subject matter of the course.

(2) The instructor shall provide each participant with a course syllabus or detailed outline which includes a description of the material covered.

(g) The directed clinical practice shall consist of at least 4416 hours, completed in no less than 24 months, of directed clinical practice under the direct supervision of a California-licensed veterinarian who shall attest to the completion of that experience at the time the application is made to the board for the registered veterinary technician examination. This experience shall have been completed by the applicant within five (5) years prior to the date of the examination for registration as a registered veterinary technician.

Commented [ME9]: Make clarifying amendment

Commented [ME10]: Remove redundant reference

(h) The directed clinical practice required in subsection (g) shall have provided the applicant with knowledge, skills, and abilities in the areas of communication with clients, patient examinations, emergency procedures, laboratory procedures, diagnostic imaging, surgical assisting, anesthesia, animal nursing, nutrition, dentistry, animal behavior, and pharmacology. The supervising veterinarian(s) shall complete a check list attesting to proficiency in specific skill areas within the preceding categories.

(i) On or after July 1, ~~2020~~2024, completion of a combination of practical experience and education as equivalent curriculum shall be obtained through a Practical Experience and Education Equivalent Program that is in compliance with section 2065.1.

Note: Authority cited: Section 4808, Business and Professions Code. Reference: Sections 4841.5 and 4843, Business and Professions Code.



MEMORANDUM

DATE	August 6, 2018
TO	Veterinary Medical Board (Board)
FROM	Amanda Drummond, Administrative Programs Coordinator
SUBJECT	Amend Section 2006, Article 1, Division 20, Title 16 of the California Code of Regulations (CCR) Regarding Board Disciplinary Guidelines

Background:

The proposed language to modify CCR section 2006 and the Veterinary Medical Board's (Board) Disciplinary Guidelines (incorporated into regulation by reference) were originally adopted by the Board in January of 2015. The Board adopted further amendments to CCR section 2006 and the Disciplinary Guidelines in July 2015, October 2015, January 2017, April 2017, and October 2017. Board staff is currently in the process of working with the Board's legal counsel on developing the rulemaking package so it can be submitted to the Department of Consumer Affairs (DCA) for pre-review.

While working on the package, the executive officer and legal counsel recommended additional revisions to the Disciplinary Guidelines to address issues that the Board's enforcement program is currently facing.

The proposed changes include the following:

- Clarify Board communication with respondents after the Board's decision and order are final. (See Proposed Disciplinary Guidelines, page 1, Introduction; page 14, Standard Terms and Conditions of Probation, Term No. 4, Cooperation with Board Staff.)
- Add missing disciplinary statutes regarding Registered Veterinary Technician (RVT) applicants, Veterinary Assistant Controlled Substance Permits (VACSP), and general Business and Professions Code sections. (See Table of Contents; Penalties by BPC section number.)
- Add standard order language to resolve Administrative Law Judge (ALJ) order issues. (See Table of Contents; page 13, Standard Orders 1 through 6.)
- Amend the Standard Terms and Conditions of Probation to provide better clarity and add an additional term for Changes of Employment or Address.
- Various other minor/technical changes.

Attachments:

- Proposed revisions to Board Disciplinary Guidelines (changes are denoted with strike through and underline)
- Revisions to CCR section 2006 reflecting proposed changes to Disciplinary Guidelines

**Title 16. Professional and Vocational Regulations
Division 20. Veterinary Medical Board**

PROPOSED LANGUAGE

Changes to the existing regulation are shown in single underline for new text and ~~single-strikeout~~ for deleted text.

Amend Section 2006 of Article 1 of Division 20 of Title 16 of the California Code of Regulations to read as follows:

§ 2006. Disciplinary Guidelines.

In reaching a decision on a disciplinary action under the Administrative Procedure Act (Government Code Section 11400 et seq.), the Board shall consider the disciplinary guidelines entitled: "Veterinary Medical Board Disciplinary Guidelines, ~~July 2012~~ August 2018 Edition" which are hereby incorporated by reference. Deviation from these guidelines, including the standard terms of probation, is appropriate where the Board in its sole discretion determines that the facts of the particular case warrant such a deviation - for example: the presence of mitigating factors; the age of the case; evidentiary problems.

Note: Authority cited: Section 4808, Business and Professions Code; and Section 11400.20, Government Code. Reference: Sections 141, ~~480~~, ~~490~~, 4830.5, 4830.7, ~~4836.2~~, 4836.5, 4837, 4839.5, ~~4842~~, 4855, 4856, 4857, 4875, 4876 and 4883, Business and Professions Code; and Sections 11400.20 and 11425.50(e), Government Code.

Commented [WT1]: Updated for latest Board approval.

Deleted: October 2017

Commented [WT2]: Adding general BPC authority to discipline for federal agency and foreign country license disciplinary actions.

Commented [WT3]: Adding new general BPC sections for application denial and license revocation/suspension, and VACSP-specific statutes to conform to new additions of these sections to the Guidelines.

Disciplinary Guidelines

~~July 2012~~ **August 2018**

Commented [WT1]: Updated for potential new Board approval date

Veterinary Medical Board



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~~Geranen~~ ~~www.vmb.ca.gov~~
~~www.facebook.com/CA.VetMedBoard/~~
~~twitter.com/vetmedboard~~

Jessica Siefert, Executive Officer

Commented [WT2]: Updated for new EO

Deleted: Annemarie Del Mugnaio

Revised 8/2018

Deleted: 11/2017

DISCIPLINARY GUIDELINES

VETERINARY MEDICAL BOARD

July 2012 ~~August 2018~~

~~Tom Kendall, DVM~~ Kathy Bowler, Public Member

~~Kim Williams,~~ Jennifer Loreda, RVT

~~Patti Aguiar, Public Member~~

~~Richard Johnson,~~ Judie Mancuso, Public Member

Jaymie J. Noland, DVM

~~Linda Starr, Public Member~~ Mark T. Nunez, DVM

Richard Sullivan, DVM

Cheryl Waterhouse, DVM

Alana Yanez, Public Member

Special thanks to former Board President ~~Stephanie Ferguson~~ Tom Kendall, DVM

~~Susan M. Geranen,~~ Jessica Siefertman Executive
Officer

~~Sandra Monterrubio,~~
Enforcement Program Manager

Deleted: Candace S. Raney

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recommend deleting provision from Guidelines

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Commented [WT4]: Adding RVT applicants and general BPC denial/revocation re crimes

Commented [WT5]: Adding VACSP statute

Commented [WT6]: Moved for numerical order

Commented [WT7]: Adding VACSP statute

Commented [WT8]: Adding general BPC denial statute

Commented [WT9]: Adding VACSP statute

Commented [WT10]: Revised cite to 4839.5 to correct cite of 4836.5

Commented [WT11]: Adding VACSP statute

Commented [WT12]: Adding RVT application statute

Commented [WT13]: Adding RVT application statute

Commented [WT14]: Adding new standard order language

Deleted: Probation Terms and Conditions

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Veterinary Medical Board

Disciplinary Guidelines

Introduction

The Veterinary Medical Board (Board) developed the Disciplinary Guidelines outlined in this manual for its Executive Officer, staff, legal counsel, administrative law judges, and other persons involved in the Board's enforcement process to be used for the purpose of creating judgment orders in formal disciplinary actions. These guidelines are published in regulations for the public and the profession so that the processes used by the Board to impose discipline are readily available and transparent.

The Board recognizes that each case is unique and that mitigating or aggravating circumstances in a particular case may necessitate variations. Therefore, the Board has developed minimum and maximum penalties to assist in determining the appropriate ~~penalty level of discipline~~. If an ~~accusation is sustained and an administrative law judge finds that a violation occurred but assesses less than the minimum penalty is assessed for that violation~~, the Board ~~requires information from~~ may request that the administrative law judge ~~fully explain the reasons and the circumstances for the deviation, that resulted in less than the minimum penalty being assessed~~. In addition, probationary conditions are divided into two categories, 1) standard terms and conditions that are used for all cases, and 2) optional terms and conditions that are used for specific violations and circumstances unique to a specific case.

The Board grants licenses to veterinarians, and registers grants registrations to veterinary premises and veterinary technicians, and issues veterinary assistant controlled substances permits. If there is action taken against both the individual ~~licensee~~ licensee and the premises permit, then the disciplinary order should reflect actions against ~~both~~ each. However, in some cases, minimum standard violations are so severe that it is necessary to take immediate action and ~~does suspend the license of~~ a facility. In these instances, the veterinary license and the premises permit may be disciplined separately, and the disciplinary order should reflect the separate action.

Because of the severity of cases resulting in ~~actions taken~~ by the Office of the Attorney General, the Board has established that the minimum penalty shall always include revocation or suspension with the revocation or suspension stayed and terms and conditions of probation imposed. The ~~imminent~~ threat of the revocation or suspension being reinstated helps to ~~insure~~ ensure compliance with the probationary terms and conditions. ~~It is the recommendation of the~~ The Board recommends that in ~~any case involving a violation related to alcohol or drug abuse~~ related violations that, the minimum term of probation should be five years. ~~In and in addition, in any case involving a violation related to alcohol or drug abuse violations~~ the mandatory terms and conditions listed specifically for this type of case shall be imposed.

~~In cases where the penalties deviate from the minimum to maximum range without explanation of the deviation, the Board may non-adopt the Proposed Decision and review the case itself.~~

A respondent may be represented by private counsel during enforcement proceedings, up to entry of a final disciplinary order. Following entry of the final order, including, but not limited to, while the Respondent is on probation, Board staff will only communicate directly with Respondent, and Respondent is required to communicate directly with Board staff.

Commented [WT15]: Added to clarify Board communication policy with respondent post-decision.

PENALTIES BY BUSINESS AND PROFESSIONS CODE SECTION NUMBER

Section	4883(a); 4837(b); 4842(d); 480(a)(1); 490
Violation	Conviction of a crime substantially related to the qualifications, functions, or duties of veterinary medicine, surgery, or dentistry, in which case the record of the conviction shall be conclusive evidence.
Maximum Penalty	Revocation and a \$5,000 fine
Minimum Penalty (as appropriate)	Revocation and/or suspension stayed Two-year probation \$2,000 fine Standard terms and conditions Optional terms and conditions including but not limited to: Suspension Limitations on practice Supervised practice No ownership of a veterinary hospital or clinic No management of a veterinary hospital/no supervision of interns or residents Continuing education Psychological evaluation and/or treatment Medical evaluation and/or treatment Rehabilitation program Submit to drug testing Abstain from controlled substances/alcohol Community service Restitution Ethics training
<p>Maximum penalties should be considered if the criminal act caused or threatened harm to an animal or the public, if there have been limited or no efforts at rehabilitation, or if there were no mitigating circumstances at the time of the commission of the offense(s).</p> <p>Minimum penalties may be considered if there is evidence of an attempt(s) at self-initiated rehabilitation. Evidence of self-initiated rehabilitation includes, but is not limited to, pro bono services to nonprofit organizations or public agencies that improve the care and treatment of animals or improve generally society's interactions with animals. Self-initiated rehabilitation measures also include, but are not limited to, when appropriate, specific training in areas of weakness, full restitution to persons harmed by the licensee or registrant, completion<u>completion</u> of treatment or other conditions of probation ordered by the court, or full compliance with all laws since the date of the occurrence of the criminal act<u>crime</u>.</p>	

Section	4883(b); 4837(d)
Violation	Having professional connection with, or lending the licensee's or registrant's name to, any illegal practitioner of veterinary medicine and the various branches thereof.
Maximum Penalty	Revocation and a \$5,000 fine

Minimum Penalty	Revocation and/or suspension stayed Two-year probation Standard terms and conditions \$2,000 fine Optional terms and conditions including but not limited to: 30-day suspension for each offense No ownership of a veterinary hospital or clinic No management of a veterinary hospital/no supervision of interns or residents Ethics training
<p>Maximum penalties should be considered if the acts or omissions caused or threatened harm to an animal or client, or if there are prior violations of the same type of offense.</p> <p>Minimum penalties may be considered if the acts or omissions did not cause or threaten harm to an animal or cause detriment to a client.</p>	

Section	4883(c); 4836.2(c)(4); 4836.5; 4837(e); 4839.5
Title-Violation	Violation or attempt to violate, directly or indirectly, any of the provisions of the chapter
Maximum Penalty	Revocation and a \$5,000 fine
Minimum Penalty	Revocation and/or suspension stayed Two-year probation Standard terms and conditions \$1,000 fine Optional terms and conditions including but not limited to: Restitution Ethics training
<p>Maximum penalties should be considered if the actions were intended to subvert investigations by the Board or in any way hide or alter evidence that would or could be used in any criminal, civil, or administrative actions.</p> <p>Minimum penalties may be considered if the acts or omissions did not cause or threaten harm to an animal or cause detriment to a client.</p>	

Deleted: 4836.5

Section	4883(d), (e)
Violation	Fraud or dishonesty in applying, treating, or reporting on tuberculin or other biological tests. Employment of anyone but a veterinarian licensed in the State to demonstrate the use of biologics in the treatment of animals.
Maximum Penalty	Revocation or suspension and a \$5,000 fine
Minimum Penalty	Revocation and/or suspension stayed Two-year probation Standard terms and conditions \$5,000 fine Optional terms and conditions including but not limited to: 30-day suspension of license and/or premises permit Continuing education Community service

Maximum penalties should be considered if the acts or omissions caused public exposure of reportable diseases (rabies, brucellosis or tuberculosis) or other hazardous diseases of zoonotic potential.

Minimum penalties may be considered if the acts or omissions did not cause or threaten harm to an animal or cause detriment to a client.

Violation	False or misleading advertising
Maximum Penalty	Revocation and/or suspension and a \$5,000 fine
Minimum Penalty	Revocation and/or suspension stayed Two-year probation 60 30-day suspension Standard terms and conditions \$2,000 fine Optional terms and conditions including but not limited to: Restitution Ethics training

Maximum penalties should be considered if the advertising was deceptive, caused or threatened harm to an animal, or caused a client to be misled and suffer monetary damages. ~~One~~In that case, one of the probationary terms in that case should be restitution to any client damaged as a result of the violation. The more severe penalty should be considered when there are prior violations of the same type of offense.

Minimum penalties may be considered if the acts or omissions did not cause or threaten harm to an animal or cause detriment to a client.

Section	4883(g); <u>4836.2(c)(2), (3)</u> ; 4837(c)
Violation	Unprofessional conduct, that includes, but is not limited to, the following: (1) Conviction of a charge of violating any federal statutes or rules or any statute or rule of this state regulating dangerous drugs or controlled substances. (2)(A) The use of, or prescribing for, or administering to himself or herself, any controlled substance. (B)The use of any of the dangerous drugs specified in Section 4022, or of alcoholic beverages to the extent, or in any manner as to be dangerous or injurious to a person licensed or registered under this chapter, or to any other person or to the public, or to the extent that the use impairs the ability of the person so licensed or registered to conduct with safety the practice authorized by the license or registration. (C)The conviction of more than one misdemeanor or any felony involving the use, consumption, or self-administration of any of the substances referred to in this section. A plea or verdict of guilty or a conviction following a plea of nolo contendere is deemed to be a conviction within the meaning of this section. (3) A violation of any federal statute, rule, or regulation or any of the statutes, rules, or regulations of this state regulating dangerous drugs or controlled substances.
Maximum Penalty	Revocation and a \$5,000 fine

Minimum Penalty	Revocation and/or suspension stayed Two-year probation Standard terms and conditions \$5,000 fine Optional terms and conditions including but not limited to: 30-day suspension Supervised practice Psychological evaluation and/or treatment Medical evaluation and/or treatment Surrender DEA license/send proof of surrender to Board within 10 days of the effective date of the Decision. No ownership of a veterinary hospital or clinic No management of a veterinary hospital/no supervision of interns or residents Rehabilitation program Submit to drug testing Abstain from use of alcohol and drugs
------------------------	--

Maximum penalties should be considered if acts or omissions caused or threatened harm to an animal or a client: or if there are prior violations of the same type of offense.

Minimum penalties may be considered if acts or omissions did not cause harm to an animal, there are no prior violations of the same type of offense, and there is evidence of self-initiated rehabilitation.

When considering minimum penalties, the terms of probation should include a requirement that the licensee submit the appropriate medical reports (including psychological treatment and therapy), submit to random drug testing, submit to a limitation of practice, or practice under the supervision of a California licensed veterinarian as applicable on the facts of the case, and submit quarterly reports to the Board (in writing or in person as the Board directs). ~~Note: in any violation related to alcohol or drug violations~~ The Board requires a minimum of five years' probation for any violation related to alcohol or drug abuse.

[Business and Professions Code section 4836.2\(d\) prohibits issuance of a VACSP to any applicant with a state or federal felony controlled substance conviction.](#)

Commented [WT16]: Since the VACSP statute is being added, this provision should also be added to clarify that no permit can be issued if the applicant has a felony controlled substance conviction.

Section	4883(g)
Violation	General unprofessional conduct
Maximum Penalty	Revocation and a \$5,000 fine

Minimum Penalty (as appropriate)	Written Public Reproval Revocation and/or suspension stayed Two-year probation Standard terms and conditions Optional terms and conditions including but not limited to: <u>30-day</u> Suspension Limitations on practice Supervised practice No ownership of a veterinary hospital or clinic No management of a veterinary hospital/no supervision of interns or residents Continuing education Psychological evaluation and/or treatment Medical evaluation and/or treatment Rehabilitation program Submit to drug testing Abstain from controlled substances/alcohol Community service/ Restitution Ethics training
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Maximum penalties should be considered if the acts or omissions caused substantial harm to an animal or a client, or if there are prior ~~actions against~~ violations of the licensee or registrant's same type of offense.

Minimum penalties may be considered if there are no prior ~~actions~~ violations, if there are mitigating circumstances such as the length of time since the offense(s) occurred, if the acts or omissions did not cause substantial harm to an animal or a client, ~~and/or~~ if there is evidence of a self-initiated rehabilitation.

Section	4883(h)
Violation	Failure to keep the licensee's or registrant's premises and all equipment therein in clean and sanitary condition. (Requirements for sanitary conditions are also outlined in Sections 4853.5 and 4854 (practice sanitation standards).)
Maximum Penalty	Revocation or suspension of premises permit and a \$5,000 fine.
Minimum Penalty	Revocation and/or suspension stayed Two-year probation Standard terms and conditions Fine - not less than \$50 nor more than \$500 per day, not to exceed \$5,000 Optional terms and conditions including but not limited to: A ten to thirty <u>30-day</u> suspension or suspension until compliance with minimum standards of practice is achieved. Random hospital inspections

Maximum penalties should be considered if the acts or omissions caused or threatened harm to animals or the public, if there are prior actions and/or no attempt to remedy the violations, for example, unsanitary or hazardous workplace, improper sterilization of instruments, or improper husbandry practices or if there are prior violations of the same type of offense.

Minimum penalties may be considered ~~people~~ if the acts or omissions did not cause or threaten harm to animals or people, or remedial action has been taken to correct the deficiencies, ~~and there is remorse for the existing unsanitary conditions.~~

Note - A veterinary license and a premises permit can be disciplined separately.

Section	4883(i)
Violation	Negligence in the practice of veterinary medicine
Maximum Penalty	Revocation and a \$5,000 fine
Minimum Penalty	Revocation and/or suspension stayed Three-year probation Standard terms and conditions Fine - not less than \$50 nor more than \$500 per day, not to exceed \$5,000 Optional terms and conditions including but not limited to: A ten to thirty 30-day suspension or suspension until in-compliance with minimum standards of practice is achieved. Random hospital inspections
<p>Maximum penalties should be considered if the acts or omissions caused or threatened harm to animals or the public, if there are prior actions and/or no attempt to remedy the violations.</p> <p>Minimum penalties may be considered people if the acts or omissions did not cause or threaten harm to animals or people, remedial action has been taken to correct the deficiencies and there is remorse for the negligent acts.</p>	

Section	4883(i)
Violation	Incompetence in the practice of veterinary medicine
Maximum Penalty	Revocation and a \$5,000 fine
Minimum Penalty	Revocation and/ or suspension stayed Three-year probation Standard terms and conditions \$2,000 fine Optional terms and conditions including but not limited to: 90 30-day suspension Supervised practice Hospital inspections Continuing education Clinical written examination Community service Restitution Ethics training
<p>Maximum penalties should be considered based on the following factors: if the acts or omissions caused harm to an animal or an animal has died, there are limited or no efforts at rehabilitation, or there are no mitigating circumstances at the time of the commission of the offense(s).</p> <p>Minimum penalties may be considered if the acts or omissions did not cause substantial harm to an animal, there is evidence of rehabilitation, and there are mitigating circumstances such as no prior discipline, remorse for the harm that occurred, cooperation with the Board's investigation, etc.</p>	

Section	4883(i) <u>480(a)(2)</u>
Violation	Fraud and/or Deception in the practice of veterinary medicine
Maximum Penalty	Revocation and a \$5,000 fine

Minimum Penalty	Revocation and/or suspension stayed Three-year probation Standard terms and conditions \$2,000 fine Optional terms and conditions including but not limited to: 90-day suspension Hospital inspections Supervised practice Clinical written examination Community service Restitution Ethics training
<p>Maximum penalties should be considered based on the following factors: if the acts or omissions caused harm to an animal or an animal has died, there is limited or no evidence of rehabilitation or no mitigating circumstances at the time of the commission of the offense(s).</p> <p>Minimum penalties may be considered if the acts or omissions did not cause substantial harm to an animal, there is evidence of rehabilitation and there are mitigationmitigating circumstances such as no prior discipline, remorse for the harm that occurred, cooperation with the Board's investigation, etc.</p>	

Section	4883(j); 4836.2(c)(4); 4836.5 4839.5
Violation	Aiding or abetting in acts which are in violation of any of the provisions of this chapter
Maximum Penalty	Revocation and a \$5,000 fine
Minimum Penalty	Revocation and/or suspension stayed Two-year probation Standard terms and conditions \$1,000 fine Optional terms and conditions including but not limited to: 30-day suspension Ethics training
<p>Maximum penalties should be considered if the acts or omissions caused or threatened harm to an animal or client and the acts were repeated after a prior violation of the same type of offense.</p> <p>Minimum penalties may be considered if the acts or omissions did not cause or threaten harm to an animal or cause detriment to a client, there were no prior actions, and there is evidence of remorse and an acknowledgement of the violation.</p>	

Commented [WT17]: Corrected this citation

Section	4883(k); 4836.2(c)(1); 4837(a); 4842(c)
Violation	Fraud, misrepresentation, or deception in obtaining a license, or registration, <u>or permit</u>
Maximum and Minimum Penalty	Revocation and a \$5,000 fine
<p>Note - In this instance, the gravity of the offense warrants revocation in all cases since there was no legal basis for licensure in the first place.</p>	

Violation	The revocation, suspension, or other discipline by another state or territory of a license, certificate, or registration to practice veterinary medicine or as a veterinary technician in that state or territory
Maximum Penalty	Revocation
Minimum Penalty	The penalty that would have been applicable to the violation if it had occurred in the State of California

Section	4883(m)
Violation	Cruelty to animals or conviction on a charge of cruelty to animals, or both
Maximum Penalty	Revocation and a \$5,000 fine.
Minimum Penalty	Revocation and/or suspension stayed Two-year probation Standard terms and conditions \$5,000 fine Optional terms and conditions including but not limited to: 3060-day suspension Psychological evaluation and/or treatment Medical evaluation and/or treatment Continuing education Ethics training

Note - While the Board believes this violation is so severe that revocation is the only appropriate penalty, it recognizes that a lesser penalty may be appropriate where there are mitigating circumstances of a significant nature.

Section	4883(n)
Violation	Disciplinary actions taken by any public agency in any state or territory of any act substantially related to the practice of veterinary medicine or the practice of a veterinary technician.
Maximum Penalty	Revocation and a \$5,000 fine
Minimum Penalty	Revocation and/or suspension stayed Two-year probation Standard terms and conditions \$2,000 fine Optional terms and conditions including but not limited to: 30-day suspension Continuing education

Maximum penalties should be considered if the acts or omissions caused or threatened harm to an animal or the public, there is limited or no evidence of rehabilitation, and there were no mitigating circumstances at the time of the commission of the offense(s).

Minimum penalties may be considered if there is evidence of attempts at self-initiated rehabilitation taken prior to the filing of the accusation. Self-initiated rehabilitation measures include pro bono services to nonprofit organizations or public agencies that improve the care and treatment of animals or improve generally society's interactions with animals. Self-initiated rehabilitation measures also include, ~~when appropriate,~~ specific training in areas of weakness, full restitution to persons harmed by the licensee or registrant, ~~completion~~ completion of treatment or other conditions of probation ordered by the court, and ~~full~~ compliance with all laws since the date of the occurrence of the violation.

Section	4883(o)
Violation	Violation, or the assisting or abetting violation, of any regulations adopted by the Board pursuant to this chapter
Maximum Penalty	Revocation and a \$5,000 fine
Minimum Penalty	Revocation and/ or suspension stayed Two-year probation Standard terms and conditions 30-day suspension \$1,000 fine Optional terms and conditions including but not limited to: Continuing education Restitution Ethics training

Maximum penalties should be considered if the acts or omissions caused or threatened harm to the animal or the public, there was more than one offense, there is limited or no evidence of rehabilitation, and there were no mitigating circumstances at the time of the offense(s).

Minimum penalties may be considered if there is evidence of attempts at self-initiated rehabilitation. Self-initiated rehabilitation measures include pro bono services to nonprofit organizations or public agencies that improve the care and treatment of animals or improve generally society's interactions with animals. Self-initiated rehabilitation measures also include, ~~when appropriate,~~ specific training in areas of weakness, full restitution to persons harmed by the licensee or registrant, completion of treatment or other conditions of probation ordered by the court, and ~~full~~ compliance with all laws since the date of the occurrence of the violation.

Section	4855
Title-Violation	Written Records
Maximum Penalty	Revocation and a \$5,000 fine
Minimum Penalty	Revocation and/ or suspension stayed Two-year probation Standard terms and conditions 30-day suspension \$1,000 fine Optional terms and conditions including but not limited to: <u>Supervised practice</u> Continuing education

Maximum penalties should be considered when there ~~are~~ is a lack of records or omissions and/or alterations that constitute negligence.

Minimum penalties may be considered when there is evidence of carelessness and corrective measures have been implemented to correct the process whereby the records were created.

Section	4856
Violation	Failure to permit the inspection of Records <u>records</u> or Premises <u>premises</u> by the Board
Maximum Penalty	Revocation and a \$5,000 fine
Minimum Penalty	Revocation and/or suspension stayed Two-year probation Standard terms and conditions \$1,000 fine Optional terms and conditions including but not limited to: 30-day suspension Ethics training

Maximum penalties should be considered if there is a deliberate attempt to prevent access to the Board, prior discipline of the managing licensee or the premises, or no mitigating circumstances at the time of the refusal.

Minimum penalties may be considered when there are mitigating circumstances at the time of the request for records, where there is no deliberate attempt to prevent the Board from having access to the records, or when there are no prior ~~actions~~ violations of a similar nature.

Section	4857
Violation	Impermissible disclosure of information about animals and/or about clients
Maximum Penalty	Revocation and a \$5,000 fine
Minimum Penalty	Revocation and/or suspension stayed Two-year probation Standard terms and conditions \$1,000 fine Optional terms and conditions including but not limited to: 30-day suspension

Maximum penalties should be considered when there is a breach of ~~breaching~~ confidentiality, ~~puts the animals or clients in jeopardy~~.

Minimum penalties may be considered when the breach is inadvertent or when there is no prior action against the licensee.

Note - The severity of violations may determine whether action taken is citation and fine or formal discipline.

Section	4830.5
Violation	Duty to report staged animal fighting
Maximum Penalty	Revocation and a \$5,000 fine
Minimum Penalty	Revocation and/or suspension stayed Two-year probation Standard terms and conditions \$1,000 fine Optional terms and conditions including but not limited to: 30-day suspension Continuing Education <u>education</u> Ethics training
Maximum penalties should be considered when an animal or animals have been killed or severely harmed.	
Minimum penalties may be considered on a case-by-case basis.	

Section	4830.7
Violation	Duty to report animal abuse or cruelty
Maximum Penalty	Revocation and a \$5,000 fine
Minimum Penalty	Considered on a case-by-case basis

Section	4836.5; 4837
Violation	Disciplinary proceedings against veterinarians and registered veterinary technicians
Maximum Penalty	Revocation and a \$5,000 fine
Minimum Penalty	Revocation and/or suspension stayed Two-year probation Standard terms and conditions \$1,000 fine Optional terms and conditions including but not limited to: 30-day suspension Continuing Education <u>education</u> Ethics training
Maximum penalties should be considered if the acts or omissions caused or threatened harm to an animal or client, or the acts were repeated after a prior violation of the same type of offense.	
Minimum penalties may be considered if the acts or omissions did not cause or threaten harm to an animal or client, or if there are no prior violations.	
<p>Note - The Practice Act is very specific on the authorized duties for RVTs that cannot be performed by unregistered assistants, veterinary controlled substance permit holders; therefore, these violations are more serious due to their blatant nature.</p>	

Commented [DA18]: Consider striking this language. Current language lacks clarity and is unnecessary.

STANDARD ORDERS

The following text may be used as the introductory paragraph in the disciplinary Order:

1. License Revoked

Respondent's license [registration or permit] is revoked.

2. Revocation, Stayed, Probation

However, the revocation is stayed, and respondent is placed on probation for _____ years upon the following terms and conditions.

3. License Suspension

Respondent's license shall be suspended for [insert specific number of days, months]. See specific violation for recommended time of suspension.

4. Application denied

Respondent's license [registration or permit] application is denied.

5. Application approved, license issued

Respondent's license [registration or permit] application is approved, and upon completion of all prerequisites for licensure, the license [registration or permit] shall be issued to respondent.

6. Application granted, license issued, revoked, stayed, probation

Respondent's license [registration or permit] application is approved, and upon completion of all prerequisites for licensure, the license [registration or permit] shall be issued to respondent, and immediately revoked. However, the revocation is stayed, and respondent shall be placed on probation for _____ years upon the following conditions.

7. Application denied, probationary registration issued [RVTs only]

Respondent's registration application is denied; however, the denial is stayed, and a probationary registration shall be issued to respondent for a term of _____ years [no more than 3 years per BPC section 4845] on the following conditions. Upon completion of all terms and conditions of probation, and upon completion of all prerequisites for licensure, Respondent may be issued a permanent registration.

8. Application for temporary veterinarian license granted, license issued, revoked, stayed, probation (veterinarians only)

Respondent's application for a temporary veterinarian license is approved, and upon completion of all statutory and regulatory requirements for licensure, and all conditions precedent to licensure, a temporary veterinarian license shall be issued to Respondent. Failure to successfully complete all statutory and regulatory requirements within two (2) years from the effective date shall void this decision and it will have no effect. Upon issuance of a temporary veterinarian license, said license will be immediately revoked. The revocation will be stayed, and Respondent placed on [insert number of years] years' probation (Probationary Term) on the following terms conditions. Any and all additional licenses or permits subsequently issued to Respondent during the Probationary Term shall be subject to any and all statutory and regulatory prerequisites and the specific terms and conditions specified below. The Probationary Term is cumulative and does not restart with the issuance of any additional license or permit.

STANDARD TERMS AND CONDITIONS OF PROBATION (1-4415)

Deleted: 4

The Board recommends one- to five-year probation, as appropriate, in cases where probation is part of a disciplinary order.

~~All standard terms and conditions are included in every order of probation applied to the licensee or registrant subject to discipline (Respondent).~~

1. Obey all Laws

Respondent shall obey all federal and state laws and regulations substantially related to the practice of veterinary medicine. ~~Further, within~~ Within thirty (30) days of any arrest or, Respondent shall notify the Board. ~~Within thirty (30) days of any conviction,~~ Respondent shall report to the Board and provide proof of compliance with the terms and conditions of the court order including, but not limited to, probation and restitution requirements. ~~Respondent shall notify the Board of any change of name or address within thirty (30) days of the change.~~

2. Quarterly Reports and Interviews

Respondent shall report quarterly to the Board or its designee, under penalty of perjury, on forms provided by the Board, stating whether there has been compliance with all terms and conditions of probation. Omission or falsification in any manner of any information on these reports shall constitute a violation of probation and shall result in the filing of an accusation and/or a petition to revoke probation against Respondent's optometrist license. In addition, the Board at its discretion may request additional in-person reports of the probationary terms and conditions. If the final written quarterly report is not made as directed, the period of probation shall be extended until such time as the final report is received by the Board. ~~Respondent shall make available all patient records, hospital records, books, logs, and other documents. Any period(s) of delinquency in submission of reports as directed may be added to the Board, upon request, total period of probation.~~

3. Cooperation with Probation Surveillance—Interview with the Board

Within 30 days of the effective date of the Decision, Respondent shall appear in person for an interview with the Board or its designee to review the terms and conditions of probation. Thereafter, Respondent shall, upon reasonable request, report or appear in person as directed.

~~In~~ Respondent shall comply with the Board's probation surveillance program. All costs for probation monitoring and/or mandatory premises inspections shall be borne by Respondent. ~~addition, if Respondent fails to maintain compliance with terms and conditions of probation in any respect, subsequent in-person interviews may be required.~~

~~Probation monitoring costs are set at a rate of \$100 per month for the duration of the probation. Respondent shall notify the Board of any change of name or address or address of record within thirty (30) days of the change. Respondent shall notify the Board immediately in writing if Respondent leaves California to reside or practice in another state. Respondent shall notify the Board immediately upon return to California.~~

4. Cooperation with Board Staff

Respondent shall cooperate with the Board's inspection program and with the Board's monitoring and investigation of Respondent's compliance with the terms and conditions of his or her probation. ~~The Board will communicate directly with Respondent, and Respondent shall communicate directly with the Board.~~ Respondent shall make available all patient records, hospital records, books, logs, and other documents relating to the practice of veterinary medicine to the Board, upon request.

Commented [WT19]: To clarify Board/respondent communications will be direct, not via third-parties or respondent's agents.

~~Respondent shall claim all certified mail issued by the Board, respond to all notices of reasonable requests timely, and submit Reports, Identification Update reports or other reports similar in nature, as requested and directed by the Board or its representative. Respondent is encouraged to contact the Board's probation monitoring program representative at any time he/she has a question or concern regarding his or her terms and conditions of probation.~~

5. Probation Monitoring Costs

Probation monitoring costs are set at a rate of \$100 per month for the duration of the probation. These costs shall be payable to the Board on a schedule as directed by the Board or its designee.

6. Changes of Employment or Address

Respondent shall notify the Board, and appointed probation monitor in writing, of any and all changes of employment, location, and address within fourteen (14) calendar days of such change. This includes but is not limited to applying for employment, termination or resignation from employment, change in employment status, and change in supervisors, administrators or directors. Respondent shall also notify his or her probation monitor AND the Board IN WRITING of any changes of residence or mailing address within fourteen (14) calendar days. P.O. Boxes are accepted for mailing purposes; however, the Respondent must also provide his or her physical residence address as well.

47. No Preceptorships or Supervision of Students, Interns, or Residents

~~Respondent shall not supervise a registered intern and shall not perform any of the duties of a preceptor~~ Respondent shall not supervise students, interns, or residents.

58 Notice to Employers

During the period of probation, Respondent shall notify all present and prospective employers of ~~the decision in this case~~ Decision and the terms, conditions, and restrictions imposed on Respondent by ~~the decision in this case~~ Decision, as follows:

Within thirty (30) days of the effective date of this ~~decision~~ Decision and within fifteen (15) days of Respondent undertaking any new employment, Respondent shall cause his or her ~~employers~~ supervisor and/or managing licensee (licensee manager) to report to the Board in writing, acknowledging ~~that the employer listed individuals has/have read the Accusation and decision in this case and understands~~ Respondent's Decision, including the terms and conditions, of probation, and restrictions imposed. It shall be Respondent's responsibility to ensure that his or her supervisor and/or licensee manager submit timely acknowledgment(s) to the Board.

Relief veterinarians shall notify employers immediately and require the supervisor and/or licensee manager to submit timely acknowledgement.

69. Notice to Employees

Respondent shall, upon or before the effective date of this decision, Respondent shall post or circulate a notice which actually recites the offenses/violations for which Respondent has been disciplined and the terms and conditions of probation, to all licensed, registered, or permitted veterinary employees, and to any preceptor students, residents, and interns or externs involved in his or her veterinary practice. Within fifteen (15) days of the effective date of this decision, Respondent shall cause his or her employees to report to the Board in writing, acknowledging the employees have read the Accusation and decision in the case and understand Respondent's terms and conditions of probation.

7. Owners and Officers (Corporations or Partnerships): Knowledge of the Law

Respondent shall provide, within thirty (30) days after the effective date of the decision, signed and dated statements from the owners, officers, or any owner or holder of ten percent (10%) or more of the interest in Respondent or Respondent's stock, stating said individuals have read and are familiar with federal and state laws and regulations governing the practice of veterinary medicine.

8-10. Tolling of Probation

~~If Respondent resides out of state upon~~ shall notify the Board or after effective date its designee in writing within fifteen (15) calendar days of any periods of the decision, he or she must comply with the following conditions only: quarterly reports and interviews, tolling of probation, continuing education and cost recovery non-practice lasting more than thirty (30) calendar days and shall notify the Board or its designee within fifteen (15) calendar days of Respondent's return to practice. Any period of non-practice will result in the Respondent's probation being tolled. If Respondent returns to California he or she must comply or be subject to all probationary conditions for the period of probation.

Non-practice is defined as any period of time exceeding thirty (30) calendar days in which Respondent is not engaging in the practice of veterinary medicine in California. While tolled for residing/practicing outside of California, Respondent must comply with the following terms and conditions of probation: obey all laws, quarterly reports, interview with the Board, tolling of probation, maintain a current and active California license or registration, and cost recovery.

Non-practice is also defined as any period that Respondent, during probation, shall engage in the practice of veterinary medicine in California for a minimum of 24 hours per week for six (6) consecutive months or as determined by the Board. Should Respondent fails to engage in the practice of veterinary medicine in California as set forth above, the time outside of the practice shall for a minimum of 24 hours per week for six (6) consecutive months the duration of probation (except reasonable time away from work for vacations, illnesses, etc.) or as determined by the Board. While tolled for not meeting the hourly requirement, Respondent shall comply with all terms and conditions of this Decision.

Any period of tolling will not apply to the reduction of the probationary terms-term.

11. Maintain a Valid License

At all times while on probation, Respondent shall maintain a current and active license with the Board, including any period during which suspension or probation is tolled. If Respondent's license, by operation of law or otherwise, expires, upon renewal, Respondent's license shall be subject to any and all terms of this probation not previously satisfied.

9-12.

If Respondent violates probation in any respect, the Board, after giving Respondent notice and the opportunity to be heard, may revoke probation and carry out the disciplinary order that was stayed. If an accusation or petition to revoke probation is filed against Respondent during probation, or if the Attorney General's office has been requested to prepare any disciplinary action against Respondent's license, the Board shall have continuing jurisdiction until the matter is final, and the period of probation shall be extended until the matter is final. No petition for modification or termination of probation shall be considered while there is an accusation or petition to revoke probation pending against Respondent.

13. License Surrender While on Probation/Suspension

Following the effective date of this Decision, should Respondent cease to practice veterinary medicine due to retirement or health issues, or be otherwise unable to satisfy the terms and conditions of probation, Respondent may tender his or her license to practice veterinary medicine to the Board for surrender. The Board or its designee has the discretion to grant the request for surrender or to take any other action it deems appropriate and reasonable. Upon formal acceptance of the license surrender, Respondent will no longer be subject to the terms and conditions of probation. The surrender constitutes a record of discipline and shall become a part of the Respondent's license history with the Board.

Respondent must relinquish his or her license to the Board within ten (10) days of receiving notification from the Board that the surrender has been accepted.

10.14. Completion of Probation

All costs for probation monitoring and/or mandatory premises inspections shall be borne by Respondent. Failure to pay all costs due shall result in an extension of probation until the matter is resolved and costs paid or a petition to revoke probation is filed. Upon successful completion of probation and all payment of fees due, Respondent's license will be fully restored.

44-15. Cost Recovery and Payment of Fines

Pursuant to Section 125.3 of the California Business and Professions Code, within thirty (30) days of the effective date of this ~~decision~~Decision, Respondent shall pay to the Board its enforcement costs including investigation, ~~hearing, and probationary monitoring~~prosecution, in the amount of _____ or in a Board-approved payment plan, within six (6) months before the end of the probation term. Cost recovery will not be tolled. ~~the Respondent shall make these payments as follows: _____.~~
~~FAILURE TO PAY THIS AMOUNT TO THE BOARD BY THE STATED DEADLINE SHALL RESULT IN AUTOMATIC REVOCATION OF THE LICENSE FORTHWITH, WITHOUT FURTHER NOTICE OR AN OPPORTUNITY TO BE HEARD.~~

OPTIONAL TERMS AND CONDITIONS OF PROBATION (1-2423)

Note - In addition to the standard terms and conditions of probation, optional terms and conditions of probation are assigned based on violations and fact patterns specific to individual cases.

1. Suspension – Individual License

As part of probation, Respondent is suspended from the practice of veterinary medicine for _____, beginning the effective date of this ~~decision~~Decision. During ~~said~~the suspension, Respondent shall not enter any veterinary hospital which is registered by the Board unless seeking treatment for one's own animal. Additionally, Respondent shall not manage, administer, or be a consultant to any veterinary hospital or veterinarian during the period of actual suspension and shall not engage in any veterinary-related service or activity.

2. Suspension – Premises

As part of probation, Premises License Number _____, issued to Respondent _____, is suspended for _____, beginning the effective date of this ~~decision~~Decision. During ~~said~~the period of suspension, said premises may not be used by any party for any act constituting the practice of veterinary medicine, surgery, dentistry, and/or the various branches thereof.

3. Posted Notice of Suspension

If suspension is ordered, Respondent shall post a notice of the Board's Order of Suspension, in a place clearly visible to the public. The notice, provided by the Board, shall remain posted during the entire period of actual suspension.

4. Limitation on Practice/Inspections

(A) During probation, Respondent is prohibited from practicing _____ (Type of practice) _____

(B) ~~During probation,~~ Respondent is prohibited from the following:

- 1. ~~Practicing~~ veterinary medicine from a location or mobile veterinary practice which does not have a current premises permit issued by the Board; ~~and~~

5. Inspections

~~2-~~If Respondent is the owner or managing licensee of a veterinary ~~practice~~premises, the following probationary conditions apply:

(~~a~~A) The location or mobile veterinary practice ~~must not only have~~shall hold a current premises permit issued by the Board, ~~but must also be subject to~~and Respondent shall make the practice or location available for inspections by a Board representative to determine whether the location or veterinary practice meets minimum standards for a veterinary ~~practice~~premises. The inspections will be conducted on an announced or unannounced basis and shall be held during normal business hours. The Board reserves the right to conduct these inspections on at least a quarterly basis during probation. Respondent shall pay the Board for the cost of each inspection, which is \$500. ~~If the veterinary practice has two consecutive non-compliant inspections, Respondent shall surrender the Premises Permit within ninety (90) days from the date of the second consecutive non-compliant inspection.~~

(~~b~~B) As a condition precedent to any ~~P~~premises ~~P~~permit issued to Respondent as owner or managing licensee, the location or mobile veterinary practice for which application is made shall be inspected by a Board representative to determine whether the location or mobile veterinary practice meets minimum standards for a veterinary ~~practice~~premises. Respondent shall submit to the Board, along with any premises permit application, a \$500 inspection fee.

56. Supervised Practice

~~Respondent shall not practice only under the supervision of veterinary medicine until a veterinarian supervisor is approved by the Board. The supervision directed may be continuous supervision, substantial supervision, partial supervision, or supervision by daily review, as deemed necessary by the Board's designee. If the supervisor terminates or is otherwise no longer available, Respondent shall not practice until a new supervisor has been approved by the Board. All costs involved with practice supervision shall be borne by Respondent.~~

~~Respondent shall submit to the Board, for its prior approval, the name and qualifications of one or more proposed supervisors of Respondent's choice. Each supervisor shall have been licensed in California and have held a valid California license for at least five (5) years and not have ever been subject to any disciplinary action by the Board. The supervisor shall be independent, with no prior business or personal relationship with Respondent and the supervisor shall not be in a familiar relationship with or be an employee, partner, or associate of Respondent.~~

~~Upon approval by the Board and within thirty (30) days of the effective date of the decision, Respondent shall have his or her supervisor submit a report to the Board in writing stating the supervisor has read the decision in case number _____. Should Respondent change employment, Respondent shall have his or her new supervisor, within fifteen (15) days after employment commences, submit a report to the Board in writing stating the supervisor has read the decision in case number _____.~~

~~Respondent's supervisor shall file monthly reports with the Board. These reports shall be in a form designated by the Board and shall include a narrative section where the supervisor provides his or her conclusions and opinions concerning the issues described above and the basis for his or her opinions. Additionally, the supervisor shall maintain and submit with his or her monthly reports a log designating the patient charts reviewed, the date(s) of service reviewed, and the date upon which the review occurred.~~

The following terms of supervision apply to licensed veterinarians only:

The supervision shall be, as required by the Board or its designee, either direct or indirect.

Direct supervision is defined as the physical presence of the supervisor 100% of the time Respondent provides treatment or consultation to the animal patient.

Indirect supervision is defined as review and evaluation of patient records for those patients for whom Respondent provides treatment or consultation during the period of supervised practice. Levels of indirect supervision shall be established as follows:

Substantial – 75%

Moderate - 50%

Partial - 25%

The level of supervised practice may be modified as determined necessary by the Board or its designee. Respondent will not be eligible for a decrease in supervised practice until such time as: 1) Respondent has successfully completed at least 25% of the probationary term; 2) Respondent is deemed to be in full compliance with all terms and conditions of the probationary order; and 3) Respondent has consistently received favorable monthly supervised practice reports; and 4) the Board has received a written recommendation by the supervisor.

Respondent's supervisor shall, on a basis/frequency to be determined by the Board, review and evaluate all or a designated portion of patient records of those patients for whom Respondent provides treatment or consultation during the period of supervised practice. The supervisor shall review these records to assess: 1) the medical necessity and appropriateness of Respondent's treatment; 2) Respondent's compliance with community/minimum standards of practice in the diagnosis and treatment of animal patients; 3) Respondent's maintenance of necessary and appropriate treatment; 4) Respondent's maintenance of necessary and appropriate records and chart entries; and 5) Respondent's compliance with existing statutes and regulations governing the practice of veterinary

~~Respondent's supervisor shall file monthly reports with the Board. These reports shall be in a form designated by the Board and shall include a narrative section where the supervisor provides his or her conclusions and opinions concerning the issues described above and the basis for his or her conclusions and opinions. Additionally, the supervisor shall maintain and submit with his or her monthly reports a log designating the patient charts reviewed, the date(s) of service reviewed, and the date upon which the review occurred. If the supervisor terminates or is otherwise no longer available, Respondent shall not practice until a new supervisor has been approved by the Board.~~

If Respondent is an employee rather than a veterinary hospital owner, the supervisor shall additionally notify the Board of the dates and locations of all employment of Respondent, during each month covered by his or her report.

67. | No New Ownership

Respondent shall not have any new legal or beneficial interest in any veterinary business, firm, partnership, or corporation ~~currently or hereinafter licensed or registered by~~ during the Board and shall not own any veterinary hospital duration of his or her probation.

78. | No Management or Administration

Respondent shall not manage ~~or be the administrator of~~ any veterinary hospital during the duration of his or her probation.

Continuing Education

Within sixty (60) days of the effective date of this ~~decision~~ Decision, and on an annual basis thereafter, Respondent shall submit to the Board for its prior approval, an educational program or course related to Respondent's specific area(s) of weakness which shall not be less than _____ hours per year, for each year of probation. Upon successful completion of the course, Respondent shall provide proof to the Board. This program shall be in addition to the Continuing Education required of all licensees for licensure renewal. All costs shall be borne by Respondent.

810. | Clinical Training

Within sixty (60) days of the effective date of this ~~decision~~ Decision, Respondent shall submit an outline of an intensive clinical training program to the Board for its prior approval. The exact number of hours and the specific content of the program shall be determined by the Board or its designee. Respondent shall successfully complete the training program and may be required to pass an examination related to the program's contents administered by the Board or its designee. All costs shall be borne by Respondent.

911. Clinical or Written Examination

Within sixty (60) days of the effective date of this ~~decision~~Decision, ~~or upon completion of the education course required above,~~ or upon completion of the clinical training programs, Respondent shall take and pass a species-specific practice (clinical/written) examination to be administered by the Board or its designee. If Respondent fails this examination, Respondent must wait three (3) months between reexaminations, except that after three (3) failures, Respondent must wait one (1) year to take each necessary reexamination thereafter. All costs shall be borne by Respondent. If Respondent fails to take and pass this examination by the end of the first year of probation, Respondent shall cease the practice of veterinary medicine until this examination has been successfully passed and Respondent has been so notified by the Board in writing.

4012. Psychological Evaluation

Within thirty (30) days of the effective date of this Decision, ~~Respondent shall submit to the Board, for its prior approval, the name and qualifications of one or more psychotherapists of Respondent's choice. Upon approval, and within sixty (60) days of the effective date of this decision~~Decision, and on a periodic basis as may be required by the Board or its designee, Respondent shall undergo a psychiatric evaluation by a Board-appointed ~~approved~~ psychotherapist (psychiatrist or psychologist), to determine Respondent's ability to practice veterinary medicine safely. ~~the~~ The psychotherapist shall furnish a psychological report to the Board or its designee. All costs shall be borne by Respondent.

If the psychotherapist (psychiatrist or psychologist) recommends and the Board or its designee directs psychotherapeutic treatment, Respondent shall, within thirty (30) days of written notice of the need for psychotherapy, submit the name and qualification of one of more psychotherapists of Respondent's choice to the Board for its prior approval. Upon approval of the treating psychotherapist by the Board, Respondent shall undergo and continue psychotherapy until further notice from the Board. Respondent shall have the treating psychotherapist submit quarterly written reports to the Board. All costs shall be borne by Respondent.

ALTERNATIVE: PSYCHIATRIC EVALUATION AS A CONDITION PRECEDENT TO PRACTICE.

As of the effective date of the ~~decision~~Decision, Respondent shall not engage in the practice of veterinary medicine until notified in writing by the Board of this determination that Respondent is mentally fit to practice safely. If recommended by the psychotherapist (psychiatrist or psychologist) and approved by the Board or its designee, Respondent shall be barred from practicing veterinary medicine until the treating psychotherapist recommends, in writing, and stating the basis therefore, that Respondent can safely practice veterinary medicine, and the Board approves ~~said~~the recommendation. All costs shall be borne by Respondent.

4413. Psychotherapy

Within thirty (30) days of the effective date of this ~~decision~~Decision, Respondent shall submit to the Board, for its prior approval, the name and qualifications of one or more psychotherapists of Respondent's choice. Upon approval, Respondent shall undergo and continue treatment until the Board deems that no further psychotherapy is necessary. Respondent shall have the treating psychotherapist submit quarterly status reports to the Board. The Board may require Respondent to undergo psychiatric evaluations by a Board-appointed psychiatrist. All costs shall be borne by Respondent.

If the treating psychotherapist finds that Respondent cannot practice safely or independently, the psychotherapist shall notify the Board within three (3) working days. Upon notification by the Board, Respondent shall immediately cease practice and shall not resume practice until notified by the Board or its designee that Respondent may do so. Respondent shall not thereafter engage in any practice for which a license issued by the Board is required until the Board or its designee has notified Respondent that he/she may resume practice. Respondent shall document compliance with this condition in the manner required by the Board.

4214. Medical Evaluation

Within thirty (30) days of the effective date of this ~~decision~~Decision, Respondent shall submit to the Board, for its prior approval, the name and qualifications of one or more physicians of Respondent's choice. Upon approval and on a periodic basis thereafter as may be required by the Board or its designee, Respondent shall undergo a medical evaluation by a Board appointed-approved physician, to determine Respondent's ability to practice veterinary medicine safely, ~~who~~ The physician shall furnish a medical report to the Board or its designee. If Respondent is required by the Board or its designee to undergo medical treatment, Respondent shall, within thirty (30) days of written notice from the Board, submit the name and qualifications of a physician of Respondent's choice to the Board for its prior approval. Upon approval of the treating physician by the Board, Respondent shall undergo and continue medical treatment until further notice from the Board. Respondent shall have the treating physician submit quarterly written reports to the Board. All costs shall be borne by Respondent.

If at any time an approved evaluating physician or Respondent's approved treating physician determines that Respondent is unable to practice safely or independently as a veterinarian, the evaluating or treating physician shall notify the Board immediately by telephone and follow up by written letter within three (3) working days. Upon notification from the Board or its designee of this determination, Respondent shall cease all practice and shall not resume practice until notified by the Board that practice may be resumed.

ALTERNATIVE: MEDICAL EVALUATION AS A CONDITION PRECEDENT TO PRACTICE.

As of the effective date of this ~~decision~~Decision, Respondent shall not engage in the practice of veterinary medicine until notified in writing by the Board of its determination that Respondent is medically fit to practice safely. If recommended by the physician and approved by the Board or its designee, Respondent shall be barred from practicing veterinary medicine until the treating physician recommends, in writing and stating the basis therefore, that Respondent can safely practice veterinary medicine, and the Board approves said recommendation.

4315. Rehabilitation Program —Alcohol or Drug

Within thirty (30) days of the effective date of this ~~decision~~Decision, Respondent shall submit in writing a(n) alcohol/drug rehabilitation program in which Respondent shall participate (for the duration of probation/for one/for two years) to the Board for its prior approval. ~~In the quarterly written reports to the Board,~~ Respondent shall provide documentary evidence in the quarterly written reports to the Board of continuing satisfactory participation in this program. All costs shall be borne by Respondent.

Components of the treatment contract shall be relevant to the violation and to the Respondent's current status in recovery or rehabilitation. The components may include, but are not limited to: restrictions on practice and work setting, random biological fluid testing, abstinence from drugs and alcohol, use of worksite monitors, participation in chemical dependency rehabilitation programs or groups, psychotherapy, counseling, psychiatric evaluation, and other appropriate rehabilitation or monitoring programs. All costs of participating in the program(s) shall be borne by the Respondent.

16. Continuing Prevention and Support Groups

Within thirty (30) days of the effective date of this Decision, Respondent shall begin regular attendance at a recognized and established substance abuse recovery support group in California, (e.g., Alcoholics Anonymous, Narcotics Anonymous, etc.) which has been approved by the Board or its designee. Respondent must attend at least one group meeting per week unless otherwise directed by the Board or its designee. Respondent shall continue regular attendance and submit signed and dated documentation confirming attendance with each quarterly report for the duration of probation. Failure to attend or submit documentation thereof shall be considered a violation of probation.

4417. Submit to Drug Testing

Respondent shall immediately submit to drug testing, at Respondent's cost, upon request by the Board or its designee. There will be no confidentiality in test results; positive test results will be immediately reported to the Board and to Respondent's current employer.

Respondent shall make daily contact as directed by the Board or its designee to determine if he or she must submit to drug testing. Respondent shall submit his or her drug test on the same day that he or she is notified that a test is required.

Any confirmed positive test for alcohol or any drug not lawfully prescribed by a licensed practitioner as part of a documented medical treatment shall result in a cease practice order resulting in a period of nonpractice/suspension from work by Respondent and may be a cause for revocation of probation. Respondent may not resume the practice of veterinary medicine in any form until notified by the Board in writing.

4518. Abstain from Controlled Substances

Respondent shall completely abstain from the personal use or possession of controlled substances, as defined in the California Uniform Controlled Substances Act, and dangerous drugs ~~as defined in Section 4211 of the Business and Professions Code, except when lawfully not prescribed by a licensed practitioner for a bona fide illness.~~ Upon request of the Board or its designee, Respondent shall submit to and provide documentation from the licensed practitioner that the prescription for the drug testing during the period of probation was legitimately issued and is a necessary part of Respondent's treatment.

4619. Abstention from Alcohol Use

Respondent shall abstain completely from the use of ~~alcoholic beverages~~ products or beverages containing alcohol.

4720. Community Service

Within sixty (60) days of the effective date of this ~~decision~~ Decision, Respondent shall submit a community service program to the Board for its prior approval. In this program, Respondent shall provide free services on a regular basis to a community or charitable facility or agency for at least _____ () hours per _____ for the first _____ of probation. All services shall be subject to prior Board approval.

4821. Fine

Respondent shall pay to the Board a fine in the amount of _____ (not to exceed ~~five thousand dollars~~ \$5,000) pursuant to Business and Professions Code sections 4875 and 4883. Respondent shall make ~~aid~~ the payments as follows: _____.

~~Pursuant to Business and Professions Code Section 125.3, enforcement costs (investigative, legal, and expert review), up to the time of the hearing, can be recovered.~~

1922. Restitution

Respondent shall make restitution to any injured party in the amount of _____. Proof of compliance with this term shall be submitted to the Board within sixty (60) days of the effective date of this ~~decision~~ Decision.

Note – Name and address of injured party may be inserted in the body of this term.

2023. Ethics Training

Respondent shall submit to the Board for its prior approval, an ethics training course for a minimum of _____ hours during the probationary period. ~~Upon~~ Respondent shall provide proof of successful completion of the course, ~~Respondent shall provide proof to the Board.~~ All costs shall be borne by Respondent.

Definitions

Negligence - A departure from the standard of care or practice. It can be an act of omission or commission. Harm or injury is not a necessary component of administrative negligence because we do not seek monetary damages (redress).

Incompetence - A lack of knowledge or ability in discharging professional obligations.

Fraud - An intentional act or omission to deceive or mislead another person by misrepresentation, deceit, or concealment of a material fact.

Deception - Any act or omission that deceives or misleads another person.

Both fraud and deception can exist despite truthful statements if the statements made, whether written or oral, have a tendency to mislead or do in fact mislead.

OVERVIEW GUIDE FOR DISCIPLINARY DECISIONS

Most of the background information provided below is contained in the Department of Consumer Affairs Reference Manual for board members and gives an overview of part of a board's disciplinary process. Certain aspects of this overview were changed by the passage of SB 523 (Kopp, Chapter 938, Statutes of 1995). The changes were in regard to ex parte communications.

Accusation/Statement of Issues

The principal responsibility of a licensing board is to protect the public. This is accomplished by determining whether a license should be issued and whether a disciplinary action should be taken against a license. The Administrative Procedure Act prescribes the process necessary to deny, suspend, or revoke a license. An action to suspend or revoke a license is initiated by the filing of an Accusation. An action to deny a license is initiated by a Statement of Issues.

In disciplinary matters, a Deputy Attorney General (DAG) acts as the Board's prosecutor and coordinates all necessary legal proceedings. If a case is referred to the Office of the Attorney General (OAG) and accepted for prosecution, the DAG assigned the matter will prepare a Statement of Issues or an Accusation. The person against whom the action is filed is called the Respondent.

Once drafted, the Statement of Issues or Accusation is forwarded to the Executive Officer (EO) for approval. Except where the preparation of administrative pleadings is voluminous and routine, the EO will normally review an Accusation or Statement of Issues for accuracy. Board staff will then assign a case number and the EO will sign it before returning it to the OAG for service on the Respondent.

The document is then served on the Respondent. The Respondent may contest the charges by filing a Notice of Defense. The DAG will then schedule a hearing before an Administrative Law Judge (ALJ) from the Office of Administrative Hearings (OAH).

Administrative Hearing Process

An administrative hearing is similar to a trial in a civil or criminal court. Both parties have the opportunity to introduce evidence (oral and documentary) and the Respondent has a right to confront his or her accusers. Although a board may sit with the ALJ and hear the case, most cases are heard by the ALJ alone because it is a complex procedure and may require anywhere from several days to several weeks of time.

In order to take discipline against a license issued by the Board, either a veterinarian or registered veterinary technician, it must be demonstrated by "clear and convincing evidence" that a violation of law or regulation has occurred. The clear and convincing standard is more than the "preponderance of the evidence" standard required for civil trials but less than the "beyond a reasonable doubt" standard for criminal trials.

To sustain a citation against a licensee, the allegations need only be proven to the "preponderance of the evidence" standard.

Proposed Decision

After hearing all the witnesses and arguments and considering all of the evidence presented, the ALJ renders a Proposed Decision that contains: 1) findings of fact, 2) a determination of issues, and 3) a proposed penalty (assuming a violation is found). The Proposed Decision is then submitted to the Board for consideration and a final decision. The Proposed Decision must be acted upon by the Board within 100 days of receipt, or it becomes final by operation of law as proposed by the ALJ.

In making a decision whether to adopt the Proposed Decision as its own decision, the Board may only consider the Proposed Decision itself. The Board may not consider evidence about the case not contained in the Decision. The Board may consider advice of legal counsel regarding their options, the legal sufficiency of the Proposed Decision, and the law applicable to the case at hand. If a Board member is personally acquainted with the licensee to a degree that it affects their decision-making ability, or the Board member has received evidence about the case not contained in the Proposed Decision, the Board member should recuse him or herself from any discussion about the case and the vote on the matter.

The Board may vote on the Proposed Decision by mail ballot or at a meeting in a closed session. Although a Proposed Decision carries great weight based on the fact that the ALJ was a witness to the evidence presented at the hearing, the actual testimony of the witnesses and the demeanor of those witnesses, the Board is the final decision-maker. The Board should consider the ALJ's narrative explanation in the Decision and how the Disciplinary Guidelines were applied. If the Decision is outside the Disciplinary Guidelines, the ALJ must explain to the satisfaction of the Board, the factors that were proved that caused the ALJ to deviate from the standards.

Adopting any decision is a serious responsibility of a Board member. When considering a Proposed Decision, the Board's legal counsel is present to respond to questions about the legal parameters of the case and the Board's authority. Board members must take time to fully discuss each case and to seek clarification from legal counsel for any question they may have prior to making a final decision on the case.

When considering a Proposed Decision, the Board has three basic options:

1. adopt the Decision as written, including the proposed penalty;
2. adopt the Decision and reduce the penalty; or
3. not adopt the Proposed Decision.

Non-Adopt – Rejecting a Decision

Board may choose not to adopt a Proposed Decision of an ALJ for many reasons that might be grouped generally under the following categories:

1. The Board finds the penalty or terms of probation inappropriate to the violation(s).
2. The Board disagrees with the ALJ's determination of the issue(s) in the case.

When a Proposed Decision is not adopted, the Board is required to obtain a copy of the transcript of the hearing and documentary evidence unless this requirement is waived by all parties. Each Board member must read the entire transcript and consider only that evidence presented at the hearing. The DAG and the Respondent are entitled to submit written arguments, or oral argument if the Board so orders, on the case to the Board. The Board must render its own decision after reading the transcript and arguments within 100 days from the receipt of the transcript. After the decision has been rendered, all parties will be served with the Decision After Non-Adoption.

The Board can elect to return the non-adopted decision to the OAH if it feels that additional evidence is required before the Board can render its decision. In this instance, the case is returned to the OAH and

a new hearing date is scheduled. After the new hearing is complete, the ALJ, the same one as before or a new ALJ if the prior one is unavailable, will issue a new Proposed Decision and the Board will consider the Proposed Decision anew.

Petition for Reconsideration

A Respondent has a right to and may petition the Board before the effective date of the decision for reconsideration of the Board's decision.

If a Board does vote to reconsider its decision it is equivalent to not adopting a Proposed Decision and the steps listed above apply. If the 30-day time period lapses or the Board does not act on the petition, the request for reconsideration is deemed to be denied by operation of law, and the Board no longer has jurisdiction over the matter.

Appeal Process—Writ of Administrative Mandamus

A Respondent has the right to request reconsideration and if denied, file a Writ to appeal a disciplinary action imposed by a Board.

A decision rendered by a Superior Court can be further appealed to the Court of Appeals and then to the Supreme Court by either the Board or the Respondent.

Stipulated Agreement

Once an Accusation has been filed, rather than proceeding to a formal hearing and prior to requesting that the Board consider settlement terms and conditions, the Respondent shall provide mitigating factors and evidence of rehabilitation. Mitigating factors include factors beyond the control of the licensee that existed for a brief period of time but no longer exists that may mitigate the need for certain types of discipline. Evidence of rehabilitation would show that Respondent has taken serious steps to improve behavior and correct actions that led to the need for disciplinary action. The parties may then stipulate (agree) to a determination of the violations charged against the Respondent and to a proposed penalty. Stipulations are negotiated and drafted by the DAG representing the Board and the Respondent and his/her legal counsel. In negotiating a stipulation, the DAG works closely with the Board's EO (or designated Enforcement Program Manager) and utilizes the Board's Disciplinary Guidelines to arrive at a stipulation that is intended to be acceptable to the Board.

The stipulation is presented to the Board for its consideration in much the same way that a Proposed Decision is presented. Once a stipulation has been signed by the licensee and his or her counsel, if any, the Board must vote to approve or disapprove the stipulation as a whole. If the Board votes to disapprove a proposed stipulation, it may send back recommendations for inclusion into any future stipulations. The Board may look beyond the mere contents of an Accusation, though it must confine its consideration to information that is relevant to the charges at hand. While there is no time limit within which a stipulation must be considered, any undue delays should be avoided.

Default Decisions—

Default Decisions are rare; however, in some cases, the Respondent does not respond to an Accusation by returning the Notice of Defense, fails to return the Notice of Defense in a timely manner, or fails to appear at a scheduled hearing. There is a legal obligation to respond to an Accusation and to be present at a scheduled hearing. Failure to meet the legal obligations is grounds for a Default Decision whereby the discipline is imposed based on the Respondent's failure to respond. In these cases the Board need only demonstrate that it has served the Accusation on the licensee at the licensee's address of record. This is one reason it is imperative that licensees maintain a current address of record with the Board; failure to do so can have very serious consequences if the licensee becomes subject to an Accusation but has an old address of record on file with the Board because the Board has no legal obligation to make

~~any attempt to locate the licensee. Service of an Accusation by first class mail is all that is required to prove proper service.~~

~~The result of a Default Decision is nearly always a straight revocation of the license. If the Respondent is also a managing licensee for a premises permit, the premises permit will automatically be canceled by operation of law. If the Accusation was pled against the premises as well as the licensee, the premises permit is revoked along with the license.~~

Definitions

~~Negligence — A departure from the standard of care or practice. It can be an act of omission or commission. Harm or injury is not a necessary component of administrative negligence because we do not seek monetary damages (redress).~~

~~Incompetence — A lack of knowledge or ability in discharging professional obligations.~~

~~Fraud and Deception — Deception — Any act or omission that deceives or misleads another person.~~

~~Fraud — An intentional act or omission to deceive or mislead another person by misrepresentation, deceit, or concealment of a material fact.~~

~~Both fraud and deception can exist despite truthful statements if the statements made, whether written or oral, have a tendency to mislead or do in fact mislead.~~

Possible Board Positions Regarding Pending Legislation

The Board can vote to adopt the following positions regarding pending or proposed legislation:

- **Support:** The Board will actively support proposed legislation and demonstrate support through letters, testimony and other action necessary to communicate the supportive position taken by the Board.
- **Support, if amended:** The Board will take a supportive position and may work with the legislature to amend the proposed legislation
- **Oppose:** The Board will actively oppose the proposed legislation and demonstrate opposition through letters, testimony and other action necessary to communicate the opposed position taken by the Board.
- **Oppose, unless amended:** The Board will take an opposed position and may work with the legislature to amend the proposed legislation.
- **Neutral:** The Board neither supports nor opposes the addition/amendment/repeat of the statutory provision(s) set forth by the bill.
- **Watch:** The watch position adopted by the Board will indicate interest regarding the proposed legislation, without adopting an official position. The Board staff and members will closely monitor the progress of the proposed legislation and amendments.

***Note: The above positions are to provide a guideline for the Board when voting on position to take for proposed legislation, but the Board is able to take any position and is not limited to only the positions stated above.*

2018 TENTATIVE LEGISLATIVE CALENDAR

COMPILED BY THE OFFICE OF THE ASSEMBLY CHIEF CLERK

Revised 9-20-17

DEADLINES

- Jan. 1** Statutes take effect (Art. IV, Sec. 8(c)).
- Jan. 3** Legislature reconvenes (J.R. 51(a)(4)).
- Jan. 10** Budget must be submitted by Governor (Art. IV, Sec. 12(a)).
- Jan. 12** Last day for **policy committees** to hear and report to **fiscal committees** fiscal bills introduced in their house in the odd-numbered year (J.R. 61(b)(1)).
- Jan. 15** Martin Luther King, Jr. Day.
- Jan. 19** Last day for any committee to hear and report to the **Floor** bills introduced in that house in the odd-numbered year. (J.R. 61(b)(2)). Last day to submit **bill requests** to the Office of Legislative Counsel.
- Jan. 31** Last day for each house to pass bills introduced in that house in the odd-numbered year (J.R. 61(b)(3)) (Art. IV, Sec. 10(c)).

JANUARY							
	S	M	T	W	TH	F	S
Wk. 1		1	2	3	4	5	6
Wk. 2	7	8	9	10	11	12	13
Wk. 3	14	15	16	17	18	19	20
Wk. 4	21	22	23	24	25	26	27
Wk. 1	28	29	30	31			

FEBRUARY							
	S	M	T	W	TH	F	S
Wk. 1					1	2	3
Wk. 2	4	5	6	7	8	9	10
Wk. 3	11	12	13	14	15	16	17
Wk. 4	18	19	20	21	22	23	24
Wk. 1	25	26	27	28			

- Feb. 16** Last day for bills to be **introduced** (J.R. 61(b)(4), J.R. 54(a)).
- Feb. 19** Presidents' Day.

MARCH							
	S	M	T	W	TH	F	S
Wk. 1					1	2	3
Wk. 2	4	5	6	7	8	9	10
Wk. 3	11	12	13	14	15	16	17
Wk. 4	18	19	20	21	22	23	24
Spring Recess	25	26	27	28	29	30	31

- Mar. 22** **Spring Recess** begins upon adjournment (J.R. 51(b)(1)).
- Mar. 30** Cesar Chavez Day observed.

APRIL							
	S	M	T	W	TH	F	S
Wk. 1	1	2	3	4	5	6	7
Wk. 2	8	9	10	11	12	13	14
Wk. 3	15	16	17	18	19	20	21
Wk. 4	22	23	24	25	26	27	28
Wk. 1	29	30					

- Apr. 2** Legislature reconvenes from Spring Recess (J.R. 51 (b)(1)).
- Apr. 27** Last day for **policy committees** to hear and report to fiscal committees **fiscal bills** introduced in their house (J.R. 61(b)(5)).

MAY							
	S	M	T	W	TH	F	S
Wk. 1			1	2	3	4	5
Wk. 2	6	7	8	9	10	11	12
Wk. 3	13	14	15	16	17	18	19
Wk. 4	20	21	22	23	24	25	26
No Hrgs.	27	28	29	30	31		

- May 11** Last day for **policy committees** to hear and report to the Floor **nonfiscal** bills introduced in their house (J.R. 61(b)(6)).
- May 18** Last day for **policy committees** to meet prior to June 4 (J.R. 61(b)(7)).
- May 25** Last day for **fiscal committees** to hear and report to the **Floor** bills introduced in their house (J.R. 61 (b)(8)). Last day for **fiscal committees** to meet prior to June 4 (J.R. 61 (b)(9)).
- May 28** Memorial Day.
- May 29 – June 1** **Floor session only.** No committee may meet for any purpose except for Rules Committee, bills referred pursuant to Assembly Rule 77.2, and Conference Committees (J.R. 61(b)(10)).

*Holiday schedule subject to final approval by Rules Committee.

2018 TENTATIVE LEGISLATIVE CALENDAR

COMPILED BY THE OFFICE OF THE ASSEMBLY CHIEF CLERK

Revised 9-20-17

JUNE							
	S	M	T	W	TH	F	S
No Hrgs.						1	2
Wk. 1	3	4	5	6	7	8	9
Wk. 2	10	11	12	13	14	15	16
Wk. 3	17	18	19	20	21	22	23
Wk. 4	24	25	26	27	28	29	30

June 1 Last day for each house to pass bills introduced in that house (J.R. 61(b)(11)).

June 4 Committee meetings may resume (J.R. 61(b)(12)).

June 15 Budget Bill must be passed by midnight (Art. IV, Sec. 12(c)).

June 28 Last day for a legislative measure to qualify for the Nov. 6 General Election ballot. (Elec. Code Sec. 9040)

June 29 Last day for **policy committees** to hear and report **fiscal bills** to fiscal committees (J.R. 61(b)(13)).

JULY							
	S	M	T	W	TH	F	S
Wk. 1	1	2	3	4	5	6	7
Summer Recess	8	9	10	11	12	13	14
Summer Recess	15	16	17	18	19	20	21
Summer Recess	22	23	24	25	26	27	28
Summer Recess	29	30	31				

July 4 Independence Day.

July 6 Last day for **policy committees** to meet and report bills (J.R. 61(b)(14)). **Summer Recess** begins on adjournment, provided Budget Bill has been passed (J.R. 51(b)(2)).

AUGUST							
	S	M	T	W	TH	F	S
Summer Recess				1	2	3	4
Wk. 2	5	6	7	8	9	10	11
Wk. 3	12	13	14	15	16	17	18
No Hrgs.	19	20	21	22	23	24	25
No Hrgs.	26	27	28	29	30	31	

Aug. 6 Legislature reconvenes from Summer Recess (J.R. 51(b)(2)).

Aug. 17 Last day for **fiscal committees** to meet and report bills (J.R. 61(b)(15)).

Aug. 20 – 31 Floor session only. No committee may meet for any purpose except Rules Committee, bills referred pursuant to Assembly Rule 77.2, and Conference Committees (J.R. 61(b)(16)).

Aug. 24 Last day to **amend** on Floor (J.R. 61(b)(17)).

Aug. 31 Last day for each house to pass bills (Art. IV, Sec 10(c), J.R. 61(b)(18)). **Final Recess** begins on adjournment (J.R. 51(b)(3)).

IMPORTANT DATES OCCURRING DURING FINAL RECESS

2018

Sept. 30 Last day for Governor to sign or veto bills passed by the Legislature before Sept. 1 and in the Governor's possession on or after Sept. 1 (Art. IV, Sec.10(b)(2)).

Oct. 1 Bills enacted on or before this date take effect January 1, 2019 (Art. IV, Sec. 8(c)).

Nov. 6 General Election.

Nov. 30 Adjournment *sine die* at midnight (Art. IV, Sec. 3(a)).

Dec. 3 2019-20 Regular Session convenes for Organizational Session at 12 noon (Art. IV, Sec. 3(a)).

2019

Jan. 1 Statutes take effect (Art. IV, Sec. 8(c)).

*Holiday schedule subject to final approval by Rules Committee.

2018 Legislation of Interest

A. [AB 710 \(WOOD\) – CANNABIDIOL](#)

INTRODUCED: 2/15/17 **STATUS:** Approved by the Governor

FISCAL IMPACT: None **BOARD POSITION:** Watch

Last amended: 04/02/2018

Assembly Bill (AB) 710 proposes to add section 26002 to the Business and Professions Code (BPC) and to add section 11150.2 to the Health and Safety Code, relating to controlled substances.

Under existing law, the California Uniform Controlled Substances Act, classifies controlled substances into 5 designated schedules, with the most restrictive limitations generally placed on controlled substances classified in Schedule I, and the least restrictive limitations generally placed on controlled substances classified in Schedule V. Existing law designates cannabis in Schedule I. Cannabidiol is a compound contained in cannabis.

Existing law restricts the prescription, furnishing, possession, sale, and use of controlled substances, including cannabis and synthetic cannabinoid compounds, and makes a violation of those laws a crime, except as specified.

This bill, if one of specified changes in federal law regarding the controlled substance cannabidiol occurs, would deem a physician, pharmacist, or other authorized healing arts licensee who prescribes, furnishes, or dispenses a product composed of cannabidiol, in accordance with federal law, to be in compliance with state law governing those acts. The bill would also provide that upon the effective date of one of those changes in federal law regarding cannabidiol, the prescription, furnishing, dispensing, transfer, transportation, possession, or use of that product in accordance with federal law is for a legitimate medical purpose and is authorized pursuant to state law.

Existing law, the Medicinal and Adult-Use Cannabis Regulation and Safety Act, regulates the cultivation, processing, and sale of medicinal and adult-use cannabis within the state.

This bill would expressly exclude from regulation under that act, any medicinal product composed of cannabidiol approved by the federal Food and Drug Administration and either placed on a schedule of the federal Controlled Substances Act other than Schedule I, or exempted from one or more provisions of that act.

This bill would declare that it is to take effect immediately as an urgency statute.

B. AB 1753 (LOW) – Controlled substances: CURES Database

INTRODUCED: 1/3/18 **STATUS:** In Senate appropriations, currently on suspense.

FISCAL IMPACT: None **BOARD POSITION:** Watch

Last amended: 04/18/2018

AB 1753 proposes to amend, beginning January 1, 2020, sections 11161.5, 11162.1 and 11165 of the Health and Safety Code, relating to controlled substances.

Existing law classifies certain controlled substances into designated schedules. Existing law requires the Department of Justice to maintain the Controlled Substance Utilization Review and Evaluation System (CURES) for the electronic monitoring of the prescribing and dispensing of Schedule II, Schedule III, and Schedule IV controlled substances by a health care practitioner authorized to prescribe, order, administer, furnish, or dispense a Schedule II, Schedule III, or Schedule IV controlled substance. Existing law requires prescription forms for controlled substance prescriptions to be obtained from security printers approved by the Department of Justice, as specified. Existing law requires a dispensing pharmacy, clinic, or other dispenser to report specified information to the Department of Justice.

This bill would authorize the Department of Justice to reduce or limit the number of approved printers to 3, as specified. The bill would require prescription forms for controlled substance prescriptions to have a uniquely serialized number, in a manner prescribed by the Department of Justice, and would require a printer to submit specified information to the Department of Justice for all prescription forms delivered. The bill would require the information submitted by a dispensing pharmacy, clinic, or other dispenser to the Department of Justice to include the serial number for the corresponding prescription form, if applicable.

C. **AB 1776 (STEINORTH) – SAN BERNARDINO PILOT PROJECT: EMERGENCY MEDICAL TRANSPOR OF POLICE DOGS: PILOT PROJECT**

INTRODUCED: 1/4/18

STATUS: Passed in Senate; Pending reading of amendments in Assembly.

FISCAL IMPACT: None

BOARD POSITION: Support

Last amended: 08/06/2018

AB 1776 proposes to add and repeal Section 1797.10 of the Health and Safety Code, relating to emergency medical services.

Under existing law, the Emergency Medical Services System and the Prehospital Emergency Medical Care Personnel Act, establishes the Emergency Medical Services Authority, among other things, to establish training standards for Emergency Medical Technicians (EMT) at various levels, including EMT-I, EMT-II, and EMT-P. Existing law requires each county that develops an emergency medical services program to designate a local emergency medical services agency to have primary responsibility for administration of emergency medical services in the county.

This bill would authorize the County of San Bernardino to work with the Inland Counties Emergency Medical Agency to conduct a pilot project commencing January 1, 2019, that would authorize transportation for a police dog, as defined, injured in the line of duty to a facility that is capable of providing veterinary medical services to that dog, if certain conditions are met. The bill would require the Inland Counties Emergency Medical Agency to collect specified data about the pilot project and submit a report to the Legislature describing the data by January 1, 2022. The bill would repeal these provisions on January 1, 2022.

This bill would make legislative findings and declarations as to the necessity of a special statute for the County of San Bernardino.

D. AB 2138 (CHIU AND LOW) – LICENSING BOARDS: DENIAL OF APPLICATION: REVOCATION OR SUSPENSION OF LICENSURE: CRIMINAL CONVICTION

INTRODUCED: 2/12/18 **STATUS:** In Senate appropriations, currently on suspense.

FISCAL IMPACT: Yes **BOARD POSITION:** Oppose

Last amended: 06/20/2018

AB 2138 proposes to amend sections 7.5, 480, 481, 482, 488, 493, and 11345.2 of the Business and Professions Code (BPC) relating to professions and vocations.

Existing law provides for the licensure and regulation of various professions and vocations by boards within the Department of Consumer Affairs. Existing law authorizes a board to deny, suspend, or revoke a license or take disciplinary action against a licensee on the grounds that the applicant or licensee has, among other things, been convicted of a crime, as specified. Existing law provides that a person shall not be denied a license solely on the basis that the person has been convicted of a felony if he or she has obtained a certificate of rehabilitation or that the person has been convicted of a misdemeanor if he or she has met applicable requirements of rehabilitation developed by the board, as specified. Existing law also prohibits a person from being denied a license solely on the basis of a conviction that has been dismissed, as specified. Existing law requires a board to develop criteria to aid it when considering the denial, suspension, or revocation of a license to determine whether a crime is substantially related to the qualifications, functions, or duties of the business or profession the board regulates and requires a board to develop criteria to evaluate the rehabilitation of a person when considering the denial, suspension, or revocation of a license.

This bill would revise and recast those provisions to instead authorize a board to, among other things, deny, revoke, or suspend a license on the grounds that the applicant or licensee has been convicted of a crime only if the applicant or licensee is presently incarcerated or if the conviction, as defined, occurred within the preceding 7 years, except for serious felonies, and would require the crime to be substantially related to the qualifications, functions, or duties of the business or profession. The bill would prohibit a board from denying a person a license based on the conviction of a crime, or on the basis of acts underlying a conviction for a crime, if the conviction has been dismissed or expunged, if the person has provided evidence of rehabilitation, if the person has been granted clemency or a pardon, or if an arrest resulted in a disposition other than a conviction.

The bill would require the board to develop criteria for determining whether a crime is substantially related to the qualifications, functions, or duties of the business or profession. The bill would require a board to find that a person has made a showing of rehabilitation if certain conditions are met. The bill would require a board to follow certain procedures when requesting or acting on an applicant's or licensee's criminal history information. The bill would

also require a board to annually submit a report to the Legislature and post the report on its Internet Web site containing specified deidentified information regarding actions taken by a board based on an applicant or licensee's criminal history information.

Existing law authorizes a board to deny a license on the grounds that an applicant knowingly made a false statement of fact that is required to be revealed in the application for licensure.

This bill would prohibit a board from denying a license based solely on an applicant's failure to disclose a fact that would not have been cause for denial of the license had the fact been disclosed.

Existing law authorizes a board, after a specified hearing requested by an applicant for licensure to take various actions in relation to denying or granting the applicant the license.

This bill would revise and recast those provisions to eliminate some of the more specific options that the board may take in these circumstances.

This bill would also make necessary conforming changes.

E. AB 2215 (KALRA) – CANNABIS: VETERINARIANS: ANIMALS

INTRODUCED: 2/12/18

STATUS: Pending third reading in Senate appropriations

FISCAL IMPACT: Yes

BOARD POSITION: Support

Last amended: 06/27/2018

AB 2215 proposes to amend sections 26000 and 26001 and to add sections 4884 and 26001.5 to the BPC, relating to cannabis.

The Control, Regulate and Tax Adult Use of Marijuana Act of 2016 (AUMA), an initiative measure approved as Proposition 64 at the November 8, 2016, statewide general election, authorizes a person who obtains a state license under AUMA to engage in commercial adult-use cannabis activity pursuant to that license and applicable local ordinances. The Medicinal and Adult-Use Cannabis Regulation and Safety Act (MAUCRSA), among other things, consolidates the licensure and regulation of commercial medicinal and adult-use cannabis activities and states that it is the intent of MAUCRSA to control and regulate the cultivation, distribution, transport, storage, manufacturing, processing, and sale of both medicinal cannabis and medicinal cannabis products for patients with a valid physician recommendation and adult-use cannabis and adult-use cannabis products for adults 21 years of age and over. MAUCRSA defines “cannabis products” for these purposes.

This bill would state that it is additionally the intent of MAUCRSA to control and regulate the cultivation, distribution, transport, storage, manufacturing, processing, and sale of cannabis and cannabis products for medicinal use on an animal owned by an adult 21 years of age and over and would define “cannabis products” to include products intended for medicinal use on an animal. The bill would authorize an adult 21 years of age and over to use, for medicinal purposes, cannabis and cannabis products on an animal owned by that adult and would limit the sale of the products to those adults to a licensee who has been issued a retailer license under MAUCRSA. The bill would also make other conforming changes.

The California Uniform Controlled Substances Act classifies controlled substances into 5 designated schedules, and places cannabis and cannabis products under Schedule I. The act prohibits prescribing, administering, dispensing, or furnishing a controlled substance to or for any person or animal, unless otherwise specified.

The Veterinary Medicine Practice Act provides for the licensure and regulation of veterinarians and the practice of veterinary medicine by the Veterinary Medical Board, which is within the Department of Consumer Affairs. The act authorizes the board to revoke or suspend the license of a person to practice veterinary medicine, or to assess a fine, for specified causes, including

violating a statute related to controlled substances. The act also makes a violation of its provisions a misdemeanor.

This bill would prohibit a licensed veterinarian from dispensing or administering cannabis or cannabis products to an animal patient. Because a violation of the Veterinary Medicine Practice Act's provisions is a crime, the bill would expand the scope of that crime, thereby imposing a state-mandated local program.

The bill would also prohibit the Veterinary Medical Board from disciplining, or denying, revoking, or suspending the license of, a licensed veterinarian solely for discussing the use of cannabis on an animal for medicinal purposes. The bill would require the board to develop guidelines for these discussions on or before January 1, 2020, and would require the board to post the guidelines on its Internet Web site.

AUMA authorizes legislative amendment of its provisions with a 2/3 vote of both houses, without submission to the voters, to further its purposes and intent.

This bill would declare that its provisions further the purposes and intent of AUMA. The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

F. AB 2300 (MAIENSCHIEIN) – CONTINUING EDUCATION: VETERINARIANS

INTRODUCED: 2/13/18 **STATUS:** Senate amendments passed in assembly. In enrollment.

FISCAL IMPACT: None **BOARD POSITION:** Oppose

Last amended: 06/27/2018

AB 2300 proposes to amend sections 4846.5 of the BPC, relating to healing arts.

Existing law creates a Veterinary Medical Board in the Department of Consumer Affairs whose highest priority is to protect the public in exercising its licensing, regulatory, and disciplinary functions. Existing law requires applications for a veterinarian license to be furnished on a form and accompanied by a diploma or other verification of graduation from a veterinary college recognized by the board. Existing law requires each veterinarian licensed by the board to biennially apply for renewal of his or her license. Existing law requires the board to issue renewal licenses to those applicants that have completed a minimum of 36 hours of continuing education in the preceding 2 years, including no more than 6 hours of self-study courses.

This bill would instead authorize an applicant for renewal to earn a total of 6 hours or less of the 36 hours of continuing education by either taking up to 6 hours of self-study courses or providing up to 4 hours of pro bono spaying or neutering services a household with a demonstrated financial need for reduced-cost services, or a combination thereof.

G. AB 2362 (RUBIO) – SAFE TRANSPORTATION OF DOGS AND CATS

INTRODUCED: 2/14/18 **STATUS:** Passed in Senate; pending reading of amendments in Assembly.

FISCAL IMPACT: None **BOARD POSITION:** Watch

Last amended: 07/05/2018

AB 2362 proposes to add Chapter 12 (commencing with Section 122390) to Part 6 of Division 105 of the Health and Safety Code, relating to public health. Existing law governs the retail sale of dogs and cats by pet dealers, as defined, and establishes minimum standards for the care of those animals, as specified. This bill would establish health and safety standards for mobile or traveling housing facilities for dogs and cats, including standards governing sufficient heating and cooling, ventilation, and lighting. The bill would establish minimum and maximum temperatures and would require, among other things, that dry bedding and auxiliary ventilation be provided under certain circumstances. The bill would apply to public and private organizations, including animal shelters, rescue groups, and humane society shelters.

H. AB 2483 (VOEPEL) – INDEMNIFICATION OF PUBLIC OFFICERS AND EMPLOYEES: ANTITRUST AWARDS

INTRODUCED: 2/14/18

STATUS: Failed to meet the policy committee deadline/Died.

FISCAL IMPACT: None

BOARD POSITION: Support

Last amended: 04/09/2018

AB 2483 proposes to amend section 825 of the Government Code, relating to liability.

The Government Claims Act, except as provided, requires a public entity to pay any judgment or any compromise or settlement of a claim or action against an employee or former employee of the public entity if the employee or former employee requests the public entity to defend him or her against any claim or action against him or her for an injury arising out of an act or omission occurring within the scope of his or her employment as an employee of the public entity, the request is made in writing not less than 10 days before the day of trial, and the employee or former employee reasonably cooperates in good faith in the defense of the claim or action. That act prohibits the payment of punitive or exemplary damages by a public entity, except as specified.

This bill would require a public entity to pay a judgment or settlement for treble damage antitrust awards against a member of a regulatory board within the Department of Consumer Affairs for an act or omission occurring within the scope of the member's official capacity as a member of that regulatory board. The bill would specify that treble damages awarded pursuant to a specified federal law for violation of another federal law are not punitive or exemplary damages within the act.

I. [AB 2589 \(BIGELOW\) – CONTROLLED SUBSTANCES: HUMAN CHORIONIC GONADOTROPIN](#)

INTRODUCED: 2/15/18 **STATUS:** Approved by the Governor

FISCAL IMPACT: None **BOARD POSITION:** Support

Last amended: 04/10/2018

AB 2589 proposes to amend section 11056 of the Health and Safety Code, relating to controlled substances.

Under the existing California Uniform Controlled Substances Act, controlled substances are listed on 5 different schedules. Existing law lists human chorionic gonadotropin (hCG) as a Schedule III controlled substance. Substances listed as controlled substances are subject to various forms of regulation, including reporting requirements, prescribing requirements, and criminal prohibitions on possession.

This bill would exempt hCG from being subject to the reagent regulations of the Controlled Substances Act when possessed by, sold to, purchased by, transferred to, or administered by a licensed veterinarian, or a licensed veterinarian's designated agent, exclusively for veterinary use.

J. AB 2958 (QUIRK) – STATE BODIES: MEETINGS: TELECONFERENCE

INTRODUCED: 2/16/18 **STATUS:** Pending 3rd reading in Senate appropriations

FISCAL IMPACT: None **BOARD POSITION:** None

Last amended: 08/06/2018

AB 2589 proposes add section 11123.5 to the Government Code, relating to state government.

Under existing law, the Bagley-Keene Open Meeting Act, requires, with specified exceptions, that all meetings of a state body, as defined, be open and public, and all persons be permitted to attend any meeting of a state body, except as provided. Existing law does not prohibit a state body from holding an open or closed meeting by teleconference for the benefit of the public and state body. Existing law, among other things, requires a state body that elects to conduct a meeting or proceeding by teleconference to post agendas at all teleconference locations, to identify each teleconference location in the notice and agenda, and to make each teleconference location accessible to the public. Existing law requires the agenda to provide an opportunity for members of the public to address the state body directly at each teleconference location, as specified.

This bill, for a state body that is an advisory board, advisory commission, advisory committee, advisory subcommittee, or similar multimember body, would authorize an additional way of holding a meeting by teleconference, as prescribed, provided it also complies with all other applicable requirements of the Bagley-Keene Open Meeting Act. In this context, the bill would require a member of a state body participating by teleconference to be listed in the meeting minutes and that notice, as specified, identifying that member be provided to the public at least 24 hours before the meeting. The bill would require a state body to designate a primary physical meeting location where members of the public may attend the meeting and participate. The bill would require a quorum of the body's members to be present at the primary physical meeting location and that decisions during the teleconference meeting be made by rollcall vote. The bill would require the state body, if a member participates remotely, to provide the public a way to hear the meeting or to observe it and to provide public notice, as specified, of how this would be done. Upon discovering that a means of remote access has failed during a meeting, the bill would require the body to end or adjourn the meeting, as specified, and would prescribe certain notice requirements and procedures in this connection.

K. AB 3013 (CHU) – VETERINARY MEDICINE: ANIMAL PHYSICAL REHABILITATION

INTRODUCED: 2/16/18 **STATUS:** Died/Failed passage

FISCAL IMPACT: Yes **BOARD POSITION:** Oppose

Last amended: 04/17/2018

AB 3013 proposes to amend section 4905 and add section 4828.5 to the BPC, relating to healing arts. Existing law, the Physical Therapy Practice Act, provides for the licensure and regulation of physical therapists by the Physical Therapy Board of California, which is within the Department of Consumer Affairs, and defines physical therapy as the art and science of physical or corrective rehabilitation or of physical or corrective treatment of any bodily or mental condition of any person by the use of the physical, chemical, and other properties of heat, light, water, electricity, sound, massage, and active, passive, and resistive exercise.

Existing law, the Veterinary Medicine Practice Act, provides for the licensure and regulation of veterinarians and the practice of veterinary medicine by the Veterinary Medical Board, which is within the Department of Consumer Affairs. That act makes it unlawful for any person to practice veterinary medicine in this state without a license and provides that the practice of veterinary medicine includes, among other things, the treatment of whatever nature for the prevention, cure, or relief of a wound, fracture, bodily injury, or disease of an animal.

This bill would authorize a licensed physical therapist with a certificate in animal physical rehabilitation to provide animal physical rehabilitation to an animal if certain requirements are met, including that the animal physical rehabilitation is performed in certain settings and under the supervision of a supervising veterinarian. The bill would authorize an animal physical rehabilitation assistant to assist with delegated animal physical rehabilitation tasks if certain conditions are met. The bill would require the Veterinary Medical Board to create an application form and determine the application process for the certificate. The bill would require the Veterinary Medical Board and the Physical Therapy Board of California, in cooperation, to determine the qualifications necessary for a physical therapist to receive a certificate issued by the Veterinary Medical Board, as provided, and would authorize the Veterinary Medical Board to charge a fee for issuance and renewal of a certificate. The bill would provide that a physical therapist with a certificate in animal physical rehabilitation or an animal physical rehabilitation assistant is solely liable for any delegated animal physical rehabilitation tasks provided under a direct order. The bill would authorize the Veterinary Medical Board to discipline a physical therapist with a certificate in animal physical rehabilitation. The bill would also define various terms for these purposes

L. SB 1305 (GLAZER) – EMERGENCY MEDICAL SERVICES PROVIDERS: DOGS AND CATS: IMMUNITY

INTRODUCED: 2/16/18

STATUS: Ordered to consent calendar

FISCAL IMPACT: No

BOARD POSITION: Watch

Last amended: 06/27/2018

Senate Bill (SB) 1305 proposes to add Section 1799.109 to the Health and Safety Code, relating to emergency medical services providers.

Under existing law, the Emergency Medical Services System and the Prehospital Emergency Medical Care Personnel Act (the act), establishes the Emergency Medical Services Authority to coordinate and integrate all state activities concerning emergency medical services, including, among other duties, establishing training standards for specified emergency services personnel. The act provides a qualified immunity for public entities and emergency rescue personnel providing emergency services. The act provides other exemptions from liability for specified professionals rendering emergency medical services.

Existing law, the Veterinary Medicine Practice Act, governs the practice of veterinary medicine in this state and makes it unlawful for any person to practice veterinary medicine in this state without a valid license issued pursuant to the act. For purposes of the act, the practice of veterinary medicine includes, among other things, administering a drug, appliance, or treatment for the cure or relief of a wound, fracture, or bodily injury of an animal.

This bill would authorize an emergency medical services provider, as defined, to provide basic first aid to dogs and cats, as defined, to the extent that the provision of that care is not prohibited by the provider’s employer. The bill would limit civil liability for specified individuals who provide care to a pet or other domesticated animal during an emergency by applying existing provisions of state law. The definition of “basic first aid to dogs and cats” for purposes of these provisions would specifically include, among other acts, administering oxygen and bandaging for the purpose of stopping bleeding.

M. SB 1480 (HILL) – PROFESSIONS AND VOCATIONS

INTRODUCED: 2/16/18 **STATUS:** On suspense file

FISCAL IMPACT: No **BOARD POSITION:** Support

Last amended: 08/06/2018

SB 1480 proposes to amend sections 101, 101.7, 328, 2064.5, 2065, 2135, 2499.5, 2529.6, 2708, 2715, 2816, 2892.6, 2895, 3047, 3147, 3680, 4008, 4518, 4548, 4604, 4809.7, 4830, 4836.2 and 11506 of, and to add Sections 109.5, 1007, 2892.7, 4518.1, 4826.4, 4829.5, and 4841.2 to, the Business and Professions Code, to amend Sections 7000, 7103, 8731, 8778.5, 8785, 103775, and 103780 of the Health and Safety Code, and to amend an initiative act entitled “An act prescribing the terms upon which licenses may be issued to practitioners of chiropractic, creating the State Board of Chiropractic Examiners, and declaring its powers and duties, prescribing penalties for violation thereof, and repealing all acts and parts of acts inconsistent herewith” approved by voters on November 7, 1922, (the Chiropractic Act) by amending Sections 5 and 12 of the act, relating to professions and vocations, and making an appropriation therefor.

(1) Existing law establishes the Department of Consumer Affairs, and specifies the various boards that comprise the department. This bill would make technical changes to that provision.

(2) Existing law requires the Director of Consumer Affairs to implement complaint prioritization guidelines for boards to use in prioritizing their respective complaint and investigative workloads. This bill would require the director to amend those guidelines to include the category of “allegations of serious harm to a minor,” as specified.

(13) The Veterinary Medicine Practice Act regulates the practice of veterinary medicine by the Veterinary Medical Board and makes a violation of its provisions a crime. Existing law separately provides immunity from liability to a veterinarian or registered veterinary technician who renders services during certain states of emergency.

This bill would authorize a California-licensed veterinarian at a registered premises located within a 25-mile radius of any declared condition of emergency to, in good faith, provide veterinary services without establishing a veterinarian-client-patient relationship and dispense or prescribe a dangerous drug or device where failure to provide services or medications may result in loss of life or intense suffering. The bill would provide immunity from liability for a veterinarian providing those services.

Existing law excludes specified persons from the provisions regulating the practice of veterinary medicine, including veterinary medicine students in 2 specified schools of veterinary medicine who participate in diagnosis and treatment, as specified.

This bill would instead exclude students from any veterinary medical program accredited by the American Veterinary Medical Association Council on Education who participate in diagnosis or treatment with direct supervision, or surgery with immediate supervision, subject to specified conditions.

Existing law provides for a veterinary assistant controlled substance permit issued by the Veterinary Medical Board to qualified applicants and authorizes the board to deny, revoke, or suspend a veterinary assistant controlled substance permit for specified reasons.

This bill would add to the list of reasons the conviction of a crime substantially related to the qualifications, functions, or duties of veterinary medicine, veterinary surgery, or veterinary dentistry. The bill would also authorize the board, in addition to denial, revocation, or suspension, to issue a probationary veterinary assistant controlled substance permit.

The bill would prohibit a graduate of a veterinary college from performing animal health care tasks otherwise performed by a registered veterinary technician, except as specified, and would require a veterinarian to offer a consultation to the client each time he or she initially prescribes, dispenses, or furnishes a dangerous drug, as defined, to an animal patient in an outpatient setting. Because a violation of that provision would be a crime, the bill would impose a state-mandated local program.

Existing law requires the Veterinary Medical Board to establish a regular inspection program, and provides that the board is required to make every effort to inspect at least 20% of veterinary premises annually.

This bill would instead require the board to inspect at least 20% of veterinary premises annually. (12) The bill would also make technical changes to various provisions of the Health and Safety Code by eliminating cross-references to obsolete provisions governing cemeteries.

(16) The bill would make technical changes to various provisions of the Business and Professions Code. The bill would also make technical changes to various provisions of the Health and Safety Code by eliminating cross-references to obsolete provisions governing cemeteries.

(17) The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

N. SB 1491 (COMMITTEE OF BUSINESS, PROFESSIONS AND ECONOMIC DEVELOPMENT) – HEALING ARTS

INTRODUCED: 2/21/18

STATUS: Ordered to consent calendar

FISCAL IMPACT: No

BOARD POSITION: Support

Last amended: 06/04/2018

SB 1491 proposed to amend sections 27, 865, 1607, 1611, 1611.3, 1611.5, 1612, 1614, 1615, 1621, 1645, 1680, 1750, 1750.2, 1750.4, 1751, 1753.7, 2290.5, 2556, 3004, 3146, 3735, 3751, 4848, 4980.37, 4980.39, 4980.41, 4980.72, 4980.78, 4980.79, 4990.30, 4992, 4996.17, 4999.14, 4999.22, 4999.32, 4999.48, 4999.60, 4999.62, 4999.63, and 4999.100 of, and to repeal sections 650.4, 1601.5, and 1601.6 of, the Business and Professions Code, and to amend section 6924 of the Family Code, relating to healing arts.

(4) The Veterinary Medicine Practice Act provides for the licensure and regulation of veterinarians and the practice of veterinary medicine by the Veterinary Medical Board, which is within the Department of Consumer Affairs, and requires an applicant for licensure to demonstrate his or her competency by examination. That act requires the examination to consist of certain components, including an examination concerning the act that is required to be administered by the board by mail.

This bill would require that component of the examination to be administered by the board by regular mail, email, or by both regular mail and email.

(6) The bill would also make nonsubstantive changes.

(7) The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Assembly Bill No. 710

CHAPTER 62

An act to add Section 26002 to the Business and Professions Code, and to add Section 11150.2 to the Health and Safety Code, relating to controlled substances, and declaring the urgency thereof, to take effect immediately.

[Approved by Governor July 9, 2018. Filed with Secretary of State July 9, 2018.]

LEGISLATIVE COUNSEL'S DIGEST

AB 710, Wood. Cannabidiol.

Existing law, the California Uniform Controlled Substances Act, classifies controlled substances into 5 designated schedules, with the most restrictive limitations generally placed on controlled substances classified in Schedule I, and the least restrictive limitations generally placed on controlled substances classified in Schedule V. Existing law designates cannabis in Schedule I. Cannabidiol is a compound contained in cannabis.

Existing law restricts the prescription, furnishing, possession, sale, and use of controlled substances, including cannabis and synthetic cannabinoid compounds, and makes a violation of those laws a crime, except as specified.

This bill, if one of specified changes in federal law regarding the controlled substance cannabidiol occurs, would deem a physician, pharmacist, or other authorized healing arts licensee who prescribes, furnishes, or dispenses a product composed of cannabidiol, in accordance with federal law, to be in compliance with state law governing those acts. The bill would also provide that upon the effective date of one of those changes in federal law regarding cannabidiol, the prescription, furnishing, dispensing, transfer, transportation, possession, or use of that product in accordance with federal law is for a legitimate medical purpose and is authorized pursuant to state law.

Existing law, the Medicinal and Adult-Use Cannabis Regulation and Safety Act, regulates the cultivation, processing, and sale of medicinal and adult-use cannabis within the state.

This bill would expressly exclude from regulation under that act, any medicinal product composed of cannabidiol approved by the federal Food and Drug Administration and either placed on a schedule of the federal Controlled Substances Act other than Schedule I, or exempted from one or more provisions of that act.

This bill would declare that it is to take effect immediately as an urgency statute.

The people of the State of California do enact as follows:

SECTION 1. The Legislature finds and declares that both children and adults with epilepsy are in desperate need of new treatment options and that cannabidiol has shown potential as an effective treatment option. If federal laws prohibiting the prescription of medications composed of cannabidiol are repealed or if an exception from the general prohibition is enacted permitting the prescription of drugs composed of cannabidiol, patients should have rapid access to this treatment option. The availability of this new prescription medication is intended to augment, not to restrict or otherwise amend, other cannabinoid treatment modalities including, but not limited to, industrial hemp products and derivatives containing cannabidiol, currently available under state law.

SEC. 2. Section 26002 is added to the Business and Professions Code, to read:

26002. This division shall not apply to any product containing cannabidiol that has been approved by the federal Food and Drug Administration that has either been placed on a schedule of the federal Controlled Substances Act other than Schedule I or has been exempted from one or more provisions of that act, and that is intended for prescribed use for the treatment of a medical condition.

SEC. 3. Section 11150.2 is added to the Health and Safety Code, to read:

11150.2. (a) Notwithstanding any other law, if cannabidiol is excluded from Schedule I of the federal Controlled Substances Act and placed on a schedule of the act other than Schedule I, or if a product composed of cannabidiol is approved by the federal Food and Drug Administration and either placed on a schedule of the act other than Schedule I, or exempted from one or more provisions of the act, so as to permit a physician, pharmacist, or other authorized healing arts licensee acting within his or her scope of practice, to prescribe, furnish, or dispense that product, the physician, pharmacist, or other authorized healing arts licensee who prescribes, furnishes, or dispenses that product in accordance with federal law shall be deemed to be in compliance with state law governing those acts.

(b) For purposes of this chapter, upon the effective date of one of the changes in federal law described in subdivision (a), notwithstanding any other state law, a product composed of cannabidiol may be prescribed, furnished, dispensed, transferred, transported, possessed, or used in accordance with federal law and is authorized pursuant to state law.

(c) This section does not apply to any product containing cannabidiol that is made or derived from industrial hemp, as defined in Section 11018.5 and regulated pursuant to that section.

SEC. 4. This act is an urgency statute necessary for the immediate preservation of the public peace, health, or safety within the meaning of Article IV of the California Constitution and shall go into immediate effect. The facts constituting the necessity are:

In order to ensure that patients are able to obtain access to a new treatment modality as soon as federal law makes it available, it is necessary that this act take effect immediately.

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AMENDED IN ASSEMBLY APRIL 18, 2018

CALIFORNIA LEGISLATURE—2017–18 REGULAR SESSION

ASSEMBLY BILL

No. 1753

Introduced by Assembly Member Low

January 3, 2018

An act to amend Sections 11161.5, 11162.1, and 11165 of the Health and Safety Code, relating to controlled substances.

LEGISLATIVE COUNSEL'S DIGEST

AB 1753, as amended, Low. Controlled substances: CURES database.

Existing law classifies certain controlled substances into designated schedules. Existing law requires the Department of Justice to maintain the Controlled Substance Utilization Review and Evaluation System (CURES) for the electronic monitoring of the prescribing and dispensing of Schedule II, Schedule III, and Schedule IV controlled substances by a health care practitioner authorized to prescribe, order, administer, furnish, or dispense a Schedule II, Schedule III, or Schedule IV controlled substance. Existing law requires prescription forms for controlled substance prescriptions to be obtained from security printers approved by the Department of Justice, as specified. Existing law requires a dispensing pharmacy, clinic, or other dispenser to report specified information to the Department of Justice.

This bill ~~would, beginning January 1, 2020, require~~ *would authorize* the Department of Justice to *reduce or* limit the number of approved printers to 3, as specified. The bill would require prescription forms for controlled substance prescriptions to have a uniquely serialized number, in a manner prescribed by the Department of Justice, and would require a printer to submit specified information to the Department of Justice for all prescription forms delivered. The bill would require the

information submitted by a dispensing pharmacy, clinic, or other dispenser to the Department of Justice to include the serial number for the corresponding prescription ~~pad~~, *form*, if applicable.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. The Legislature finds and declares the following:

2 (a) The prevailing use of paper prescription pads to prescribe
3 controlled substances leads to significant instances of theft and
4 fraud each year, contributing to the prescription drug abuse crisis
5 and fueling criminal enterprises engaged in drug diversion.

6 (b) Prescribing controlled substances by means of electronic
7 transmission prescription, or e-prescribing, has long been
8 considered the most effective way to combat prescription pad theft
9 and fraud.

10 (c) Many states have begun to require that all controlled
11 substances must be prescribed electronically as a means of
12 addressing the public health and public safety crises associated
13 with prescription drug abuse and diversion.

14 (d) Until mandatory e-prescribing is established in California,
15 it is critical that tighter restrictions be placed on the manufacturing
16 and tracking of prescription pads used within the state.

17 SEC. 2. Section 11161.5 of the Health and Safety Code is
18 amended to read:

19 11161.5. (a) Prescription forms for controlled substance
20 prescriptions shall be obtained from security printers approved by
21 the Department of Justice.

22 (b) The department may approve security printer applications
23 after the applicant has provided the following information:

24 (1) Name, address, and telephone number of the applicant.

25 (2) Policies and procedures of the applicant for verifying the
26 identity of the prescriber ordering controlled substance prescription
27 forms.

28 (3) Policies and procedures of the applicant for verifying
29 delivery of controlled substance prescription forms to prescribers.

30 (4) (A) The location, names, and titles of the applicant’s agent
31 for service of process in this state; all principal corporate officers,
32 if any; all managing general partners, if any; and any individual

1 owner, partner, corporate officer, manager, agent, representative,
2 employee, or subcontractor of the applicant who has direct access
3 to, or management or control of, controlled substance prescription
4 forms.

5 (B) A report containing this information shall be made on an
6 annual basis and within 30 days after any change of office,
7 principal corporate officers, managing general partner, or of any
8 person described in subparagraph (A).

9 (5) (A) A signed statement indicating whether the applicant,
10 any principal corporate officer, any managing general partner, or
11 any individual owner, partner, corporate officer, manager, agent,
12 representative, employee, or subcontractor of the applicant who
13 has direct access to, or management or control of, controlled
14 substance prescription forms, has ever been convicted of, or pled
15 no contest to, a violation of any law of a foreign country, the United
16 States, or any state, or of any local ordinance.

17 (B) The department shall provide the applicant and any
18 individual owner, partner, corporate officer, manager, agent,
19 representative, employee, or subcontractor of the applicant who
20 has direct access to, or management or control of, controlled
21 substance prescription forms, with the means and direction to
22 provide fingerprints and related information, in a manner specified
23 by the department, for the purpose of completing state, federal, or
24 foreign criminal background checks.

25 (C) Any applicant described in subdivision (b) shall submit his
26 or her fingerprint images and related information to the department,
27 for the purpose of the department obtaining information as to the
28 existence and nature of a record of state, federal, or foreign level
29 convictions and state, federal, or foreign level arrests for which
30 the department establishes that the applicant was released on bail
31 or on his or her own recognizance pending trial, as described in
32 subdivision (l) of Section 11105 of the Penal Code. Requests for
33 federal level criminal offender record information received by the
34 department pursuant to this section shall be forwarded to the
35 Federal Bureau of Investigation by the department.

36 (D) The department shall assess against each security printer
37 applicant a fee determined by the department to be sufficient to
38 cover all processing, maintenance, and investigative costs generated
39 from or associated with completing state, federal, or foreign
40 background checks and inspections of security printers pursuant

1 to this section with respect to that applicant; the fee shall be paid
2 by the applicant at the time he or she submits the security printer
3 application, fingerprints, and related information to the department.

4 (E) The department shall retain fingerprint impressions and
5 related information for subsequent arrest notification pursuant to
6 Section 11105.2 of the Penal Code for all applicants.

7 (c) The department may, within 60 calendar days of receipt of
8 the application from the applicant, deny the security printer
9 application.

10 (d) The department may deny a security printer application on
11 any of the following grounds:

12 (1) The applicant, any individual owner, partner, corporate
13 officer, manager, agent, representative, employee, or subcontractor
14 for the applicant, who has direct access, management, or control
15 of controlled substance prescription forms, has been convicted of
16 a crime. A conviction within the meaning of this paragraph means
17 a plea or verdict of guilty or a conviction following a plea of nolo
18 contendere. Any action which a board is permitted to take
19 following the establishment of a conviction may be taken when
20 the time for appeal has elapsed, the judgment of conviction has
21 been affirmed on appeal, or when an order granting probation is
22 made suspending the imposition of sentence, irrespective of a
23 subsequent order under the provisions of Section 1203.4 of the
24 Penal Code.

25 (2) The applicant committed any act involving dishonesty, fraud,
26 or deceit with the intent to substantially benefit himself, herself,
27 or another, or substantially injure another.

28 (3) The applicant committed any act that would constitute a
29 violation of this division.

30 (4) The applicant knowingly made a false statement of fact
31 required to be revealed in the application to produce controlled
32 substance prescription forms.

33 (5) The department determines that the applicant failed to
34 demonstrate adequate security procedures relating to the production
35 and distribution of controlled substance prescription forms.

36 (6) The department determines that the applicant has submitted
37 an incomplete application.

38 (7) As a condition for its approval as a security printer, an
39 applicant shall authorize the Department of Justice to make any
40 examination of the books and records of the applicant, or to visit

1 and inspect the applicant during business hours, to the extent
2 deemed necessary by the board or department to properly enforce
3 this section.

4 (e) An approved applicant shall submit an exemplar of a
5 controlled substance prescription form, with all security features,
6 to the Department of Justice within 30 days of initial production.

7 (f) The department shall maintain a list of approved security
8 printers and the department shall make this information available
9 to prescribers and other appropriate government agencies, including
10 the Board of Pharmacy.

11 (g) Before printing any controlled substance prescription forms,
12 a security printer shall verify with the appropriate licensing board
13 that the prescriber possesses a license and current prescribing
14 privileges which permits the prescribing of controlled substances
15 with the federal Drug Enforcement Administration (DEA).

16 (h) Controlled substance prescription forms shall be provided
17 directly to the prescriber either in person, by certified mail, or by
18 a means that requires a signature signifying receipt of the package
19 and provision of that signature to the security printer. Controlled
20 substance prescription forms provided in person shall be restricted
21 to established customers. Security printers shall obtain a photo
22 identification from the customer and maintain a log of this
23 information. Controlled substance prescription forms shall be
24 shipped only to the prescriber's address on file and verified with
25 the federal Drug Enforcement Administration or the Medical Board
26 of California.

27 (i) Security printers shall retain ordering and delivery records
28 in a readily retrievable manner for individual prescribers for three
29 years.

30 (j) Security printers shall produce ordering and delivery records
31 upon request by an authorized officer of the law as defined in
32 Section 4017 of the Business and Professions Code.

33 (k) Security printers shall report any theft or loss of controlled
34 substance prescription forms to the Department of Justice via fax
35 or ~~e-mail~~ *email* within 24 hours of the theft or loss.

36 (l) (1) The department shall impose restrictions, sanctions, or
37 penalties, subject to subdivisions (m) and (n), against security
38 printers who are not in compliance with this division pursuant to
39 regulations implemented pursuant to this division and shall revoke
40 its approval of a security printer for a violation of this division or

1 action that would permit a denial pursuant to subdivision (d) of
2 this section.

3 (2) When the department revokes its approval, it shall notify
4 the appropriate licensing boards and remove the security printer
5 from the list of approved security printers.

6 (m) The following violations by security printers shall be
7 punishable pursuant to subdivision (n):

8 (1) Failure to comply with the Security Printer Guidelines
9 established by the Security Printer Program as a condition of
10 approval.

11 (2) Failure to take reasonable precautions to prevent any
12 dishonest act or illegal activity related to the access and control of
13 security prescription forms.

14 (3) Theft or fraudulent use of a prescriber's identity in order to
15 obtain security prescription forms.

16 (n) A security printer approved pursuant to subdivision (b) shall
17 be subject to the following penalties for actions leading to the
18 denial of a security printer application specified in subdivision (d)
19 or for a violation specified in subdivision (m):

20 (1) For a first violation, a fine not to exceed one thousand dollars
21 (\$1,000).

22 (2) For a second or subsequent violation, a fine not to exceed
23 two thousand five hundred dollars (\$2,500) for each violation.

24 (3) For a third or subsequent violation, a filing of an
25 administrative disciplinary action seeking to suspend or revoke
26 security printer approval.

27 ~~(o) Beginning January 1, 2020, the Department of Justice shall~~
28 ~~limit the number of approved printers to three. The Department of~~
29 ~~Justice shall establish policies governing the selection of the three~~
30 ~~approved vendors based on ability to meet demand and prevent~~
31 ~~fraud and theft of prescription pads and the process of revoking~~
32 ~~approval for currently authorized printers in excess of three.~~

33 *(o) In order to facilitate the standardization of all prescription*
34 *forms and the serialization of prescription forms with unique*
35 *identifiers, the Department of Justice may cease issuing new*
36 *approvals of security printers to the extent necessary to achieve*
37 *these purposes. The department may, pursuant to regulation,*
38 *reduce the number of currently approved security printers to no*
39 *fewer than three vendors. The department shall ensure that any*
40 *reduction or limitation of approved security printers does not*

1 *impact the ability of vendors to meet demand for prescription*
2 *forms.*

3 SEC. 3. Section 11162.1 of the Health and Safety Code is
4 amended to read:

5 11162.1. (a) The prescription forms for controlled substances
6 shall be printed with the following features:

7 (1) A latent, repetitive “void” pattern shall be printed across the
8 entire front of the prescription blank; if a prescription is scanned
9 or photocopied, the word “void” shall appear in a pattern across
10 the entire front of the prescription.

11 (2) A watermark shall be printed on the backside of the
12 prescription blank; the watermark shall consist of the words
13 “California Security Prescription.”

14 (3) A chemical void protection that prevents alteration by
15 chemical washing.

16 (4) A feature printed in thermochromic ink.

17 (5) An area of opaque writing so that the writing disappears if
18 the prescription is lightened.

19 (6) A description of the security features included on each
20 prescription form.

21 (7) (A) Six quantity check off boxes shall be printed on the
22 form so that the prescriber may indicate the quantity by checking
23 the applicable box where the following quantities shall appear:

24 1–24

25 25–49

26 50–74

27 75–100

28 101–150

29 151 and over.

30 (B) In conjunction with the quantity boxes, a space shall be
31 provided to designate the units referenced in the quantity boxes
32 when the drug is not in tablet or capsule form.

33 (8) Prescription blanks shall contain a statement printed on the
34 bottom of the prescription blank that the “Prescription is void if
35 the number of drugs prescribed is not noted.”

36 (9) The preprinted name, category of licensure, license number,
37 federal controlled substance registration number, and address of
38 the prescribing practitioner.

39 (10) Check boxes shall be printed on the form so that the
40 prescriber may indicate the number of refills ordered.

1 (11) The date of origin of the prescription.

2 (12) A check box indicating the prescriber's order not to
3 substitute.

4 (13) An identifying number assigned to the approved security
5 printer by the Department of Justice.

6 (14) (A) A check box by the name of each prescriber when a
7 prescription form lists multiple prescribers.

8 (B) Each prescriber who signs the prescription form shall
9 identify himself or herself as the prescriber by checking the box
10 by his or her name.

11 (15) ~~(A) A uniquely serialized number, in a manner prescribed~~
12 ~~by the Department of Justice.~~

13 ~~(B) Within the next working day following delivery, a security~~
14 ~~printer shall submit via Web-based application, as specified by the~~
15 ~~Department of Justice, all of the following information for all~~
16 ~~prescription forms delivered:~~

17 ~~(i) Serial numbers of all prescription forms delivered.~~

18 ~~(ii) All prescriber names and Drug Enforcement Administration~~
19 ~~Controlled Substance Registration Certificate numbers displayed~~
20 ~~on the prescription forms.~~

21 ~~(iii) The delivery shipment recipient names.~~

22 (b) Each batch of controlled substance prescription forms shall
23 have the lot number printed on the form and each form within that
24 batch shall be numbered sequentially beginning with the numeral
25 one.

26 (c) (1) A prescriber designated by a licensed health care facility,
27 a clinic specified in Section 1200, or a clinic specified in
28 subdivision (a) of Section 1206 that has 25 or more physicians or
29 surgeons may order controlled substance prescription forms for
30 use by prescribers when treating patients in that facility without
31 the information required in paragraph (9) of subdivision (a) or
32 paragraph (3) of this subdivision.

33 (2) Forms ordered pursuant to this subdivision shall have the
34 name, category of licensure, license number, and federal controlled
35 substance registration number of the designated prescriber and the
36 name, address, category of licensure, and license number of the
37 licensed health care facility the clinic specified in Section 1200,
38 or the clinic specified in Section 1206 that has 25 or more
39 physicians or surgeons preprinted on the form. Licensed health
40 care facilities or clinics exempt under Section 1206 are not required

1 to preprint the category of licensure and license number of their
2 facility or clinic.

3 (3) Forms ordered pursuant to this section shall not be valid
4 prescriptions without the name, category of licensure, license
5 number, and federal controlled substance registration number of
6 the prescriber on the form.

7 (4) (A) Except as provided in subparagraph (B), the designated
8 prescriber shall maintain a record of the prescribers to whom the
9 controlled substance prescription forms are issued, that shall
10 include the name, category of licensure, license number, federal
11 controlled substance registration number, and quantity of controlled
12 substance prescription forms issued to each prescriber. The record
13 shall be maintained in the health facility for three years.

14 (B) Forms ordered pursuant to this subdivision that are printed
15 by a computerized prescription generation system shall not be
16 subject to subparagraph (A) or paragraph (7) of subdivision (a).
17 Forms printed pursuant to this subdivision that are printed by a
18 computerized prescription generation system may contain the
19 prescriber's name, category of professional licensure, license
20 number, federal controlled substance registration number, and the
21 date of the prescription.

22 ~~(d) This section shall become operative on January 1, 2012.~~
23 ~~Prescription forms not in compliance with this division shall not~~
24 ~~be valid or accepted after July 1, 2012.~~

25 *(d) Within the next working day following delivery, a security*
26 *printer shall submit via Web-based application, as specified by*
27 *the Department of Justice, all of the following information for all*
28 *prescription forms delivered:*

- 29 *(1) Serial numbers of all prescription forms delivered.*
- 30 *(2) All prescriber names and Drug Enforcement Administration*
31 *Controlled Substance Registration Certificate numbers displayed*
32 *on the prescription forms.*
- 33 *(3) The delivery shipment recipient names.*
- 34 *(4) The date of delivery.*

35 SEC. 4. Section 11165 of the Health and Safety Code is
36 amended to read:

37 11165. (a) To assist health care practitioners in their efforts
38 to ensure appropriate prescribing, ordering, administering,
39 furnishing, and dispensing of controlled substances, law
40 enforcement and regulatory agencies in their efforts to control the

1 diversion and resultant abuse of Schedule II, Schedule III, and
2 Schedule IV controlled substances, and for statistical analysis,
3 education, and research, the Department of Justice shall, contingent
4 upon the availability of adequate funds in the CURES Fund,
5 maintain the Controlled Substance Utilization Review and
6 Evaluation System (CURES) for the electronic monitoring of, and
7 Internet access to information regarding, the prescribing and
8 dispensing of Schedule II, Schedule III, and Schedule IV controlled
9 substances by all practitioners authorized to prescribe, order,
10 administer, furnish, or dispense these controlled substances.

11 (b) The Department of Justice may seek and use grant funds to
12 pay the costs incurred by the operation and maintenance of
13 CURES. The department shall annually report to the Legislature
14 and make available to the public the amount and source of funds
15 it receives for support of CURES.

16 (c) (1) The operation of CURES shall comply with all
17 applicable federal and state privacy and security laws and
18 regulations.

19 (2) (A) CURES shall operate under existing provisions of law
20 to safeguard the privacy and confidentiality of patients. Data
21 obtained from CURES shall only be provided to appropriate state,
22 local, and federal public agencies for disciplinary, civil, or criminal
23 purposes and to other agencies or entities, as determined by the
24 Department of Justice, for the purpose of educating practitioners
25 and others in lieu of disciplinary, civil, or criminal actions. Data
26 may be provided to public or private entities, as approved by the
27 Department of Justice, for educational, peer review, statistical, or
28 research purposes, provided that patient information, including
29 any information that may identify the patient, is not compromised.
30 Further, data disclosed to any individual or agency as described
31 in this subdivision shall not be disclosed, sold, or transferred to
32 any third party, unless authorized by, or pursuant to, state and
33 federal privacy and security laws and regulations. The Department
34 of Justice shall establish policies, procedures, and regulations
35 regarding the use, access, evaluation, management, implementation,
36 operation, storage, disclosure, and security of the information
37 within CURES, consistent with this subdivision.

38 (B) Notwithstanding subparagraph (A), a regulatory board whose
39 licensees do not prescribe, order, administer, furnish, or dispense

1 controlled substances shall not be provided data obtained from
2 CURES.

3 (3) In accordance with federal and state privacy laws and
4 regulations, a health care practitioner may provide a patient with
5 a copy of the patient's CURES patient activity report as long as
6 no additional CURES data is provided and keep a copy of the
7 report in the patient's medical record in compliance with
8 subdivision (d) of Section 11165.1.

9 (d) For each prescription for a Schedule II, Schedule III, or
10 Schedule IV controlled substance, as defined in the controlled
11 substances schedules in federal law and regulations, specifically
12 Sections 1308.12, 1308.13, and 1308.14, respectively, of Title 21
13 of the Code of Federal Regulations, the dispensing pharmacy,
14 clinic, or other dispenser shall report the following information to
15 the Department of Justice as soon as reasonably possible, but not
16 more than seven days after the date a controlled substance is
17 dispensed, in a format specified by the Department of Justice:

18 (1) Full name, address, and, if available, telephone number of
19 the ultimate user or research subject, or contact information as
20 determined by the Secretary of the United States Department of
21 Health and Human Services, and the gender, and date of birth of
22 the ultimate user.

23 (2) The prescriber's category of licensure, license number,
24 national provider identifier (NPI) number, if applicable, the federal
25 controlled substance registration number, and the state medical
26 license number of any prescriber using the federal controlled
27 substance registration number of a government-exempt facility.

28 (3) Pharmacy prescription number, license number, NPI number,
29 and federal controlled substance registration number.

30 (4) National Drug Code (NDC) number of the controlled
31 substance dispensed.

32 (5) Quantity of the controlled substance dispensed.

33 (6) International Statistical Classification of Diseases, 9th
34 revision (ICD-9) or 10th revision (ICD-10) Code, if available.

35 (7) Number of refills ordered.

36 (8) Whether the drug was dispensed as a refill of a prescription
37 or as a first-time request.

38 (9) Date of origin of the prescription.

39 (10) Date of dispensing of the prescription.

- 1 (11) The serial number for the corresponding prescription ~~pad,~~
2 *form*, if applicable.
- 3 (e) The Department of Justice may invite stakeholders to assist,
4 advise, and make recommendations on the establishment of rules
5 and regulations necessary to ensure the proper administration and
6 enforcement of the CURES database. All prescriber and dispenser
7 invitees shall be licensed by one of the boards or committees
8 identified in subdivision (d) of Section 208 of the Business and
9 Professions Code, in active practice in California, and a regular
10 user of CURES.
- 11 (f) The Department of Justice shall, prior to upgrading CURES,
12 consult with prescribers licensed by one of the boards or
13 committees identified in subdivision (d) of Section 208 of the
14 Business and Professions Code, one or more of the boards or
15 committees identified in subdivision (d) of Section 208 of the
16 Business and Professions Code, and any other stakeholder
17 identified by the department, for the purpose of identifying
18 desirable capabilities and upgrades to the CURES Prescription
19 Drug Monitoring Program (PDMP).
- 20 (g) The Department of Justice may establish a process to educate
21 authorized subscribers of the CURES PDMP on how to access and
22 use the CURES PDMP.

AMENDED IN SENATE AUGUST 6, 2018

AMENDED IN SENATE JUNE 26, 2018

AMENDED IN SENATE JUNE 12, 2018

AMENDED IN ASSEMBLY APRIL 12, 2018

CALIFORNIA LEGISLATURE—2017–18 REGULAR SESSION

ASSEMBLY BILL

No. 1776

Introduced by Assembly Member Steinorth
(Principal coauthor: Assembly Member Friedman)
(Principal coauthor: Senator Glazer)
(Coauthors: Assembly Members Acosta and Flora)

January 4, 2018

An act to add and repeal Section 1797.10 of the Health and Safety Code, relating to emergency medical services.

LEGISLATIVE COUNSEL'S DIGEST

AB 1776, as amended, Steinorth. Emergency medical transport of police dogs: pilot project.

Existing law, the Emergency Medical Services System and the Prehospital Emergency Medical Care Personnel Act, establishes the Emergency Medical Services Authority, among other things, to establish training standards for Emergency Medical Technicians (EMT) at various levels, including EMT-I, EMT-II, and EMT-P. Existing law requires each county that develops an emergency medical services program to designate a local emergency medical services agency to have primary responsibility for administration of emergency medical services in the county.

This bill would authorize the County of San Bernardino to work with the Inland Counties Emergency Medical Agency to conduct a pilot project commencing January 1, 2019, that would authorize ~~an emergency medical technician to provide emergency~~ transportation for a police dog, as defined, injured in the line of duty to a facility that is capable of providing veterinary medical services to ~~the injured police dog, as specified.~~ *that dog, if certain conditions are met.* The bill would require the Inland Counties Emergency Medical Agency to collect specified data about the pilot project and submit a report to the Legislature describing the data by January 1, 2022. The bill would repeal ~~this authority~~ *these provisions* on January 1, 2022.

This bill would make legislative findings and declarations as to the necessity of a special statute for the County of San Bernardino.

Vote: majority. Appropriation: no. Fiscal committee: no. State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. Section 1797.10 is added to the Health and Safety
- 2 Code, to read:
- 3 1797.10. (a) The County of San Bernardino is authorized to
- 4 work with the Inland Counties Emergency Medical Agency to
- 5 conduct a pilot project, commencing January 1, 2019, that would
- 6 ~~authorize an emergency medical technician to provide~~ emergency
- 7 transportation for a police dog injured in the line of duty to a
- 8 facility that is capable of providing veterinary medical services to
- 9 the injured police dog ~~if there is not a person requiring medical~~
- 10 ~~attention or medical transportation at the time the decision is made~~
- 11 ~~to transport the police dog.~~ *all of the following conditions apply:*
- 12 (1) *A request for transport is made by the injured police dog's*
- 13 *canine handler.*
- 14 (2) *An ambulance is present at the scene of the injury at the*
- 15 *time the request for transport is made.*
- 16 (3) *No person at the scene of the incident requires medical*
- 17 *attention or medical transportation at the time the request for*
- 18 *transport is made.*
- 19 (4) *The owner of the ambulance has a policy that permits the*
- 20 *transport of an injured police dog.*
- 21 (5) *The canine handler accompanies the injured police dog and*
- 22 *remains in full control of the dog during transport.*

1 (6) *The canine handler provides the location of the nearest*
2 *facility that is capable of providing veterinary medical services to*
3 *the injured police dog.*

4 (7) *The canine handler remains responsible for any first aid*
5 *rendered to the injured police dog during transport.*

6 (b) For purposes of this section, “police dog” means a dog being
7 used by a peace officer in the discharge or attempted discharge of
8 his or her duties and includes, but is not limited to, a search and
9 rescue dog or a passive alert dog.

10 (c) (1) The Inland Counties Emergency Medical Agency shall
11 collect data on the number of police dogs transported pursuant to
12 this section, the location where the police dogs were transported
13 to, and the outcome of those transports.

14 (2) The Inland Counties Emergency Medical Agency shall
15 submit a report to the Legislature that includes the data described
16 in paragraph (1) by January 1, 2022. The report shall be submitted
17 in compliance with Section 9795 of the Government Code.

18 (d) This section shall remain in effect only until January 1, 2022,
19 and as of that date is repealed.

20 SEC. 2. The Legislature finds and declares that a special statute
21 is necessary and that a general statute cannot be made applicable
22 within the meaning of Section 16 of Article IV of the California
23 Constitution because of the unique needs of police dogs in the
24 County of San Bernardino.

AMENDED IN SENATE JUNE 20, 2018

AMENDED IN ASSEMBLY MAY 25, 2018

AMENDED IN ASSEMBLY APRIL 2, 2018

CALIFORNIA LEGISLATURE—2017–18 REGULAR SESSION

ASSEMBLY BILL

No. 2138

Introduced by Assembly Members Chiu and Low

February 12, 2018

An act to amend Sections 7.5, 480, 481, 482, 488, ~~490, 492,~~ 493, and 11345.2 ~~of, and to add Section 481.5 to,~~ of the Business and Professions Code, relating to professions and vocations.

LEGISLATIVE COUNSEL'S DIGEST

AB 2138, as amended, Chiu. Licensing boards: denial of application: revocation or suspension of licensure: criminal conviction.

Existing law provides for the licensure and regulation of various professions and vocations by boards within the Department of Consumer Affairs. Existing law authorizes a board to deny, suspend, or revoke a license or take disciplinary action against a licensee on the grounds that the applicant or licensee has, among other things, been convicted of a crime, as specified. Existing law provides that a person shall not be denied a license solely on the basis that the person has been convicted of a felony if he or she has obtained a certificate of rehabilitation or that the person has been convicted of a misdemeanor if he or she has met applicable requirements of rehabilitation developed by the board, as specified. Existing law also prohibits a person from being denied a license solely on the basis of a conviction that has been dismissed, as specified. Existing law requires a board to develop criteria to aid it when considering the denial, suspension, or revocation of a license to

determine whether a crime is substantially related to the qualifications, functions, or duties of the business or profession the board regulates and requires a board to develop criteria to evaluate the rehabilitation of a person when considering the denial, suspension, or revocation of a license.

This bill would revise and recast those provisions to instead authorize a board to, among other things, deny, revoke, or suspend a license on the grounds that the applicant or licensee has been convicted of a crime only if the applicant or licensee is presently incarcerated or if the conviction, as defined, occurred within the preceding ~~5~~ 7 years, except for ~~violent~~ *serious* felonies, and would require the crime to be ~~directly and adversely~~ *substantially* related to the qualifications, functions, or duties of the business or profession. The bill would prohibit a board from denying a person a license based on the conviction of a crime, or on the basis of acts underlying a conviction for a crime, if the conviction has been dismissed or expunged, if the person has ~~made a showing~~ *provided evidence* of rehabilitation, if the person has been granted clemency or a pardon, or if an arrest resulted in a disposition other than a conviction. ~~The bill would provide that these provisions relating to denial, revocation, or suspension of a license would supersede contradictory provisions in specified existing law.~~

The bill would require the board to develop criteria for determining whether a crime is ~~directly and adversely~~ *substantially* related to the qualifications, functions, or duties of the business or profession. The bill would require a board to find that a person has made a showing of rehabilitation if certain conditions are met. The bill would require a board to follow certain procedures when requesting or acting on an applicant's or licensee's criminal history information. The bill would also require a board to annually submit a report to the Legislature and post the report on its Internet Web site containing specified deidentified information regarding actions taken by a board based on an applicant or licensee's criminal history information.

Existing law authorizes a board to deny a license on the grounds that an applicant knowingly made a false statement of fact that is required to be revealed in the application for licensure.

This bill would prohibit a board from denying a license based solely on an applicant's failure to disclose a fact that would not have been cause for denial of the license had the fact been disclosed.

~~Existing law authorizes specified agencies to take disciplinary action against a licensee or deny a license for professional misconduct if the~~

~~licensee has successfully completed certain diversion programs or alcohol and drug problem assessment programs.~~

~~This bill would instead prohibit a board from taking disciplinary action against a licensee or denying a license for professional misconduct if the licensee has successfully completed certain diversion programs or alcohol and drug problem assessment programs or deferred entry of judgment.~~

~~Existing law authorizes a board board, after a specified hearing requested by an applicant for licensure to take various actions, including imposing probationary conditions on the licensee: actions in relation to denying or granting the applicant the license.~~

~~This bill would additionally authorize a board to grant the license and immediately issue a public reproof. The bill would limit probationary terms or restrictions placed on a license by a board to 2 years or less and would authorize additional conditions to be imposed only if the board determines that there is clear and convincing evidence that additional conditions are necessary to address a risk shown by clear and convincing evidence. The bill would require a board to develop criteria to aid it in considering the imposition of probationary conditions and to determine what conditions may be imposed. The bill would authorize a licensee or registrant whose license or registration has been placed on probation to petition the board for a change to that probation one year from the effective date of the board's decision, would require the board to issue a decision on the petition within 90 days, and would deem the petition granted if the board does not file a decision denying the petition within 90 days: revise and recast those provisions to eliminate some of the more specific options that the board may take in these circumstances.~~

~~This bill would also make necessary conforming changes.~~

~~Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.~~

The people of the State of California do enact as follows:

- 1 SECTION 1. Section 7.5 of the Business and Professions Code
- 2 is amended to read:
- 3 7.5. (a) A conviction within the meaning of this code means
- 4 a judgment following a plea or verdict of guilty or a plea of nolo
- 5 contendere or finding of guilt. Any action which a board is
- 6 permitted to take following the establishment of a conviction may

1 be taken when the time for appeal has elapsed, or the judgment of
 2 conviction has been affirmed on appeal or when an order granting
 3 probation is made suspending the imposition of sentence. However,
 4 a board may not deny a license to an applicant who is otherwise
 5 qualified pursuant to subdivision (b) or (c) of Section 480.

6 (b) (1) Nothing in this section shall apply to the licensure of
 7 persons pursuant to Chapter 4 (commencing with Section 6000)
 8 of Division 3.

9 (2) *The changes made to this section by the act adding this*
 10 *paragraph do not in any way modify or otherwise affect the existing*
 11 *authority of the following entities in regard to licensure:*

12 (A) *The State Athletic Commission.*

13 (B) *The Bureau for Private Postsecondary Education.*

14 (c) Except as provided in subdivision (b), this section controls
 15 over and supersedes the definition of conviction contained within
 16 individual practice acts under this code.

17 SEC. 2. Section 480 of the Business and Professions Code is
 18 amended to read:

19 480. (a) ~~(1)~~ Notwithstanding any other provision of this code,
 20 a board may deny a license regulated by this code on the grounds
 21 that the applicant has been convicted of a crime or has been subject
 22 to formal discipline only if either of the following conditions are
 23 met:

24 ~~(A)~~

25 (1) The applicant has been convicted of a crime for which the
 26 applicant is presently incarcerated or for which the conviction
 27 occurred within the preceding ~~five~~ *seven* years. However, the
 28 preceding ~~five-year~~ *seven-year* limitation shall not apply to a
 29 conviction for a ~~violent~~ *serious* felony, as defined in ~~Section 667.5~~
 30 ~~of~~ the Penal Code.

31 The board may deny a license pursuant to this subparagraph only
 32 if the crime is ~~directly and adversely~~ *substantially* related to the
 33 qualifications, functions, or duties of the business or profession
 34 for which application is made.

35 ~~(B)~~

36 (2) The applicant has been subjected to formal discipline by a
 37 licensing board within the preceding five years based on
 38 professional misconduct that would have been cause for discipline
 39 before the board for which the present application is made and that
 40 is ~~directly and adversely~~ *substantially* related to the qualifications,

1 functions, or duties of the business or profession for which the
2 present application is made. However, prior disciplinary action by
3 a licensing board within the preceding ~~five~~ *seven* years shall not
4 be the basis for denial of a license if the basis for that disciplinary
5 action was a conviction that has been dismissed pursuant to Section
6 1203.4, 1203.4a, or 1203.41 of the Penal Code or a comparable
7 dismissal or expungement.

8 ~~(2) Denial of a license includes denial of an unrestricted license
9 by issuance of a restricted or probationary license.~~

10 (b) Notwithstanding any other provision of this code, a person
11 shall not be denied a license on the basis that he or she has been
12 convicted of a crime, or on the basis of acts underlying a conviction
13 for a crime, if he or she has obtained a certificate of rehabilitation
14 under Chapter 3.5 (commencing with Section 4852.01) of Title 6
15 of Part 3 of the Penal Code, has been granted clemency or a pardon
16 by a state or federal executive, or ~~has made a showing~~ *provided*
17 *evidence* of rehabilitation pursuant to Section 482.

18 (c) Notwithstanding any other provision of this code, a person
19 shall not be denied a license on the basis of any conviction, or on
20 the basis of the acts underlying the conviction, that has been
21 dismissed pursuant to Section 1203.4, 1203.4a, or 1203.41 of the
22 Penal Code, or a comparable dismissal or expungement. An
23 applicant who has a conviction that has been dismissed pursuant
24 to Section 1203.4, 1203.4a, 1203.41, or 1203.42 of the Penal Code
25 shall provide proof of the dismissal if it is not reflected on the
26 report furnished by the Department of Justice.

27 (d) Notwithstanding any other provision of this code, a board
28 shall not deny a license on the basis of an arrest that resulted in a
29 disposition other than a conviction, including an arrest that resulted
30 in an infraction, citation, or a juvenile adjudication.

31 (e) A board may deny a license regulated by this code on the
32 ground that the applicant knowingly made a false statement of fact
33 that is required to be revealed in the application for the license. A
34 board shall not deny a license based solely on an applicant's failure
35 to disclose a fact that would not have been cause for denial of the
36 license had it been disclosed.

37 (f) A board shall follow the following procedures in requesting
38 or acting on an applicant's criminal history information:

- 1 (1) A board shall not require an applicant for licensure to
2 disclose any information or documentation regarding the
3 applicant's criminal history.
- 4 (2) If a board decides to deny an application based solely or in
5 part on the applicant's conviction history, the board shall notify
6 the applicant in writing of all of the following:
- 7 (A) The denial or disqualification of licensure.
- 8 (B) Any existing procedure the board has for the applicant to
9 challenge the decision or to request reconsideration.
- 10 (C) That the applicant has the right to appeal the board's
11 decision.
- 12 (D) The processes for the applicant to request a copy of his or
13 her complete conviction history and question the accuracy or
14 completeness of the record pursuant to Sections 11122 to 11127
15 of the Penal Code.
- 16 (g) (1) For a minimum of three years, each board under this
17 code shall retain application forms and other documents submitted
18 by an applicant, any notice provided to an applicant, all other
19 communications received from and provided to an applicant, and
20 criminal history reports of an applicant.
- 21 (2) Each board under this code shall retain the number of
22 applications received for each license and the number of
23 applications requiring inquiries regarding criminal history. In
24 addition, each licensing authority shall retain all of the following
25 information:
- 26 (A) The number of applicants with a criminal record who
27 received notice of denial or disqualification of licensure.
- 28 (B) The number of applicants with a criminal record who
29 provided evidence of mitigation or rehabilitation.
- 30 (C) The number of applicants with a criminal record who
31 appealed any denial or disqualification of licensure.
- 32 (D) The final disposition and demographic information,
33 including, but not limited to, voluntarily provided information on
34 race or gender, of any applicant described in subparagraph (A),
35 (B), or (C).
- 36 (3) (A) Each board under this code shall annually make
37 available to the public through the board's Internet Web site and
38 through a report submitted to the appropriate policy committees
39 of the Legislature deidentified information collected pursuant to

1 this subdivision. Each board shall ensure confidentiality of the
2 individual applicants.

3 (B) A report pursuant to subparagraph (A) shall be submitted
4 in compliance with Section 9795 of the Government Code.

5 (h) "Conviction" as used in this section shall have the same
6 meaning as defined in Section 7.5.

7 ~~(i) This section supersedes any contradictory provision in a
8 licensing act under this code or initiative act referred to in Division
9 2 (commencing with Section 500) that authorizes license denial
10 based on a criminal conviction, arrest, or the acts underlying an
11 arrest or conviction.~~

12 *(i) The changes made to this section by the act adding this
13 subdivision do not in any way modify or otherwise affect the
14 existing authority of the following entities in regard to licensure:*

15 *(1) The State Athletic Commission.*

16 *(2) The Bureau for Private Postsecondary Education.*

17 SEC. 3. Section 481 of the Business and Professions Code is
18 amended to read:

19 481. (a) Each board under this code shall develop criteria to
20 aid it, when considering the denial, suspension, or revocation of
21 a license, to determine whether a crime is ~~directly and adversely~~
22 *substantially* related to the qualifications, functions, or duties of
23 the business or profession it regulates.

24 (b) Criteria for determining whether a crime is ~~directly and~~
25 ~~adversely~~ *substantially* related to the qualifications, functions, or
26 duties of the business or profession a board regulates shall include
27 all of the following:

28 (1) The nature and gravity of the offense.

29 (2) The number of years elapsed since the date of the offense.

30 (3) The nature and duties of the profession in which the applicant
31 seeks licensure or in which the licensee is licensed.

32 (c) A board shall not deny a license based in whole or in part
33 on a conviction without considering evidence of rehabilitation.

34 (d) Each board shall post on its Internet Web site a summary of
35 the criteria used to consider whether a crime is considered to be
36 ~~directly and adversely~~ *substantially* related to the qualifications,
37 functions, or duties of the business or profession it regulates
38 consistent with this section.

1 (e) *The changes made to this section by the act adding this*
 2 *subdivision do not in any way modify or otherwise affect the*
 3 *existing authority of the following entities in regard to licensure:*

- 4 (1) *The State Athletic Commission.*
- 5 (2) *The Bureau for Private Postsecondary Education.*

6 ~~SEC. 4.~~ ~~Section 481.5 is added to the Business and Professions~~
 7 ~~Code, to read:~~

8 ~~481.5. (a) Probationary terms or restrictions placed on a license~~
 9 ~~by a board shall be limited to two years or less. Any additional~~
 10 ~~conditions may be imposed only if the board determines that there~~
 11 ~~is clear and convincing evidence that additional conditions are~~
 12 ~~necessary to address a risk shown by clear and convincing~~
 13 ~~evidence.~~

14 ~~(b) Each board under this code shall develop criteria to aid it~~
 15 ~~when considering the imposition of probationary conditions or~~
 16 ~~restrictions to determine what conditions may be imposed to~~
 17 ~~address a risk shown by clear and convincing evidence.~~

18 ~~(c) (1) A licensee or registrant whose license or registration~~
 19 ~~has been placed on probation may petition the board for a change~~
 20 ~~to the probation, including modification or termination of~~
 21 ~~probation, one year from the effective date of the decision. The~~
 22 ~~board shall issue its decision on the petition within 90 days of~~
 23 ~~submission of the petition. The petition shall be deemed granted~~
 24 ~~by operation of law if the board does not file a decision denying~~
 25 ~~the petition within 90 days of submission of the petition.~~

26 ~~(2) The one-year time period to petition for modification or~~
 27 ~~termination of penalty shall control over longer time periods under~~
 28 ~~a licensing act under this code or initiative act referred to in~~
 29 ~~Division 2 (commencing with Section 500).~~

30 ~~SEC. 5.~~

31 ~~SEC. 4.~~ Section 482 of the Business and Professions Code is
 32 amended to read:

33 482. (a) Each board under this code shall develop criteria to
 34 evaluate the rehabilitation of a person when doing either of the
 35 following:

- 36 (1) Considering the denial of a license by the board under
 37 Section 480.
- 38 (2) Considering suspension or revocation of a license under
 39 Section 490.

1 (b) Each board shall ~~find~~ *consider* that an applicant or licensee
2 has made a showing of rehabilitation if ~~any~~ *either* of the following
3 are met:

4 (1) The applicant or licensee has completed the criminal
5 sentence at issue without a violation of parole or probation.

6 ~~(2) (A) The applicant or licensee documents that he or she has~~
7 ~~worked in a related field continuously for at least one year prior~~
8 ~~to licensure or successfully completed a course of training in a~~
9 ~~related field, unless the board finds a public record of an official~~
10 ~~finding that the applicant committed professional misconduct in~~
11 ~~the course of that work.~~

12 ~~(B) Work in a related field may include, but is not limited to,~~
13 ~~work performed without compensation and work performed while~~
14 ~~incarcerated.~~

15 ~~(C) "Related field," for purposes of this paragraph, means a~~
16 ~~field of employment whose duties are substantially similar to the~~
17 ~~field regulated by the board.~~

18 ~~(3)~~

19 (2) The applicant or licensee has satisfied criteria for
20 rehabilitation developed by the board.

21 (c) *The changes made to this section by the act adding this*
22 *subdivision do not in any way modify or otherwise affect the*
23 *existing authority of the following entities in regard to licensure:*

24 (1) *The State Athletic Commission.*

25 (2) *The Bureau for Private Postsecondary Education.*

26 ~~SEC. 6.~~

27 *SEC. 5.* Section 488 of the Business and Professions Code is
28 amended to read:

29 488. Except as otherwise provided by law, following a hearing
30 requested by an applicant pursuant to subdivision (b) of Section
31 485, the board may take any of the following actions:

32 (a) Grant the license effective upon completion of all licensing
33 requirements by the applicant.

34 ~~(b) Grant the license effective upon completion of all licensing~~
35 ~~requirements by the applicant, grant the license and immediately~~
36 ~~issue a public reproof pursuant to Section 495, immediately revoke~~
37 ~~the license, stay the revocation, and impose probationary conditions~~
38 ~~on the license, which may include suspension.~~

39 (e)

40 (b) Deny the license.

1 ~~(d)~~
2 (c) Take other action in relation to denying or granting the
3 license as the board in its discretion may deem proper.

4 (d) *The changes made to this section by the act adding this*
5 *subdivision do not in any way modify or otherwise affect the*
6 *existing authority of the following entities in regard to licensure:*

- 7 (1) *The State Athletic Commission.*
- 8 (2) *The Bureau for Private Postsecondary Education.*

9 ~~SEC. 7. Section 490 of the Business and Professions Code is~~
10 ~~amended to read:~~

11 ~~490. (a) (1) In addition to any other action that a board is~~
12 ~~permitted to take against a licensee, a board may suspend or revoke~~
13 ~~a license on the ground that the licensee has been convicted of a~~
14 ~~crime for which the applicant is presently incarcerated or for which~~
15 ~~the conviction occurred within the preceding five years. However,~~
16 ~~the preceding five year limitation shall not apply to a conviction~~
17 ~~for a violent felony, as defined in Section 667.5 of the Penal Code.~~

18 ~~(2) The board may suspend or revoke a license pursuant to this~~
19 ~~subdivision only if the crime is directly and adversely related to~~
20 ~~the qualifications, functions, or duties of the business or profession~~
21 ~~for which application is made.~~

22 ~~(b) Notwithstanding any other provision of law, a board may~~
23 ~~exercise any authority to discipline a licensee for conviction of a~~
24 ~~crime that is independent of the authority granted under subdivision~~
25 ~~(a) only if both of the following are met:~~

26 ~~(1) The crime is directly and adversely related to the~~
27 ~~qualifications, functions, or duties of the business or profession~~
28 ~~for which the licensee's license was issued.~~

29 ~~(2) The licensee was convicted of the crime within the preceding~~
30 ~~five years or is presently incarcerated for the crime. However, the~~
31 ~~preceding five year limitation shall not apply to a conviction for~~
32 ~~a violent felony, as defined in Section 667.5 of the Penal Code.~~

33 ~~(c) Notwithstanding any other provision of this code, a board~~
34 ~~shall not suspend or revoke a license on the basis of a conviction,~~
35 ~~or of the acts underlying a conviction, where that conviction has~~
36 ~~been dismissed pursuant to Section 1203.4, 1203.4a, 1203.41, or~~
37 ~~1203.42 of the Penal Code or a comparable dismissal or~~
38 ~~expungement.~~

39 ~~(d) Notwithstanding any other provision of this code, a board~~
40 ~~shall not suspend or revoke a license on the basis of an arrest that~~

1 resulted in a disposition other than a conviction, including an arrest
2 that resulted in an infraction, citation, or juvenile adjudication.

3 (e) ~~The board shall use the following procedures in requesting
4 or acting on a licensee's criminal history information:~~

5 (1) ~~A board shall not require a licensee to disclose any
6 information or documentation regarding the licensee's criminal
7 history.~~

8 (2) ~~If a board chooses to file an accusation against a licensee
9 based solely or in part on the licensee's conviction history, the
10 board shall notify the licensee in writing of the processes for the
11 licensee to request a copy of the licensee's complete conviction
12 history and question the accuracy or completeness of his or her
13 criminal record pursuant to Sections 11122 to 11127, inclusive,
14 of the Penal Code.~~

15 (f) (1) ~~For a minimum of three years, each board under this
16 code shall retain all documents submitted by a licensee, notices
17 provided to a licensee, all other communications received from or
18 provided to a licensee, and criminal history reports of a licensee.~~

19 (2) ~~Each board under this code shall retain all of the following
20 information:~~

21 (A) ~~The number of licensees with a criminal record who received
22 notice of potential revocation or suspension of their license or who
23 had their license suspended or revoked.~~

24 (B) ~~The number of licensees with a criminal record who
25 provided evidence of mitigation or rehabilitation.~~

26 (C) ~~The number of licensees with a criminal record who
27 appealed any suspension or revocation of a license.~~

28 (D) ~~The final disposition and demographic information,
29 including, but not limited to, voluntarily provided information on
30 race or gender, of any applicant described in subparagraph (A),
31 (B), or (C).~~

32 (3) (A) ~~Each board under this code shall annually make
33 available to the public through the board's Internet Web site and
34 through a report submitted to the appropriate policy committees
35 of the Legislature deidentified information collected pursuant to
36 this subdivision. Each board shall ensure the confidentiality of the
37 individual licensees.~~

38 (B) ~~A report pursuant to subparagraph (A) shall be submitted
39 in compliance with Section 9795 of the Government Code.~~

1 ~~(g) (1) This section supersedes any contradictory provision in~~
2 ~~a licensing act under this code or initiative act referred to in~~
3 ~~Division 2 (commencing with Section 500) that authorizes action~~
4 ~~based on a criminal conviction, arrest, or the acts underlying an~~
5 ~~arrest or conviction.~~

6 ~~(2) This section shall not prohibit any agency from taking~~
7 ~~disciplinary action against a licensee for professional misconduct~~
8 ~~in the course and scope of the licensee’s profession that is based~~
9 ~~on evidence that is independent of an arrest.~~

10 ~~SEC. 8. Section 492 of the Business and Professions Code is~~
11 ~~amended to read:~~

12 ~~492. (a) Notwithstanding any other provision of law, successful~~
13 ~~completion of any diversion program under the Penal Code,~~
14 ~~successful completion by a licensee or applicant of any~~
15 ~~nonstatutory diversion program, deferred entry of judgment, or~~
16 ~~successful completion of an alcohol and drug problem assessment~~
17 ~~program under Article 5 (commencing with Section 23249.50) of~~
18 ~~Chapter 12 of Division 11 of the Vehicle Code, shall prohibit any~~
19 ~~board from taking disciplinary action against a licensee or from~~
20 ~~denying a license for professional misconduct.~~

21 ~~(b) This section shall not prohibit any agency established under~~
22 ~~Division 2 (commencing with Section 500) of this code, or any~~
23 ~~initiative act referred to in that division, from taking disciplinary~~
24 ~~action against a licensee for professional misconduct in the course~~
25 ~~and scope of the profession, which is based on evidence that is~~
26 ~~independent of an arrest.~~

27 ~~SEC. 9.~~

28 ~~SEC. 6. Section 493 of the Business and Professions Code is~~
29 ~~amended to read:~~

30 ~~493. (a) Notwithstanding any other provision of law, in a~~
31 ~~proceeding conducted by a board within the department pursuant~~
32 ~~to law to deny an application for a license or to suspend or revoke~~
33 ~~a license or otherwise take disciplinary action against a person~~
34 ~~who holds a license, upon the ground that the applicant or the~~
35 ~~licensee has been convicted of a crime directly and adversely~~
36 ~~substantially related to the qualifications, functions, and duties of~~
37 ~~the licensee in question, the record of conviction of the crime shall~~
38 ~~be conclusive evidence of the fact that the conviction occurred,~~
39 ~~but only of that fact.~~

1 (b) (1) Criteria for determining whether a crime is ~~directly and~~
2 ~~adversely~~ *substantially* related to the qualifications, functions, or
3 duties of the business or profession the board regulates shall include
4 all of the following:

5 (A) The nature and gravity of the offense.

6 (B) The number of years elapsed since the date of the offense.

7 (C) The nature and duties of the profession.

8 (2) A board shall not categorically bar an applicant based solely
9 on the type of conviction without considering evidence of
10 rehabilitation.

11 (c) As used in this section, “license” includes “certificate,”
12 “permit,” “authority,” and “registration.”

13 (d) *The changes made to this section by the act adding this*
14 *subdivision do not in any way modify or otherwise affect the*
15 *existing authority of the following entities in regard to licensure:*

16 (1) *The State Athletic Commission.*

17 (2) *The Bureau for Private Postsecondary Education.*

18 ~~SEC. 10.~~

19 *SEC. 7.* Section 11345.2 of the Business and Professions Code
20 is amended to read:

21 11345.2. (a) An individual shall not act as a controlling person
22 for a registrant if any of the following apply:

23 (1) The individual has entered a plea of guilty or no contest to,
24 or been convicted of, a felony. If the individual’s felony conviction
25 has been dismissed pursuant to Section 1203.4, 1203.4a, or 1203.41
26 of the Penal Code, the bureau may allow the individual to act as
27 a controlling person.

28 (2) The individual has had a license or certificate to act as an
29 appraiser or to engage in activities related to the transfer of real
30 property refused, denied, canceled, or revoked in this state or any
31 other state.

32 (b) Any individual who acts as a controlling person of an
33 appraisal management company and who enters a plea of guilty
34 or no contest to, or is convicted of, a felony, or who has a license
35 or certificate as an appraiser refused, denied, canceled, or revoked
36 in any other state shall report that fact or cause that fact to be
37 reported to the office, in writing, within 10 days of the date he or
38 she has knowledge of that fact.

O

AMENDED IN SENATE JUNE 27, 2018

AMENDED IN ASSEMBLY APRIL 24, 2018

AMENDED IN ASSEMBLY MARCH 23, 2018

CALIFORNIA LEGISLATURE—2017–18 REGULAR SESSION

ASSEMBLY BILL

No. 2215

Introduced by Assembly Member Kalra
(Coauthors: Assembly Members Acosta and Quirk-Silva)

February 12, 2018

An act to amend Sections 26000 and 26001 of, and to add Sections 4884 and 26001.5 to, the Business and Professions Code, relating to cannabis.

LEGISLATIVE COUNSEL'S DIGEST

AB 2215, as amended, Kalra. Cannabis: veterinarians: animals.

The Control, Regulate and Tax Adult Use of Marijuana Act of 2016 (AUMA), an initiative measure approved as Proposition 64 at the November 8, 2016, statewide general election, authorizes a person who obtains a state license under AUMA to engage in commercial adult-use cannabis activity pursuant to that license and applicable local ordinances. The Medicinal and Adult-Use Cannabis Regulation and Safety Act (MAUCRSA), among other things, consolidates the licensure and regulation of commercial medicinal and adult-use cannabis activities and states that it is the intent of MAUCRSA to control and regulate the cultivation, distribution, transport, storage, manufacturing, processing, and sale of both medicinal cannabis and medicinal cannabis products for patients with a valid physician recommendation and adult-use cannabis and adult-use cannabis products for adults 21 years of age and over. MAUCRSA defines “cannabis products” for these purposes.

This bill would state that it is additionally the intent of MAUCRSA to control and regulate the cultivation, distribution, transport, storage, manufacturing, processing, and sale of cannabis and cannabis products for medicinal use on an animal owned by an adult 21 years of age and over and would define “cannabis products” to include products intended for medicinal use on an animal. The bill would authorize an adult 21 years of age and over to use, for medicinal purposes, cannabis and cannabis products on an animal owned by that adult and would limit the sale of the products to those adults to a licensee who has been issued a retailer license under MAUCRSA. The bill would also make other conforming changes.

The California Uniform Controlled Substances Act classifies controlled substances into 5 designated schedules, and places cannabis and cannabis products under Schedule I. The act prohibits prescribing, administering, dispensing, or furnishing a controlled substance to or for any person or animal, unless otherwise specified.

The Veterinary Medicine Practice Act provides for the licensure and regulation of veterinarians and the practice of veterinary medicine by the Veterinary Medical Board, which is within the Department of Consumer Affairs. The act authorizes the board to revoke or suspend the license of a person to practice veterinary medicine, or to assess a fine, for specified causes, including violating a statute related to controlled substances. The act also makes a violation of its provisions a misdemeanor.

This bill would prohibit a licensed veterinarian from dispensing or administering cannabis or cannabis products to an animal patient. Because a violation of the Veterinary Medicine Practice Act’s provisions is a crime, the bill would expand the scope of that crime, thereby imposing a state-mandated local program.

The bill would also prohibit the Veterinary Medical Board from disciplining, or denying, revoking, or suspending the license of, a licensed veterinarian solely for discussing the use of cannabis on an animal for medicinal purposes. The bill would require the board to develop guidelines for these discussions on or before ~~July 1, 2019~~, *January 1, 2020*, and would require the board to post the guidelines on its Internet Web site.

AUMA authorizes legislative amendment of its provisions with a $\frac{2}{3}$ vote of both houses, without submission to the voters, to further its purposes and intent.

This bill would declare that its provisions further the purposes and intent of AUMA.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: $\frac{2}{3}$. Appropriation: no. Fiscal committee: yes.
State-mandated local program: yes.

The people of the State of California do enact as follows:

1 SECTION 1. Section 4884 is added to the Business and
2 Professions Code, to read:

3 4884. (a) A licensee shall not dispense or administer cannabis
4 or cannabis products to an animal patient.

5 (b) Notwithstanding any other law, a veterinarian licensed under
6 this chapter shall not be disciplined by the board or have his or her
7 license denied, revoked, or suspended solely for discussing the
8 use of cannabis on an animal for medicinal purposes.

9 (c) On or before ~~July 1, 2019~~, *January 1, 2020*, the board shall
10 adopt guidelines for veterinarians to follow when discussing
11 cannabis within the ~~veterinarian-client~~ *veterinarian-client-patient*
12 relationship. These guidelines shall be posted on the board's
13 Internet Web site.

14 SEC. 2. Section 26000 of the Business and Professions Code
15 is amended to read:

16 26000. (a) This division shall be known, and may be cited, as
17 the Medicinal and Adult Use Cannabis Regulation and Safety Act.

18 (b) The purpose and intent of this division is to establish a
19 comprehensive system to control and regulate the cultivation,
20 distribution, transport, storage, manufacturing, processing, and
21 sale of all of the following:

22 (1) Medicinal cannabis and medicinal cannabis products for
23 patients with valid physician's recommendations.

24 (2) Adult-use cannabis and adult-use cannabis products for
25 adults 21 years of age and over.

26 (3) Cannabis and cannabis products for medicinal use on an
27 animal owned by an adult 21 years of age and over.

1 (c) In the furtherance of subdivision (b), this division sets forth
2 the power and duties of the state agencies responsible for
3 controlling and regulating the commercial medicinal and adult-use
4 cannabis industry.

5 (d) The Legislature may, by majority vote, enact laws to
6 implement this division, provided those laws are consistent with
7 the purposes and intent of the Control, Regulate and Tax Adult
8 Use of Marijuana Act.

9 SEC. 3. Section 26001 of the Business and Professions Code
10 is amended to read:

11 26001. For purposes of this division, the following definitions
12 shall apply:

13 (a) "A-license" means a state license issued under this division
14 for cannabis or cannabis products that are intended for adults who
15 are 21 years of age and older and who do not possess a physician's
16 recommendation.

17 (b) "A-licensee" means any person holding a license under this
18 division for cannabis or cannabis products that are intended for
19 adults who are 21 years of age and older and who do not possess
20 a physician's recommendation.

21 (c) "Applicant" means an owner applying for a state license
22 pursuant to this division.

23 (d) "Batch" means a specific quantity of homogeneous cannabis
24 or cannabis product that is one of the following types:

25 (1) Harvest batch. "Harvest batch" means a specifically
26 identified quantity of dried flower or trim, leaves, and other
27 cannabis plant matter that is uniform in strain, harvested at the
28 same time, and, if applicable, cultivated using the same pesticides
29 and other agricultural chemicals, and harvested at the same time.

30 (2) Manufactured cannabis batch. "Manufactured cannabis
31 batch" means either of the following:

32 (A) An amount of cannabis concentrate or extract that is
33 produced in one production cycle using the same extraction
34 methods and standard operating procedures.

35 (B) An amount of a type of manufactured cannabis produced
36 in one production cycle using the same formulation and standard
37 operating procedures.

38 (e) "Bureau" means the Bureau of Cannabis Control within the
39 Department of Consumer Affairs, formerly named the Bureau of

1 Marijuana Control, the Bureau of Medical Cannabis Regulation,
2 and the Bureau of Medical Marijuana Regulation.

3 (f) “Cannabis” means all parts of the plant *Cannabis sativa*
4 *Linnaeus*, *Cannabis indica*, or *Cannabis ruderalis*, whether growing
5 or not; the seeds thereof; the resin, whether crude or purified,
6 extracted from any part of the plant; and every compound,
7 manufacture, salt, derivative, mixture, or preparation of the plant,
8 its seeds, or resin. “Cannabis” also means the separated resin,
9 whether crude or purified, obtained from cannabis. “Cannabis”
10 does not include the mature stalks of the plant, fiber produced from
11 the stalks, oil or cake made from the seeds of the plant, any other
12 compound, manufacture, salt, derivative, mixture, or preparation
13 of the mature stalks (except the resin extracted therefrom), fiber,
14 oil, or cake, or the sterilized seed of the plant which is incapable
15 of germination. For the purpose of this division, “cannabis” does
16 not mean “industrial hemp” as defined by Section 11018.5 of the
17 Health and Safety Code.

18 (g) “Cannabis accessories” has the same meaning as in Section
19 11018.2 of the Health and Safety Code.

20 (h) “Cannabis concentrate” means cannabis that has undergone
21 a process to concentrate one or more active cannabinoids, thereby
22 increasing the product’s potency. Resin from granular trichomes
23 from a cannabis plant is a concentrate for purposes of this division.
24 A cannabis concentrate is not considered food, as defined by
25 Section 109935 of the Health and Safety Code, or a drug, as defined
26 by Section 109925 of the Health and Safety Code.

27 (i) “Cannabis products” has the same meaning as in Section
28 11018.1 of the Health and Safety Code. “Cannabis products”
29 includes cannabis products, as defined in Section 11018.1 of the
30 Health and Safety Code, intended for medicinal use on an animal.

31 (j) “Child resistant” means designed or constructed to be
32 significantly difficult for children under five years of age to open,
33 and not difficult for normal adults to use properly.

34 (k) “Commercial cannabis activity” includes the cultivation,
35 possession, manufacture, distribution, processing, storing,
36 laboratory testing, packaging, labeling, transportation, delivery or
37 sale of cannabis and cannabis products as provided for in this
38 division.

- 1 (l) “Cultivation” means any activity involving the planting,
2 growing, harvesting, drying, curing, grading, or trimming of
3 cannabis.
- 4 (m) “Cultivation site” means a location where cannabis is
5 planted, grown, harvested, dried, cured, graded, or trimmed, or a
6 location where any combination of those activities occurs.
- 7 (n) “Customer” means a natural person 21 years of age or older
8 or a natural person 18 years of age or older who possesses a
9 physician’s recommendation, or a primary caregiver.
- 10 (o) “Day care center” has the same meaning as in Section
11 1596.76 of the Health and Safety Code.
- 12 (p) “Delivery” means the commercial transfer of cannabis or
13 cannabis products to a customer. “Delivery” also includes the use
14 by a retailer of any technology platform.
- 15 (q) “Director” means the Director of Consumer Affairs.
- 16 (r) “Distribution” means the procurement, sale, and transport
17 of cannabis and cannabis products between licensees.
- 18 (s) “Dried flower” means all dead cannabis that has been
19 harvested, dried, cured, or otherwise processed, excluding leaves
20 and stems.
- 21 (t) “Edible cannabis product” means cannabis product that is
22 intended to be used, in whole or in part, for human or animal
23 consumption, including, but not limited to, chewing gum, but
24 excluding products set forth in Division 15 (commencing with
25 Section 32501) of the Food and Agricultural Code. An edible
26 cannabis product is not considered food, as defined by Section
27 109935 of the Health and Safety Code, or a drug, as defined by
28 Section 109925 of the Health and Safety Code.
- 29 (u) “Fund” means the Cannabis Control Fund established
30 pursuant to Section 26210.
- 31 (v) “Kind” means applicable type or designation regarding a
32 particular cannabis variant or cannabis product type, including,
33 but not limited to, strain name or other grower trademark, or
34 growing area designation.
- 35 (w) “Labeling” means any label or other written, printed, or
36 graphic matter upon a cannabis product, upon its container or
37 wrapper, or that accompanies any cannabis product.
- 38 (x) “Labor peace agreement” means an agreement between a
39 licensee and any bona fide labor organization that, at a minimum,
40 protects the state’s proprietary interests by prohibiting labor

1 organizations and members from engaging in picketing, work
2 stoppages, boycotts, and any other economic interference with the
3 applicant’s business. This agreement means that the applicant has
4 agreed not to disrupt efforts by the bona fide labor organization
5 to communicate with, and attempt to organize and represent, the
6 applicant’s employees. The agreement shall provide a bona fide
7 labor organization access at reasonable times to areas in which the
8 applicant’s employees work, for the purpose of meeting with
9 employees to discuss their right to representation, employment
10 rights under state law, and terms and conditions of employment.
11 This type of agreement shall not mandate a particular method of
12 election or certification of the bona fide labor organization.

13 (y) “License” means a state license issued under this division,
14 and includes both an A-license and an M-license, as well as a
15 testing laboratory license.

16 (z) “Licensee” means any person holding a license under this
17 division, regardless of whether the license held is an A-license or
18 an M-license, and includes the holder of a testing laboratory
19 license.

20 (aa) “Licensing authority” means the state agency responsible
21 for the issuance, renewal, or reinstatement of the license, or the
22 state agency authorized to take disciplinary action against the
23 licensee.

24 (ab) “Live plants” means living cannabis flowers and plants,
25 including seeds, immature plants, and vegetative stage plants.

26 (ac) “Local jurisdiction” means a city, county, or city and
27 county.

28 (ad) “Lot” means a batch or a specifically identified portion of
29 a batch.

30 (ae) “M-license” means a state license issued under this division
31 for commercial cannabis activity involving medicinal cannabis.

32 (af) “M-licensee” means any person holding a license under
33 this division for commercial cannabis activity involving medicinal
34 cannabis.

35 (ag) “Manufacture” means to compound, blend, extract, infuse,
36 or otherwise make or prepare a cannabis product.

37 (ah) “Manufacturer” means a licensee that conducts the
38 production, preparation, propagation, or compounding of cannabis
39 or cannabis products either directly or indirectly or by extraction
40 methods, or independently by means of chemical synthesis, or by

1 a combination of extraction and chemical synthesis at a fixed
2 location that packages or repackages cannabis or cannabis products
3 or labels or relabels its container.

4 (ai) “Medicinal cannabis” or “medicinal cannabis product”
5 means cannabis or a cannabis product, respectively, intended to
6 be sold for use pursuant to the Compassionate Use Act of 1996
7 (Proposition 215), found at Section 11362.5 of the Health and
8 Safety Code, by a medicinal cannabis patient in California who
9 possesses a physician’s recommendation.

10 (aj) “Nursery” means a licensee that produces only clones,
11 immature plants, seeds, and other agricultural products used
12 specifically for the propagation and cultivation of cannabis.

13 (ak) “Operation” means any act for which licensure is required
14 under the provisions of this division, or any commercial transfer
15 of cannabis or cannabis products.

16 (al) “Owner” means any of the following:

17 (1) A person with an aggregate ownership interest of 20 percent
18 or more in the person applying for a license or a licensee, unless
19 the interest is solely a security, lien, or encumbrance.

20 (2) The chief executive officer of a nonprofit or other entity.

21 (3) A member of the board of directors of a nonprofit.

22 (4) An individual who will be participating in the direction,
23 control, or management of the person applying for a license.

24 (am) “Package” means any container or receptacle used for
25 holding cannabis or cannabis products.

26 (an) “Person” includes any individual, firm, partnership, joint
27 venture, association, corporation, limited liability company, estate,
28 trust, business trust, receiver, syndicate, or any other group or
29 combination acting as a unit, and the plural as well as the singular.

30 (ao) “Physician’s recommendation” means a recommendation
31 by a physician and surgeon that a patient use cannabis provided
32 in accordance with the Compassionate Use Act of 1996
33 (Proposition 215), found at Section 11362.5 of the Health and
34 Safety Code.

35 (ap) “Premises” means the designated structure or structures
36 and land specified in the application that is owned, leased, or
37 otherwise held under the control of the applicant or licensee where
38 the commercial cannabis activity will be or is conducted. The
39 premises shall be a contiguous area and shall only be occupied by
40 one licensee.

1 (aq) “Primary caregiver” has the same meaning as in Section
2 11362.7 of the Health and Safety Code.

3 (ar) “Purchaser” means the customer who is engaged in a
4 transaction with a licensee for purposes of obtaining cannabis or
5 cannabis products.

6 (as) “Sell,” “sale,” and “to sell” include any transaction whereby,
7 for any consideration, title to cannabis or cannabis products is
8 transferred from one person to another, and includes the delivery
9 of cannabis or cannabis products pursuant to an order placed for
10 the purchase of the same and soliciting or receiving an order for
11 the same, but does not include the return of cannabis or cannabis
12 products by a licensee to the licensee from whom the cannabis or
13 cannabis product was purchased.

14 (at) “Testing laboratory” means a laboratory, facility, or entity
15 in the state that offers or performs tests of cannabis or cannabis
16 products and that is both of the following:

17 (1) Accredited by an accrediting body that is independent from
18 all other persons involved in commercial cannabis activity in the
19 state.

20 (2) Licensed by the bureau.

21 (au) “Unique identifier” means an alphanumeric code or
22 designation used for reference to a specific plant on a licensed
23 premises and any cannabis or cannabis product derived or
24 manufactured from that plant.

25 (av) “Youth center” has the same meaning as in Section 11353.1
26 of the Health and Safety Code.

27 SEC. 4. Section 26001.5 is added to the Business and
28 Professions Code, to read:

29 26001.5. (a) An adult 21 years of age or over may use, for
30 medicinal purposes, cannabis and cannabis products on an animal
31 owned by that adult.

32 (b) Notwithstanding any other law, cannabis products, as defined
33 in Section 11018.1 of the Health and Safety Code, intended for
34 medicinal use on an animal may only be sold to an adult as
35 described in subdivision (a) by a licensee who has been issued a
36 retailer license under this division.

37 SEC. 5. The Legislature finds and declares that this act furthers
38 the purposes and intent of the Control, Regulate and Tax Adult
39 Use of Marijuana Act of 2016.

1 SEC. 6. No reimbursement is required by this act pursuant to
2 Section 6 of Article XIII B of the California Constitution because
3 the only costs that may be incurred by a local agency or school
4 district will be incurred because this act creates a new crime or
5 infraction, eliminates a crime or infraction, or changes the penalty
6 for a crime or infraction, within the meaning of Section 17556 of
7 the Government Code, or changes the definition of a crime within
8 the meaning of Section 6 of Article XIII B of the California
9 Constitution.

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AMENDED IN SENATE JUNE 27, 2018

AMENDED IN ASSEMBLY APRIL 2, 2018

CALIFORNIA LEGISLATURE—2017–18 REGULAR SESSION

ASSEMBLY BILL

No. 2300

Introduced by Assembly Member Maienschein
(Coauthors: Assembly Members Acosta, Levine, and Waldron)
~~(Coauthors: Senators Wilk and Newman)~~
(Coauthor: Senator Wilk)

February 13, 2018

An act to amend Section 4846.5 of the Business and Professions Code, relating to healing arts.

LEGISLATIVE COUNSEL'S DIGEST

AB 2300, as amended, Maienschein. Continuing education: veterinarians.

Existing law creates a Veterinary Medical Board in the Department of Consumer Affairs whose highest priority is to protect the public in exercising its licensing, regulatory, and disciplinary functions. Existing law requires applications for a veterinarian license to be furnished on a form and accompanied by a diploma or other verification of graduation from a veterinary college recognized by the board. Existing law requires each veterinarian licensed by the board to biennially apply for renewal of his or her license. Existing law requires the board to issue renewal licenses to those applicants that have completed a minimum of 36 hours of continuing education in the preceding 2 years, including no more than 6 hours of self-study courses.

This bill would instead authorize an applicant for renewal to earn a total of 6 hours or less of the 36 hours of continuing education by either

taking up to 6 hours of self-study courses or providing up to 4 hours of pro bono spaying or neutering services to ~~benefit residents of low-income communities, as defined, a household with a demonstrated financial need for reduced-cost services,~~ or a combination thereof.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. Section 4846.5 of the Business and Professions
- 2 Code is amended to read:
- 3 4846.5. (a) Except as provided in this section, the board shall
- 4 issue renewal licenses only to those applicants that have completed
- 5 a minimum of 36 hours of continuing education in the preceding
- 6 two years.
- 7 (b) (1) Notwithstanding any other law, continuing education
- 8 hours shall be earned by attending courses relevant to veterinary
- 9 medicine and sponsored or cosponsored by any of the following:
- 10 (A) American Veterinary Medical Association (AVMA)
- 11 accredited veterinary medical colleges.
- 12 (B) Accredited colleges or universities offering programs
- 13 relevant to veterinary medicine.
- 14 (C) The American Veterinary Medical Association.
- 15 (D) American Veterinary Medical Association recognized
- 16 specialty or affiliated allied groups.
- 17 (E) American Veterinary Medical Association’s affiliated state
- 18 veterinary medical associations.
- 19 (F) Nonprofit annual conferences established in conjunction
- 20 with state veterinary medical associations.
- 21 (G) Educational organizations affiliated with the American
- 22 Veterinary Medical Association or its state affiliated veterinary
- 23 medical associations.
- 24 (H) Local veterinary medical associations affiliated with the
- 25 California Veterinary Medical Association.
- 26 (I) Federal, state, or local government agencies.
- 27 (J) Providers accredited by the Accreditation Council for
- 28 Continuing Medical Education (ACCME) or approved by the
- 29 American Medical Association (AMA), providers recognized by
- 30 the American Dental Association Continuing Education

1 Recognition Program (ADA CERP), and AMA or ADA affiliated
2 state, local, and specialty organizations.

3 (2) Notwithstanding paragraph (1), a total of six hours or less
4 of the required 36 hours of continuing education may be earned
5 by doing either of the following, or a combination thereof:

6 (A) Up to six hours may be earned by taking self-study courses,
7 which may include, but are not limited to, reading journals, viewing
8 video recordings, or listening to audio recordings.

9 (B) ~~(i) Up to four hours may be earned by providing pro bono~~
10 ~~spaying or neutering services to benefit residents of low-income~~
11 ~~communities. Services shall be provided under the supervision of~~
12 ~~a public animal control agency or shelter, society for the prevention~~
13 ~~of cruelty to animals shelter, humane society shelter, or rescue~~
14 ~~group. Services~~ *The services shall be administered at a facility that*
15 *is appropriately equipped and staffed to provide those services.*
16 *The service shall be provided to a household with a demonstrated*
17 *financial need for reduced-cost services.*

18 ~~(ii) For purposes of clause (i), "low-income communities" means~~
19 ~~census tracts with median household incomes at or below 80~~
20 ~~percent of the statewide median income or with median household~~
21 ~~incomes at or below the threshold designated by the Department~~
22 ~~of Housing and Community Development as low income on its~~
23 ~~list of state income limits adopted pursuant to Section 50093 of~~
24 ~~the Health and Safety Code.~~

25 (3) The board may approve other continuing veterinary medical
26 education providers not specified in paragraph (1).

27 (A) The board has the authority to recognize national continuing
28 education approval bodies for the purpose of approving continuing
29 education providers not specified in paragraph (1).

30 (B) Applicants seeking continuing education provider approval
31 shall have the option of applying to the board or to a
32 board-recognized national approval body.

33 (4) For good cause, the board may adopt an order specifying,
34 on a prospective basis, that a provider of continuing veterinary
35 medical education authorized pursuant to paragraph (1) or (3) is
36 no longer an acceptable provider.

37 (5) Continuing education hours earned by attending courses
38 sponsored or cosponsored by those entities listed in paragraph (1)
39 between January 1, 2000, and January 1, 2001, shall be credited

1 toward a veterinarian's continuing education requirement under
2 this section.

3 (c) Every person renewing his or her license issued pursuant to
4 Section 4846.4, or any person applying for relicensure or for
5 reinstatement of his or her license to active status, shall submit
6 proof of compliance with this section to the board certifying that
7 he or she is in compliance with this section. Any false statement
8 submitted pursuant to this section shall be a violation subject to
9 Section 4831.

10 (d) This section shall not apply to a veterinarian's first license
11 renewal. This section shall apply only to second and subsequent
12 license renewals granted on or after January 1, 2002.

13 (e) The board shall have the right to audit the records of all
14 applicants to verify the completion of the continuing education
15 requirement. Applicants shall maintain records of completion of
16 required continuing education coursework for a period of four
17 years and shall make these records available to the board for
18 auditing purposes upon request. If the board, during this audit,
19 questions whether any course reported by the veterinarian satisfies
20 the continuing education requirement, the veterinarian shall provide
21 information to the board concerning the content of the course; the
22 name of its sponsor and cosponsor, if any; and specify the specific
23 curricula that was of benefit to the veterinarian.

24 (f) A veterinarian desiring an inactive license or to restore an
25 inactive license under Section 701 shall submit an application on
26 a form provided by the board. In order to restore an inactive license
27 to active status, the veterinarian shall have completed a minimum
28 of 36 hours of continuing education within the last two years
29 preceding application. The inactive license status of a veterinarian
30 shall not deprive the board of its authority to institute or continue
31 a disciplinary action against a licensee.

32 (g) Knowing misrepresentation of compliance with this article
33 by a veterinarian constitutes unprofessional conduct and grounds
34 for disciplinary action or for the issuance of a citation and the
35 imposition of a civil penalty pursuant to Section 4883.

36 (h) The board, in its discretion, may exempt from the continuing
37 education requirement any veterinarian who for reasons of health,
38 military service, or undue hardship cannot meet those requirements.
39 Applications for waivers shall be submitted on a form provided
40 by the board.

1 (i) The administration of this section may be funded through
2 professional license and continuing education provider fees. The
3 fees related to the administration of this section shall not exceed
4 the costs of administering the corresponding provisions of this
5 section.

6 (j) For those continuing education providers not listed in
7 paragraph (1) of subdivision (b), the board or its recognized
8 national approval agent shall establish criteria by which a provider
9 of continuing education shall be approved. The board shall initially
10 review and approve these criteria and may review the criteria as
11 needed. The board or its recognized agent shall monitor, maintain,
12 and manage related records and data. The board may impose an
13 application fee, not to exceed two hundred dollars (\$200)
14 biennially, for continuing education providers not listed in
15 paragraph (1) of subdivision (b).

16 (k) (1) Beginning January 1, 2018, a licensed veterinarian who
17 renews his or her license shall complete a minimum of one credit
18 hour of continuing education on the judicious use of medically
19 important antimicrobial drugs every four years as part of his or
20 her continuing education requirements.

21 (2) For purposes of this subdivision, “medically important
22 antimicrobial drug” means an antimicrobial drug listed in Appendix
23 A of the federal Food and Drug Administration’s Guidance for
24 Industry #152, including critically important, highly important,
25 and important antimicrobial drugs, as that appendix may be
26 amended.

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AMENDED IN SENATE JULY 5, 2018

AMENDED IN SENATE JUNE 25, 2018

AMENDED IN SENATE JUNE 13, 2018

CALIFORNIA LEGISLATURE—2017–18 REGULAR SESSION

ASSEMBLY BILL

No. 2362

**Introduced by Assembly Member Rubio
(Coauthor: Assembly Member Cervantes)**

February 14, 2018

An act to add Chapter 12 (commencing with Section 122390) to Part 6 of Division 105 of the Health and Safety Code, relating to public health.

LEGISLATIVE COUNSEL'S DIGEST

AB 2362, as amended, Rubio. Safe transportation of dogs and cats.

Existing law governs the retail sale of dogs and cats by pet dealers, as defined, and establishes minimum standards for the care of those animals, as specified.

This bill would establish health and safety standards for mobile or traveling housing facilities for dogs and cats, including standards governing sufficient heating and cooling, ventilation, and lighting. The bill would establish minimum and maximum temperatures and would require, among other things, that dry bedding and auxiliary ventilation be provided under certain circumstances. The bill would apply to public and private organizations, including animal shelters, rescue groups, and humane society shelters.

Vote: majority. Appropriation: no. Fiscal committee: no.
State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. Chapter 12 (commencing with Section 122390)
2 is added to Part 6 of Division 105 of the Health and Safety Code,
3 to read:

4
5 CHAPTER 12. SAFE TRANSPORTATION OF DOGS AND CATS

6
7 122390. This chapter shall be known, and may be cited, as the
8 Safe Transportation of Dogs and Cats Act.

9 122390.1. For purposes of this chapter, “mobile or traveling
10 housing facility” means a transporting vehicle, including, but not
11 limited to, a car, truck, trailer, bus, or recreational vehicle used to
12 transport animals by an entity described in Section 122390.6.

13 122390.2. A mobile or traveling housing facility for dogs and
14 cats shall be sufficiently heated and cooled when necessary to
15 protect the dogs and cats from temperature or humidity extremes
16 ~~and so as~~ to provide for their health and well-being.

17 122390.3. The ambient temperature in a mobile or traveling
18 housing facility shall not fall below 50 degrees Fahrenheit (10
19 degrees Celsius) for dogs and cats not acclimated to lower
20 temperatures, for those breeds, such as dogs with little fur, that
21 cannot tolerate lower temperatures without stress or discomfort,
22 and for sick, aged, young, or infirm dogs and cats. Dry bedding,
23 solid resting boards, or other methods of conserving body heat
24 shall be provided when temperatures are below 50 degrees
25 Fahrenheit (10 degrees Celsius). The ambient temperature shall
26 not fall below 45 degrees Fahrenheit (7.2 degrees Celsius) for more
27 than four consecutive hours when dogs or cats are present, and
28 shall not exceed 85 degrees Fahrenheit (29.5 degrees Celsius) for
29 more than four consecutive hours when dogs or cats are present.
30 The requirements of this section are in addition to, and not in place
31 of, all other requirements pertaining to climatic conditions in this
32 chapter or otherwise required by law.

33 122390.4. A mobile or traveling housing facility for dogs and
34 cats shall be sufficiently ventilated at all times when dogs or cats
35 are present to provide for the health and well-being of the animals,
36 and to minimize odors, drafts, ammonia levels, moisture
37 condensation, and exhaust fumes. Ventilation shall be provided
38 by means of windows, doors, vents, fans, or air-conditioning.

1 Auxiliary ventilation, such as fans, blowers, or air-conditioning,
2 shall be provided when the ambient temperature within the animal
3 housing area is 85 degrees Fahrenheit (29.5 degrees Celsius) or
4 higher. The requirements of this section are in addition to, and not
5 in place of, all other requirements pertaining to climatic conditions
6 in this chapter or otherwise required by law.

7 122390.5. Mobile or traveling housing facilities for dogs and
8 cats shall be sufficiently well lit to permit proper cleaning and
9 inspection of the facility, and observation of the dogs and cats.
10 Animal areas shall be provided a regular diurnal lighting cycle of
11 either natural or artificial light. Lighting shall be uniformly diffused
12 throughout animal facilities and provide sufficient illumination to
13 aid in maintaining good housekeeping practices, adequate cleaning,
14 adequate inspection of animals, and for the well-being of the
15 animals.

16 122390.6. This chapter applies to any public animal control
17 agency or shelter, society for the prevention of cruelty to animals
18 shelter, humane society shelter, or rescue group that is in a
19 cooperative agreement with at least one private or public shelter
20 pursuant to Section 31108, 31752, or 31753 of the Food and
21 Agricultural Code.

Assembly Bill No. 2589

CHAPTER 81

An act to amend Section 11056 of the Health and Safety Code, relating to controlled substances.

[Approved by Governor July 9, 2018. Filed with Secretary of State July 9, 2018.]

LEGISLATIVE COUNSEL'S DIGEST

AB 2589, Bigelow. Controlled substances: human chorionic gonadotropin. Under the existing California Uniform Controlled Substances Act, controlled substances are listed on 5 different schedules. Existing law lists human chorionic gonadotropin (hCG) as a Schedule III controlled substance. Substances listed as controlled substances are subject to various forms of regulation, including reporting requirements, prescribing requirements, and criminal prohibitions on possession.

This bill would exempt hCG from being subject to the reagent regulations of the Controlled Substances Act when possessed by, sold to, purchased by, transferred to, or administered by a licensed veterinarian, or a licensed veterinarian's designated agent, exclusively for veterinary use.

The people of the State of California do enact as follows:

SECTION 1. Section 11056 of the Health and Safety Code is amended to read:

11056. (a) The controlled substances listed in this section are included in Schedule III.

(b) Stimulants. Unless specifically excepted or unless listed in another schedule, any material, compound, mixture, or preparation that contains any quantity of the following substances having a stimulant effect on the central nervous system, including its salts, isomers (whether optical, position, or geometric), and salts of those isomers whenever the existence of those salts, isomers, and salts of isomers is possible within the specific chemical designation:

(1) Those compounds, mixtures, or preparations in dosage unit form containing any stimulant substances listed in Schedule II which compounds, mixtures, or preparations were listed on August 25, 1971, as excepted compounds under Section 1308.32 of Title 21 of the Code of Federal Regulations, and any other drug of the quantitative composition shown in that list for those drugs or that is the same except that it contains a lesser quantity of controlled substances.

(2) Benzphetamine.

- (3) Chlorphentermine.
- (4) Clortermine.
- (5) Mazindol.
- (6) Phendimetrazine.

(c) Depressants. Unless specifically excepted or unless listed in another schedule, any material, compound, mixture, or preparation that contains any quantity of the following substances having a depressant effect on the central nervous system:

(1) Any compound, mixture, or preparation containing any of the following:

- (A) Amobarbital
- (B) Secobarbital
- (C) Pentobarbital

or any salt thereof and one or more other active medicinal ingredients that are not listed in any schedule.

(2) Any suppository dosage form containing any of the following:

- (A) Amobarbital
- (B) Secobarbital
- (C) Pentobarbital

or any salt of any of these drugs and approved by the federal Food and Drug Administration for marketing only as a suppository.

(3) Any substance that contains any quantity of a derivative of barbituric acid or any salt thereof.

- (4) Chlorhexadol.
- (5) Lysergic acid.
- (6) Lysergic acid amide.
- (7) Methyprylon.
- (8) Sulfondiethylmethane.
- (9) Sulfonethylmethane.
- (10) Sulfonmethane.

(11) Gamma hydroxybutyric acid, and its salts, isomers and salts of isomers, contained in a drug product for which an application has been approved under Section 505 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. Sec. 355).

(d) Nalorphine.

(e) Narcotic drugs. Unless specifically excepted or unless listed in another schedule, any material, compound, mixture, or preparation containing any of the following narcotic drugs, or their salts calculated as the free anhydrous base or alkaloid, in limited quantities as set forth below:

(1) Not more than 1.8 grams of codeine per 100 milliliters or not more than 90 milligrams per dosage unit, with an equal or greater quantity of an isoquinoline alkaloid of opium.

(2) Not more than 1.8 grams of codeine per 100 milliliters or not more than 90 milligrams per dosage unit, with one or more active, nonnarcotic ingredients in recognized therapeutic amounts.

(3) Not more than 300 milligrams of dihydrocodeinone per 100 milliliters or not more than 15 milligrams per dosage unit, with a fourfold or greater quantity of an isoquinoline alkaloid of opium.

(4) Not more than 300 milligrams of dihydrocodeinone per 100 milliliters or not more than 15 milligrams per dosage unit, with one or more active nonnarcotic ingredients in recognized therapeutic amounts. Additionally, oral liquid preparations of dihydrocodeinone containing the above specified amounts may not contain as its nonnarcotic ingredients two or more antihistamines in combination with each other.

(5) Not more than 1.8 grams of dihydrocodeine per 100 milliliters or not more than 90 milligrams per dosage unit, with one or more active nonnarcotic ingredients in recognized therapeutic amounts.

(6) Not more than 300 milligrams of ethylmorphine per 100 milliliters or not more than 15 milligrams per dosage unit, with one or more active, nonnarcotic ingredients in recognized therapeutic amounts.

(7) Not more than 500 milligrams of opium per 100 milliliters or per 100 grams or not more than 25 milligrams per dosage unit, with one or more active, nonnarcotic ingredients in recognized therapeutic amounts.

(8) Not more than 50 milligrams of morphine per 100 milliliters or per 100 grams, with one or more active, nonnarcotic ingredients in recognized therapeutic amounts.

(f) Anabolic steroids and chorionic gonadotropin. Any material, compound, mixture, or preparation containing chorionic gonadotropin or an anabolic steroid (excluding anabolic steroid products listed in the “Table of Exempt Anabolic Steroid Products” (Section 1308.34 of Title 21 of the Code of Federal Regulations), as exempt from the federal Controlled Substances Act (Section 801 and following of Title 21 of the United States Code)), including, but not limited to, the following:

- (1) Androisoxazole.
- (2) Androstenediol.
- (3) Bolandiol.
- (4) Bolasterone.
- (5) Boldenone.
- (6) Chlormethandienone.
- (7) Clostebol.
- (8) Dihydromesterone.
- (9) Ethylestrenol.
- (10) Fluoxymesterone.
- (11) Formyldienolone.
- (12) 4-Hydroxy-19-nortestosterone.
- (13) Mesterolone.
- (14) Methandriol.
- (15) Methandrostenolone.
- (16) Methenolone.
- (17) 17-Methyltestosterone.
- (18) Methyltrienolone.
- (19) Nandrolone.

- (20) Norbolethone.
- (21) Norethandrolone.
- (22) Normethandrolone.
- (23) Oxandrolone.
- (24) Oxymestronone.
- (25) Oxymetholone.
- (26) Quinbolone.
- (27) Stanolone.
- (28) Stanozolol.
- (29) Stenbolone.
- (30) Testosterone.
- (31) Trenbolone.
- (32) Human chorionic gonadotropin (hCG), except when possessed by, sold to, purchased by, transferred to, or administered by a licensed veterinarian, or a licensed veterinarian's designated agent, exclusively for veterinary use.
 - (g) Ketamine. Any material, compound, mixture, or preparation containing ketamine.
 - (h) Hallucinogenic substances. Any of the following hallucinogenic substances: dronabinol (synthetic) in sesame oil and encapsulated in a soft gelatin capsule in a drug product approved by the federal Food and Drug Administration.

AMENDED IN SENATE AUGUST 6, 2018

AMENDED IN SENATE JUNE 18, 2018

AMENDED IN ASSEMBLY APRIL 25, 2018

AMENDED IN ASSEMBLY APRIL 12, 2018

CALIFORNIA LEGISLATURE—2017–18 REGULAR SESSION

ASSEMBLY BILL

No. 2958

Introduced by Assembly Member Quirk

February 16, 2018

An act to add Section 11123.5 to the Government Code, relating to state government.

LEGISLATIVE COUNSEL'S DIGEST

AB 2958, as amended, Quirk. State bodies: meetings: teleconference. Existing law, the Bagley-Keene Open Meeting Act, requires, with specified exceptions, that all meetings of a state body, as defined, be open and public, and all persons be permitted to attend any meeting of a state body, except as provided. Existing law does not prohibit a state body from holding an open or closed meeting by teleconference for the benefit of the public and state body. Existing law, among other things, requires a state body that elects to conduct a meeting or proceeding by teleconference to post agendas at all teleconference locations, to identify each teleconference location in the notice and agenda, and to make each teleconference location accessible to the public. Existing law requires the agenda to provide an opportunity for members of the public to address the state body directly at each teleconference location, as specified.

This bill, for *a state body that is an advisory board, advisory commission, advisory committee, advisory subcommittee, or similar multimember advisory body that does not have rulemaking authority,* would instead *body, would authorize an additional way of holding a meeting by teleconference, as prescribed, provided it also complies with all other applicable requirements of the Bagley-Keene Open Meeting Act. In this context, the bill would require a member of a state body participating by teleconference to be listed in the meeting minutes. minutes and that notice, as specified, identifying that member be provided to the public at least 24 hours before the meeting.* The bill would require a state body ~~that meets this description~~ to designate a primary physical meeting location where ~~a quorum of the members of the state body will attend and where participants may physically~~ *members of the public may attend the meeting and participate. The bill would require a quorum of the body’s members to be present at the primary physical meeting location and that decisions during the teleconference meeting be made by rollcall vote.* The bill would require ~~that the agenda include the teleconference phone number and, if applicable, the Internet Web site or other information indicating how the public can access the meeting remotely.~~ *The bill would require these state bodies, on and after January 1, 2019, to adopt teleconferencing guidelines, as specified, before holding a meeting by teleconference pursuant to these provisions: require the state body, if a member participates remotely, to provide the public a way to hear the meeting or to observe it and to provide public notice, as specified, of how this would be done. Upon discovering that a means of remote access has failed during a meeting, the bill would require the body to end or adjourn the meeting, as specified, and would prescribe certain notice requirements and procedures in this connection.*

Vote: majority. Appropriation: no. Fiscal committee: yes.
 State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. Section 11123.5 is added to the Government Code,
- 2 to read:
- 3 11123.5. (a) In addition to the authorization to hold a meeting
- 4 by teleconference pursuant to subdivision (b) of Section 11123,
- 5 any state body that is an advisory board, advisory commission,
- 6 advisory committee, advisory subcommittee, or similar

1 *multimember advisory body may hold a meeting by teleconference*
2 *as described in this section, provided the meeting complies with*
3 *all of the section's requirements and, except as set forth in this*
4 *section, it also complies with all other applicable requirements of*
5 *this article.*

6 *(b) A member of a state body as described in subdivision (a)*
7 *who participates in a teleconference meeting from a remote*
8 *location subject to this section's requirements shall be listed in*
9 *the minutes of the meeting. The state body shall provide notice to*
10 *the public at least 24 hours before the meeting that identifies any*
11 *member who will participate remotely by posting the notice on its*
12 *Internet Web site and by emailing notice to any person who has*
13 *requested notice of meetings of the state body under this article.*
14 *The location of a member of a state body participating remotely*
15 *is not required be disclosed in the public notice or email and need*
16 *not be accessible to the public. This section does not affect the*
17 *requirement prescribed by this article that the state body post an*
18 *agenda at least 10 days in advance of the meeting.*

19 *(c) A state body described in subdivision (a) shall designate the*
20 *primary physical meeting location where members of the public*
21 *may physically attend the meeting and participate. A quorum of*
22 *the members of the state body shall be in attendance at the primary*
23 *physical meeting location, and members of the state body*
24 *participating remotely shall not count towards establishing a*
25 *quorum. All decisions taken during a meeting by teleconference*
26 *shall be by rollcall vote.*

27 *(d) When a member of a state body described in subdivision (a)*
28 *participates remotely in a meeting subject to this section's*
29 *requirements, the state body shall provide a means by which the*
30 *public may remotely hear audio of the meeting or remotely observe*
31 *the meeting. The applicable teleconference phone number or*
32 *Internet Web site, or other information indicating how the public*
33 *can access the meeting remotely, shall be in the 24-hour notice*
34 *described in subdivision (a) that is available to the public.*

35 *(e) Upon discovering that a means of remote access required*
36 *by subdivision (c) has failed during a meeting, the state body*
37 *described in subdivision (a) shall end or adjourn the meeting in*
38 *accordance with Section 11128.5. In addition to any other*
39 *requirements that may apply, the state body shall provide notice*
40 *of the meeting's end or adjournment on its Internet Web site and*

1 *by email to any person who has requested notice of meetings of*
2 *the state body under this article. If the meeting will be adjourned*
3 *and reconvened on the same day, further notice shall be provided*
4 *by an automated message on a telephone line posted on the state*
5 *body’s agenda, or by a similar means, that will communicate when*
6 *the state body intends to reconvene the meeting and how a member*
7 *of the public may hear audio of the meeting or observe the meeting.*

8 SECTION 1. ~~Section 11123.5 is added to the Government~~
9 ~~Code, to read:~~

10 11123.5. ~~Notwithstanding any other law, all of the following~~
11 ~~shall apply to a meeting held by teleconference under this article~~
12 ~~by an advisory board, advisory commission, advisory committee,~~
13 ~~advisory subcommittee, or similar multimember advisory body~~
14 ~~that does not have rulemaking authority, as described in subdivision~~
15 ~~(e) of Section 11121:~~

16 (a) ~~A member of a state body described in this section~~
17 ~~participating by teleconference shall be listed in the minutes of the~~
18 ~~meeting and shall provide notice of his or her participation by~~
19 ~~teleconference at least 24 hours before the meeting.~~

20 (b) ~~A state body described in this section shall designate a~~
21 ~~primary physical meeting location where participants may~~
22 ~~physically attend the meeting and participate. A quorum of the~~
23 ~~members of the state body shall be in attendance at the primary~~
24 ~~physical meeting location.~~

25 (c) ~~The teleconference phone number and, if applicable, the~~
26 ~~Internet Web site or other information indicating how the public~~
27 ~~can access the meeting remotely, shall be included in the agenda,~~
28 ~~which shall be available to the public.~~

29 (d) (1) ~~Nothing in this section shall exempt a state body~~
30 ~~described in this section from providing information regarding the~~
31 ~~physical location of a state body meeting or any teleconference~~
32 ~~participation information, including the identity of a state body~~
33 ~~member who might be participating by teleconference.~~

34 (2) ~~On and after January 1, 2019, prior to holding a meeting by~~
35 ~~teleconference pursuant to this section, a state body described in~~
36 ~~this section shall adopt teleconferencing guidelines consistent with~~
37 ~~this section to address issues that include, but are not limited to,~~

- 1 ~~cancellations as a result of technical difficulties, ensuring~~
- 2 ~~transparency, and public participation.~~

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AMENDED IN ASSEMBLY JUNE 27, 2018

AMENDED IN ASSEMBLY JUNE 20, 2018

AMENDED IN SENATE MAY 25, 2018

AMENDED IN SENATE APRIL 26, 2018

AMENDED IN SENATE APRIL 9, 2018

SENATE BILL

No. 1305

Introduced by Senator Glazer

(Principal coauthors: Assembly Members Baker and Steinorth)
(Coauthors: Assembly Members ~~Cervantes Bloom~~, *Cervantes*, and
Mullin)

February 16, 2018

An act to add Section 1799.109 to the Health and Safety Code, relating to emergency medical services providers.

LEGISLATIVE COUNSEL'S DIGEST

SB 1305, as amended, Glazer. Emergency medical services providers: dogs and cats.

Existing law, the Emergency Medical Services System and the Prehospital Emergency Medical Care Personnel Act (the act), establishes the Emergency Medical Services Authority to coordinate and integrate all state activities concerning emergency medical services, including, among other duties, establishing training standards for specified emergency services personnel. The act provides a qualified immunity for public entities and emergency rescue personnel providing emergency services. The act provides other exemptions from liability for specified professionals rendering emergency medical services.

Existing law, the Veterinary Medicine Practice Act, governs the practice of veterinary medicine in this state and makes it unlawful for any person to practice veterinary medicine in this state without a valid license issued pursuant to the act. For purposes of the act, the practice of veterinary medicine includes, among other things, administering a drug, appliance, or treatment for the cure or relief of a wound, fracture, or bodily injury of an animal.

This bill would authorize an emergency medical services provider, as defined, to provide basic first aid to dogs and cats, as defined, to the extent that the provision of that care is not prohibited by the provider’s employer. ~~The bill would exempt that provider and his or her employer from liability for civil damages, and would exempt the provider from other disciplinary action, for providing that care, except as specified.~~ *limit civil liability for specified individuals who provide care to a pet or other domesticated animal during an emergency by applying existing provisions of state law.* The definition of “basic first aid to dogs and cats” for purposes of these provisions would specifically include, among other acts, administering oxygen and bandaging for the purpose of stopping bleeding.

Vote: majority. Appropriation: no. Fiscal committee: yes. State-mandated local program: no.

The people of the State of California do enact as follows:

- 1 SECTION 1. Section 1799.109 is added to the Health and
- 2 Safety Code, to read:
- 3 1799.109. (a) The Legislature finds and declares all of the
- 4 following:
- 5 (1) California residents receive comfort and unconditional love
- 6 on a daily basis from their household pets, particularly dogs and
- 7 cats.
- 8 (2) California residents benefit from the special support, comfort,
- 9 guidance, companionship, and therapy provided by dogs and cats.
- 10 (3) Pets provide critical support to many California residents
- 11 with disabilities.
- 12 (4) Pets provide assistance and aid in the official duties of
- 13 military personnel, peace officers, law enforcement agencies, fire
- 14 departments, and search-and-rescue agencies.
- 15 (5) Personnel of some fire districts and other first responder
- 16 agencies currently provide stabilizing, life-saving emergency care

1 to dogs and cats, which violates the Veterinary Medicine Practice
2 Act.

3 (6) In enacting this section, it is the intent of the Legislature to
4 authorize emergency medical service providers to provide, on a
5 voluntary basis, basic first aid to dogs and ~~eats~~: *cats without*
6 *exposure to criminal prosecution or professional discipline for*
7 *the unlawful practice of veterinary medicine.*

8 (b) Notwithstanding the Veterinary Medicine Practice Act, as
9 set forth in Chapter 11 (commencing with Section 4800) of
10 Division 2 of the Business and Professions Code, an emergency
11 medical services provider may provide basic first aid to dogs and
12 cats to the extent that the provision of that care is not prohibited
13 by the provider's ~~employer~~: *employer, and the provider shall not*
14 *be subject to criminal prosecution for a violation of Section 4831*
15 *of the Business and Professions Code.*

16 ~~(e) An emergency medical services provider and his or her~~
17 ~~employer are not liable for civil damages, and an emergency~~
18 ~~medical services provider is not subject to criminal prosecution or~~
19 ~~professional disciplinary action, for an act or omission resulting~~
20 ~~from the provision of basic first aid to dogs and cats pursuant to~~
21 ~~this section, unless the act or omission constitutes willful or wanton~~
22 ~~misconduct.~~

23 (c) *Civil liability for a person who provides care to a pet or*
24 *other domesticated animal during an emergency is governed by*
25 *the following provisions of law:*

26 (1) *Section 4826.1 of the Business and Professions Code governs*
27 *care provided by a veterinarian.*

28 (2) *Subdivision (a) of Section 1799.102 governs care provided*
29 *by an emergency medical services provider, or law enforcement*
30 *and emergency personnel specified in this chapter.*

31 (3) *Subdivision (b) of Section 1799.102 governs care provided*
32 *by any person other than an individual described in paragraph*
33 *(1) or (2).*

34 (d) Notwithstanding any other law, this section does not impose
35 a duty or obligation upon an emergency medical services provider
36 *or any other person to provide care to a ~~dog or cat~~: an injured pet*
37 *or other domesticated animal during an emergency.*

38 (e) For purposes of this section, the following definitions apply:

39 (1) "Cat" means a small domesticated feline animal that is kept
40 as a pet. "Cat" does not include nondomesticated wild animals.

- 1 (2) “Dog” means a domesticated canine animal owned for
2 companionship, service, therapeutic, or assistance purposes.
- 3 (3) “Emergency medical services provider” means a person who
4 is certified or licensed to provide emergency medical services.
- 5 (4) “Employer” means an entity or organization that employs
6 or enlists the services of an emergency medical services provider.
- 7 (5) (A) “Basic first aid to dogs and cats” means providing
8 immediate medical care to a dog or cat by an emergency medical
9 services provider, in an emergency situation to which the
10 emergency medical services provider is responding, through the
11 following means:
- 12 (i) Administering oxygen.
 - 13 (ii) Managing ventilation by mask.
 - 14 (iii) Manually clearing the upper airway, not including tracheal
15 intubation or surgical procedures.
 - 16 (iv) Giving ~~mouth-to-snout or mouth-to-barrier ventilation.~~
17 *mouth-to-mouth ventilation, including with the use of a barrier.*
 - 18 (v) Controlling hemorrhage with direct pressure.
 - 19 (vi) Bandaging for the purpose of stopping bleeding.
- 20 (B) “Basic first aid to dogs and cats” is intended to enable the
21 dog or cat to be transported as soon as practical to a veterinarian
22 for treatment. “Basic first aid to dogs and cats” does not include
23 care provided in response to an emergency call made solely for
24 the purpose of tending to an injured dog or cat, unless a person’s
25 life could be placed in danger attempting to save the life of the
26 dog or cat.

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AMENDED IN ASSEMBLY AUGUST 6, 2018

AMENDED IN ASSEMBLY JUNE 21, 2018

AMENDED IN ASSEMBLY JUNE 12, 2018

AMENDED IN SENATE MAY 10, 2018

AMENDED IN SENATE APRIL 17, 2018

SENATE BILL

No. 1480

Introduced by Senator Hill

February 16, 2018

An act to amend Sections 101, 101.7, 328, 2064.5, 2065, 2135, 2499.5, 2529.6, 2708, 2715, 2816, 2892.6, 2895, 3047, 3147, 3680, 4008, 4518, 4548, 4604, 4809.7, 4830, 4836.2, ~~4990.06~~, and 11506 of, and to add Sections 109.5, 1007, 2892.7, 4518.1, 4826.4, 4829.5, and 4841.2 to, the Business and Professions Code, to amend Sections 7000, 7103, 8731, 8778.5, 8785, 103775, and 103780 of the Health and Safety Code, and to amend an initiative act entitled “An act prescribing the terms upon which licenses may be issued to practitioners of chiropractic, creating the State Board of Chiropractic Examiners, and declaring its powers and duties, prescribing penalties for violation thereof, and repealing all acts and parts of acts inconsistent herewith” approved by voters on November 7, 1922, (the Chiropractic Act) by amending Sections 5 and 12 of the act, relating to professions and vocations, and making an appropriation therefor.

LEGISLATIVE COUNSEL’S DIGEST

SB 1480, as amended, Hill. Professions and vocations.

(1) Existing law establishes the Department of Consumer Affairs, specifies the various boards that comprise the department, and requires the boards to meet at least 3 times a year.

This bill would instead require the boards to meet at least 2 times a year. The bill would require each of the boards comprising the department to present and vote on any documents planned for submission to the department for a change in spending authority.

(2) Existing law requires the Director of Consumer Affairs to implement complaint prioritization guidelines for boards to use in prioritizing their respective complaint and investigative workloads.

This bill would require the director to amend those guidelines to include the category of “allegations of serious harm to a ~~minor~~, *minor*,” as ~~specified.~~ *specified*.

(3) *Existing law, the Medical Practice Act, establishes the Medical Board of California for the licensure and regulation of physicians and surgeons. Existing law prohibits a postgraduate trainee, intern, resident, postdoctoral fellow, or instructor from engaging in the practice of medicine unless he or she holds a valid, unrevoked, and unsuspended physician’s and surgeon’s certificate issued by the board. Existing law provides an exemption to this provision and authorizes a graduate of an approved medical school to engage in the practice of medicine as a part of a postgraduate training program, as specified. Existing law, on and after January 1, 2020, limits to 12 months the practice of medicine, and receipt of compensation for that practice, by a medical school graduate as a part of an approved first-year postgraduate training program. Existing law, on and after January 1, 2020, limits to 27 months the practice of medicine, and receipt of compensation for that practice, by a medical school graduate as a part of an approved residency or fellowship. Existing law, on and after January 1, 2020, requires all privileges and exemptions under these provisions to cease automatically if the resident or fellow fails to receive a license to practice medicine within 27 months from the commencement of the residency or fellowship or if the board denies his or application for licensure. Existing law, on and after January 1, 2020, requires all approved postgraduate training that the medical school graduate has successfully completed in the United States or Canada to count toward the aggregate 39-month license exemption. Existing law, on and after January 1, 2020, requires a medical school graduate to successfully complete a minimum of 36 months of approved postgraduate training*

with at least 24 consecutive months in the same program to be eligible for a California physician's and surgeon's certificate.

This bill would, on and after January 1, 2020, delete the 12-month and 27-month limitations on the license exemptions for medical school graduates in first-year postgraduate training programs and residencies and fellowships, respectively. The bill would, on and after January 1, 2020, authorize the board, upon review of supporting documentation, to grant an extension beyond the 39-month license exemption to a postgraduate training licensee to successfully complete the 36 months of required approved postgraduate training. The bill would, on and after January 1, 2020, require an applicant who has successfully completed 36 months of approved postgraduate training in another state or in Canada and who is accepted into an approved postgraduate training program in California to obtain his or her license within 90 days after beginning the program. The bill would, on and after January 1, 2020, replace the requirement that the 24 months in the postgraduate training program be consecutive with a requirement that there be successful progression through the 24 months.

The bill would, on and after January 1, 2020, require the program director for a postgraduate training program in California to report to the board, on a form approved by the board, and provide any supporting documents as required by the board, specified events regarding a postgraduate trainee's status in the postgraduate program within 30 days of the event.

Existing law requires the board to issue a physician's and surgeon's certificate to an applicant who holds a specified license from another state or a Canadian province or Canadian provinces and who, in addition to meeting other requirements, has satisfactorily completed at least 2 years of approved postgraduate training or has satisfactorily completed at least one year of approved postgraduate training and takes and passes the clinical competency written examination. Existing law, on and after January 1, 2020, revises this provision to, among other things, exclude the applicant from licensure.

This bill instead would continue to include such an applicant who meets the other requirements as revised on and after January 1, 2020.

Existing law establishes various fees in connection with the issuance of licenses under the Medical Practice Act, and requires those fees to be paid into the State Treasury and credited to the Contingent Fund of the Medical Board of California, available to the board for specified purposes upon appropriation by the Legislature. Existing law requires

that an applicant for a physician's and surgeon's postgraduate training license be required to pay only 50% of the initial license fee. Existing law requires the applicant to, among other things, pay the reduced licensing fee to be considered for a postgraduate training license.

This bill would instead require the applicant to pay a nonrefundable application and processing fee.

(3)

(4) Existing law regulates the practice of podiatric medicine by the California Board of Podiatric Medicine and prescribes various fees relating to, among others, an application, licensure, and renewal. All revenue received by the board is required to be deposited into the Board of Podiatric Medicine Fund, which is available to the board upon appropriation by the Legislature.

This bill would revise those fee provisions by, among other things, deleting the oral examination fee and increasing, until January 1, 2021, the amount of the biennial renewal fee.

(4)

(5) Existing law, the Nursing Practice Act, regulates the practice of nursing by the Board of Registered Nursing, and authorizes the board to appoint an executive officer and employ personnel, including legal counsel.

This bill would authorize the executive officer to adopt a decision entered by default and a stipulation for surrender of a license. The bill would require the board to directly employ legal counsel to work exclusively for and report directly to the board if the board makes a specified finding.

Existing law establishes various fees in connection with the issuance of licenses under the act, and requires those fees to be deposited in the Board of Registered Nursing Fund, available to the board upon appropriation by the Legislature. Existing law establishes that the fee paid by a registered nurse for an evaluation of his or her qualifications to use the title "public health nurse" shall be not less than \$500 or more than \$1,500.

This bill would instead establish a fee for that purpose of not less than \$300 or more than \$1,000, would establish a penalty for failure to renew a certificate to practice as a public health nurse within the prescribed time, and would require the Board of Registered Nursing to reimburse any registered nurse who paid more than \$300 for an evaluation between April 5, 2018, and December 31, 2018.

(5)

(6) Existing law, the Vocational Nursing Practice Act, provides for the regulation of vocational nurses by the Board of Vocational Nursing and Psychiatric Technicians of the State of California, establishes the Vocational Nursing and Psychiatric Technician Fund, and makes those funds available to the board upon appropriation by the Legislature. Existing law prescribes various fees in connection with the issuance of licenses under the act and requires the board to collect a biennial fee not to exceed \$200 from a continuing education course provider.

This bill would instead require the board to collect an initial approval and a biennial renewal fee of \$150 unless a higher fee, not to exceed \$250, is established by the board. The bill would also require the board to collect an initial approval and a biennial renewal fee of \$150, unless a higher fee, not to exceed \$250, is established by the board, from any provider of a course in intravenous therapy, blood withdrawal, or intravenous therapy with blood withdrawal. The bill would revise the fees and fee amounts to be assessed under the act, including, but not limited to, application, examination, and renewal fees.

~~(6)~~

(7) Existing law, the Optometry Practice Act, provides for the licensure and regulation of the practice of optometry by the State Board of Optometry. Existing law authorizes a person to renew an expired optometrist license by paying specified fees and filing a form prescribed by the board. Existing law, commencing July 1, 2018, requires the board to charge an applicant for licensure a fee of \$2, and an applicant for renewal a fee of \$4, for purposes of developing an interface with the National Practitioner Data Bank.

This bill would also authorize the renewal of expired statements of licensure, branch office licenses, and fictitious name permits by filing an application for renewal and paying renewal and delinquency fees prescribed by the board, and would make the ~~Nurse~~ *National Practitioner Data Bank* fee \$4 for both licensure and renewal applicants.

~~(7)~~

(8) Existing law, the Naturopathic Doctors Act, provides for the regulation of the practice of naturopathic medicine by the Naturopathic Medicine Committee within the Osteopathic Medical Board of California. Existing law establishes various fees in connection with the issuance of a license to practice naturopathic medicine, which are deposited in the Naturopathic Doctor's Fund and are available to the committee upon appropriation by the Legislature.

This bill would revise those provisions by, among other things, increasing the application, initial licensing, and renewal fees, and establishing a fee for a certified license verification.

(8)

(9) Existing law provides for the licensure and regulation of pharmacists by the California State Board of Pharmacy and authorizes the board to employ legal counsel. ~~Existing law establishes the Board of Behavioral Sciences to license and regulate certain healing arts practitioners and authorizes the board to employ personnel as it deems necessary.~~

This bill would require the California State Board of Pharmacy ~~and the Board of Behavioral Sciences~~ to directly employ legal counsel who works exclusively for, and directly reports to, ~~those boards,~~ *the board*, as specified.

(10) *Existing law relating to research psychoanalysts authorizes certain students and graduates in psychoanalysis to engage in psychoanalysis under prescribed circumstances if they register with the Medical Board of California and present evidence of their student or graduate status. Existing law requires the board to revoke the exemption from licensure of any person who has been required to register as a sex offender, as specified. Existing law makes this provision inoperative on and after January 1, 2019.*

This bill would instead make that provision inoperative on and after January 1, 2022.

(9)

(11) Existing law provides for the licensure and regulation of psychiatric technicians by the Board of Vocational Nursing and Psychiatric Technicians of the State of California, and authorizes the board, if it adopts a continuing education program, to collect a fee from continuing education course providers. Existing law also prescribes various fees in connection with the issuance of a psychiatric technician license.

This bill would instead require the board, if it adopts a continuing education or blood withdrawal program, to collect an initial approval and a biennial renewal fee from a provider of a course in continuing education or blood withdrawal, as specified. The bill would also revise the fees and fee amounts required for licensure as a psychiatric technician.

(10)

(12) Existing law, the Massage Therapy Act, provides for the certification and regulation of massage therapists by the California Massage Therapy Council and requires an applicant for certification as a massage therapist to pass a massage and bodywork competency assessment examination.

This bill would make that examination requirement inoperative from January 1, 2019, until January 1, 2021.

(11)

(13) The Veterinary Medicine Practice Act regulates the practice of veterinary medicine by the Veterinary Medical Board and makes a violation of its provisions a crime. Existing law separately provides immunity from liability to a veterinarian or registered veterinary technician who renders services during certain states of emergency.

This bill would authorize a California-licensed veterinarian at a registered premises located within a 25-mile radius of any declared condition of emergency to, in good faith, provide veterinary services without establishing a veterinarian-client-patient relationship and dispense or prescribe a dangerous drug or device where failure to provide services or medications may result in loss of life or intense suffering. The bill would provide immunity from liability for a veterinarian providing those services.

Existing law excludes specified persons from the provisions regulating the practice of veterinary medicine, including veterinary medicine students in 2 specified schools of veterinary medicine who participate in diagnosis and treatment, as specified.

This bill would instead exclude students from any veterinary medical program accredited by the American Veterinary Medical Association Council on Education who participate in diagnosis or treatment with direct supervision, or surgery with immediate supervision, subject to specified conditions.

Existing law provides for a veterinary assistant controlled substance permit issued by the Veterinary Medical Board to qualified applicants and authorizes the board to deny, revoke, or suspend a veterinary assistant controlled substance permit for specified reasons.

This bill would add to ~~those~~ *the* list of reasons the conviction of a crime substantially related to the qualifications, functions, or duties of veterinary medicine, veterinary surgery, or veterinary dentistry. The bill would also authorize the board, in addition to denial, revocation, or suspension, to issue a probationary veterinary assistant controlled substance permit.

The bill would prohibit a graduate of a veterinary college from performing animal health care tasks otherwise performed by a registered veterinary technician, except as specified, and would require a veterinarian to offer a consultation to the client each time he or she initially prescribes, dispenses, or furnishes a dangerous drug, as defined, to an animal patient in an outpatient setting. Because a violation of that provision would be a crime, the bill would impose a state-mandated local program.

Existing law requires the Veterinary Medical Board to establish a regular inspection program, and provides that the board is required to make every effort to inspect at least 20% of veterinary premises annually.

This bill would instead require the board to inspect at least 20% of veterinary premises annually.

~~(12)~~

(14) Existing law requires a person to meet specified requirements in order to use the title “certified common interest development manager,” and requires a certified common interest development manager to make specified disclosures to the board of directors of a common interest development before providing services to the common interest development. Existing law repeals those provisions governing certified common interest development managers on January 1, 2019.

This bill would delete the repeal provision, thereby extending those provisions indefinitely.

~~(13)~~

(15) Existing law, the Chiropractic Act, enacted by initiative, provides for the licensure and regulation of chiropractors by the State Board of Chiropractic Examiners, which is composed of 7 members appointed by the Governor, and establishes an application fee of not more than \$100 and, on and after January 1, 2019, a renewal fee of \$250. Existing law authorizes the Legislature to fix the amounts of the fees payable by applicants and licensees, and directs the deposit of these fees into the State Board of Chiropractic Examiners’ Fund, a continuously appropriated fund.

This bill would delete the provisions providing for the application and renewal fees and would instead establish a schedule of regulatory fees necessary to carry out the responsibilities required by the Chiropractic Initiative Act, including, among others, application and renewal fees for licensure, fees to apply for approval for a continuing education course, and satellite office certificate fees. By increasing

specified fees and establishing new fees for deposit into a continuously appropriated fund, the bill would make an appropriation.

~~(14)~~

(16) The bill would make technical changes to various provisions of the Business and Professions Code. The bill would also make technical changes to various provisions of the Health and Safety Code by eliminating cross-references to obsolete provisions governing cemeteries.

~~(15) The~~

(17) The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: yes. Fiscal committee: yes. State-mandated local program: yes.

The people of the State of California do enact as follows:

1 SECTION 1. Section 101 of the Business and Professions
2 Code, as added by Section 4 of Chapter 828 of the Statutes of
3 2017, is amended to read:

- 4 101. The department is comprised of the following:
- 5 (a) The Dental Board of California.
- 6 (b) The Medical Board of California.
- 7 (c) The State Board of Optometry.
- 8 (d) The California State Board of Pharmacy.
- 9 (e) The Veterinary Medical Board.
- 10 (f) The California Board of Accountancy.
- 11 (g) The California Architects Board.
- 12 (h) The State Board of Barbering and Cosmetology.
- 13 (i) The Board for Professional Engineers, Land Surveyors, and
14 Geologists.
- 15 (j) The Contractors' State License Board.
- 16 (k) The Bureau for Private Postsecondary Education.
- 17 (l) The Bureau of Electronic and Appliance Repair, Home
18 Furnishings, and Thermal Insulation.
- 19 (m) The Board of Registered Nursing.
- 20 (n) The Board of Behavioral Sciences.
- 21 (o) The State Athletic Commission.

- 1 (p) The Cemetery and Funeral Bureau.
2 (q) The Bureau of Security and Investigative Services.
3 (r) The Court Reporters Board of California.
4 (s) The Board of Vocational Nursing and Psychiatric
5 Technicians.
6 (t) The Landscape Architects Technical Committee.
7 (u) The Division of Investigation.
8 (v) The Bureau of Automotive Repair.
9 (w) The Respiratory Care Board of California.
10 (x) The Acupuncture Board.
11 (y) The Board of Psychology.
12 (z) The California Board of Podiatric Medicine.
13 (aa) The Physical Therapy Board of California.
14 (ab) The Arbitration Review Program.
15 (ac) The Physician Assistant Committee.
16 (ad) The Speech-Language Pathology and Audiology and
17 Hearing Aid Dispensers Board.
18 (ae) The California Board of Occupational Therapy.
19 (af) The Osteopathic Medical Board of California.
20 (ag) The Naturopathic Medicine Committee.
21 (ah) The Dental Hygiene Committee of California.
22 (ai) The Professional Fiduciaries Bureau.
23 (aj) The State Board of Chiropractic Examiners.
24 (ak) The Bureau of Real Estate Appraisers.
25 (al) The Structural Pest Control Board.
26 (am) The Bureau of Cannabis Control.
27 (an) Any other boards, offices, or officers subject to its
28 jurisdiction by law.
29 (ao) This section shall become operative on July 1, 2018.
30 SEC. 2. Section 101.7 of the Business and Professions Code
31 is amended to read:
32 101.7. (a) Notwithstanding any other provision of law, boards
33 shall meet at least two times each calendar year. Boards shall meet
34 at least once each calendar year in northern California and once
35 each calendar year in southern California in order to facilitate
36 participation by the public and its licensees.
37 (b) The director at his or her discretion may exempt any board
38 from the requirement in subdivision (a) upon a showing of good
39 cause that the board is not able to meet at least two times in a
40 calendar year.

1 (c) The director may call for a special meeting of the board
2 when a board is not fulfilling its duties.

3 (d) An agency within the department that is required to provide
4 a written notice pursuant to subdivision (a) of Section 11125 of
5 the Government Code, may provide that notice by regular mail,
6 email, or by both regular mail and email. An agency shall give a
7 person who requests a notice the option of receiving the notice by
8 regular mail, email, or by both regular mail and email. The agency
9 shall comply with the requester’s chosen form or forms of notice.

10 (e) An agency that plans to Web cast a meeting shall include in
11 the meeting notice required pursuant to subdivision (a) of Section
12 11125 of the Government Code a statement of the board’s intent
13 to Web cast the meeting. An agency may Web cast a meeting even
14 if the agency fails to include that statement of intent in the notice.

15 SEC. 3. Section 109.5 is added to the Business and Professions
16 Code, to read:

17 109.5. Each board comprising the department shall present and
18 vote on, in a public meeting, any concept papers, budget change
19 proposals, or any other documents planned for submission to the
20 department for a change in spending authority.

21 SEC. 4. Section 328 of the Business and Professions Code is
22 amended to read:

23 328. (a) In order to implement the Consumer Protection
24 Enforcement Initiative of 2010, the director, through the Division
25 of Investigation, shall implement “Complaint Prioritization
26 Guidelines” for boards to utilize in prioritizing their respective
27 complaint and investigative workloads. The guidelines shall be
28 used to determine the referral of complaints to the division and
29 those that are retained by the health care boards for investigation.

30 (b) Neither the Medical Board of California nor the California
31 Board of Podiatric Medicine shall be required to utilize the
32 guidelines implemented pursuant to subdivision (a).

33 (c) On or before July 1, 2019, the director shall amend the
34 guidelines implemented pursuant to subdivision (a) to include the
35 category of “allegations of serious harm to a minor” under the
36 “urgent” or “highest priority” level.

37 SEC. 5. Section 1007 is added to the Business and Professions
38 Code, to read:

39 1007. Notwithstanding any other law, the amount of regulatory
40 fees necessary to carry out the responsibilities required by the

- 1 Chiropractic Initiative Act and this chapter are fixed in the
2 following schedule:
- 3 (a) Fee to apply for a license to practice chiropractic: three
4 hundred seventy-one dollars (\$371).
 - 5 (b) Fee for initial license to practice chiropractic: one hundred
6 eighty-six dollars (\$186).
 - 7 (c) Fee to renew an active or inactive license to practice
8 chiropractic: three hundred thirteen dollars (\$313).
 - 9 (d) Fee to apply for approval as a continuing education provider:
10 eighty-four dollars (\$84).
 - 11 (e) Biennial continuing education provider renewal fee: fifty-six
12 dollars (\$56).
 - 13 (f) Fee to apply for approval of a continuing education course:
14 fifty-six dollars (\$56) per course.
 - 15 (g) Fee to apply for a satellite office certificate: sixty-two dollars
16 (\$62).
 - 17 (h) Fee to renew a satellite office certificate: thirty-one dollars
18 (\$31).
 - 19 (i) Fee to apply for a license to practice chiropractic pursuant
20 to Section 9 of the Chiropractic Initiative Act: three hundred
21 seventy-one dollars (\$371).
 - 22 (j) Fee to apply for a certificate of registration of a chiropractic
23 corporation: one hundred eighty-six dollars (\$186).
 - 24 (k) Fee to renew a certificate of registration of a chiropractic
25 corporation: thirty-one dollars (\$31).
 - 26 (l) Fee to file a chiropractic corporation special report: thirty-one
27 dollars (\$31).
 - 28 (m) Fee to apply for approval as a referral service: five hundred
29 fifty-seven dollars (\$557).
 - 30 (n) Fee for an endorsed verification of licensure: one hundred
31 twenty-four dollars (\$124).
 - 32 (o) Fee for replacement of a lost or destroyed license: fifty
33 dollars (\$50).
 - 34 (p) Fee for replacement of a satellite office certificate: fifty
35 dollars (\$50).
 - 36 (q) Fee for replacement of a certificate of registration of a
37 chiropractic corporation: fifty dollars (\$50).
 - 38 (r) Fee to restore a forfeited or canceled license to practice
39 chiropractic: double the annual renewal fee specified in subdivision
40 (c).

1 (s) Fee to apply for approval to serve as a preceptor: thirty-one
2 dollars (\$31).

3 (t) Fee to petition for reinstatement of a revoked license: three
4 hundred seventy-one dollars (\$371).

5 (u) Fee to petition for early termination of probation: three
6 hundred seventy-one dollars (\$371).

7 (v) Fee to petition for reduction of penalty: three hundred
8 seventy-one dollars (\$371).

9 *SEC. 6. Section 2064.5 of the Business and Professions Code*
10 *is amended to read:*

11 2064.5. (a) Within 180 days after enrollment in a
12 board-approved postgraduate training program pursuant to Section
13 2065, medical school graduates shall obtain a physician's and
14 surgeon's postgraduate training license. To be considered for a
15 postgraduate training license, the applicant shall submit the
16 application forms and primary source documents required by the
17 board, shall successfully pass all required licensing examinations,
18 ~~shall pay the reduced licensing fee,~~ *shall pay a nonrefundable*
19 *application and processing fee,* and shall not have committed any
20 act that would be grounds for denial.

21 (1) Each application submitted pursuant to this section shall be
22 made upon a form provided by the board, and each application
23 form shall contain a legal verification to be signed by the applicant
24 verifying under penalty of perjury that the information provided
25 by the applicant is true and correct and that any information in
26 supporting documents provided by the applicant is true and correct.

27 (2) Each application shall include the following:

28 (A) A diploma issued by a board-approved medical school. The
29 requirements of the school shall not have been less than those
30 required under this chapter at the time the diploma was granted or
31 by any preceding medical practice act at the time that the diploma
32 was granted. In lieu of a diploma, the applicant may submit
33 evidence satisfactory to the board of having possessed the same.

34 (B) An official transcript or other official evidence satisfactory
35 to the board showing each approved medical school in which a
36 resident course of professional instruction was pursued covering
37 the minimum requirements for certification as a physician and
38 surgeon, and that a diploma and degree were granted by the school.

1 (C) Other information concerning the professional instruction
2 and preliminary education of the applicant as the board may
3 require.

4 (D) An affidavit showing to the satisfaction of the board that
5 the applicant is the person named in each diploma and transcript
6 that he or she submits, that he or she is the lawful holder thereof,
7 and that the diploma or transcript was procured in the regular
8 course of professional instruction and examination without fraud
9 or misrepresentation.

10 (E) Either fingerprint cards or a copy of a completed Live Scan
11 form from the applicant in order to establish the identity of the
12 applicant and in order to determine whether the applicant has a
13 record of any criminal convictions in this state or in any other
14 jurisdiction, including foreign countries. The information obtained
15 as a result of the fingerprinting of the applicant shall be used in
16 accordance with Section 11105 of the Penal Code, and to determine
17 whether the applicant is subject to denial of licensure under the
18 provisions of Division 1.5 (commencing with Section 475) and
19 Section 2221 of this code.

20 (F) If the medical school graduate graduated from a foreign
21 medical school approved by the board pursuant to Section 2084,
22 an official Educational Commission for Foreign Medical Graduates
23 (ECFMG) Certification Status Report confirming the graduate is
24 ECFMG certified.

25 (b) The physician's and surgeon's postgraduate training license
26 shall be valid until 90 days after the holder has successfully
27 completed 36 months of board-approved postgraduate training.
28 The physician's and surgeon's postgraduate training licensee may
29 engage in the practice of medicine only in connection with his or
30 her duties as an intern or resident physician in a board-approved
31 program, including its affiliated sites, or under those conditions
32 as are approved in writing and maintained in the postgraduate
33 training licensee's file by the director of his or her program.

34 (c) The postgraduate training licensee may engage in the practice
35 of medicine in locations authorized by subdivision (b), and as
36 permitted by the Medical Practice Act and other applicable statutes
37 and regulations, including, but not limited to, the following:

38 (1) Diagnose and treat patients.

39 (2) Prescribe medications without a cosigner, including
40 prescriptions for controlled substances, if the training licensee has

1 the appropriate Drug Enforcement Agency registration/permit and
2 is registered with the Department of Justice CURES program.

3 (3) Sign birth certificates without a cosigner.

4 (4) Sign death certificates without a cosigner.

5 (d) The postgraduate training licensee may be disciplined by
6 the board at any time for any of the grounds that would subject
7 the holder of a physician's and surgeon's certificate to discipline.

8 (e) If the medical school graduate fails to obtain a postgraduate
9 training license within 180 days after enrollment in a
10 board-approved postgraduate training program or if the board
11 denies his or her application for a postgraduate training license,
12 all privileges and exemptions under this section shall automatically
13 cease.

14 (f) Each medical school graduate enrolled in a board-approved
15 postgraduate training program on January 1, 2020, shall apply for
16 and obtain a postgraduate training license by June 30, 2020, in
17 order to continue in postgraduate training pursuant to Section 2065.

18 (g) Each medical school graduate who was issued a postgraduate
19 training authorization letter by the board prior to January 1, 2020,
20 and is enrolled in a board-approved postgraduate training program
21 by April 30, 2025, will be issued a postgraduate training license
22 automatically by June 30, 2020, or by June 30 of the year following
23 initial enrollment into a board-approved postgraduate training
24 program, whichever is earlier, upon proof of enrollment in the
25 postgraduate training program.

26 (h) The board shall confidentially destroy the file of each
27 medical school graduate who was issued a postgraduate training
28 authorization letter by the board prior to January 1, 2020, who did
29 not enroll in a postgraduate training program by April 30, 2025.

30 (i) This section shall become operative on January 1, 2020.

31 *SEC. 7. Section 2065 of the Business and Professions Code,*
32 *as added by Section 29 of Chapter 775 of the Statutes of 2017, is*
33 *amended to read:*

34 2065. (a) Unless otherwise provided by law, no postgraduate
35 trainee, intern, resident, postdoctoral fellow, or instructor may
36 engage in the practice of medicine, or receive compensation
37 therefor, or offer to engage in the practice of medicine unless he
38 or she holds a valid, unrevoked, and unsuspended physician's and
39 surgeon's certificate issued by the board. However, a graduate of
40 an approved medical school may engage in the practice of medicine

1 whenever and wherever required as a part of a postgraduate training
2 program under the following conditions:

3 (1) The medical school graduate has taken and passed the
4 board-approved medical licensing examinations required to qualify
5 the applicant to participate in an approved postgraduate training
6 program.

7 (2) If the medical school graduate graduated from a foreign
8 medical school approved by the board pursuant to Section 2084,
9 the Educational Commission for Foreign Medical Graduates
10 (ECFMG) has submitted an official ECFMG Certification Status
11 Report directly to the board confirming the graduate is ECFMG
12 certified.

13 (3) The medical school graduate is enrolled in a postgraduate
14 training program approved by the board.

15 (4) The board-approved postgraduate training program has
16 submitted the required board-approved form to the board
17 documenting the medical school graduate is enrolled in an
18 approved postgraduate training program.

19 (5) The medical school graduate obtains a physician's and
20 surgeon's postgraduate training license in accordance with Section
21 2064.5.

22 (b) A medical school graduate enrolled in an approved first-year
23 postgraduate training program in accordance with this section may
24 engage in the practice of medicine whenever and wherever required
25 as a part of the training program, and may receive compensation
26 for that ~~practice not to exceed 12 months.~~ *practice.*

27 (c) A graduate who has completed the first year of postgraduate
28 training may, in an approved residency or fellowship, engage in
29 the practice of medicine whenever and wherever required as part
30 of that residency or fellowship, and may receive compensation for
31 that ~~practice not to exceed 27 months.~~ *practice.* The resident or
32 fellow shall qualify for, take, and pass the next succeeding written
33 examination for licensure. If the resident or fellow fails to receive
34 a license to practice medicine under this chapter within 27 months
35 from the commencement of the residency or ~~fellowship~~ *fellowship*,
36 *except as otherwise allowed under subdivisions (g) or (h)*, or if
37 the board denies his or her application for licensure, all privileges
38 and exemptions under this section shall automatically cease.

39 (d) All approved postgraduate training the medical school
40 graduate has successfully completed in the United States or Canada

1 shall count toward the 39-month license ~~exemption~~. *exemption,*
2 *except as otherwise allowed under subdivision (h).*

3 (e) A medical school graduate from a medical school approved
4 by the board shall have successfully completed a minimum of 36
5 months of approved postgraduate ~~training with at least 24~~
6 ~~consecutive~~ *training, which includes successful progression*
7 *through 24 months in the same program, to be eligible for a*
8 *California physician's and surgeon's certificate.*

9 (f) *The program director for an approved postgraduate training*
10 *program in California shall report to the board, on a form*
11 *approved by the board, and provide any supporting documents as*
12 *required by the board, the following actions within 30 days of the*
13 *action:*

14 (1) *A postgraduate trainee is notified that he or she has received*
15 *partial or no credit for a period of postgraduate training, and his*
16 *or her postgraduate training period is extended.*

17 (2) *A postgraduate trainee takes a leave of absence or any break*
18 *from his or her postgraduate training, and he or she is notified*
19 *that his or her postgraduate training period is extended.*

20 (3) *A postgraduate trainee is terminated from the postgraduate*
21 *training program.*

22 (4) *A postgraduate trainee resigns, dies, or otherwise leaves*
23 *the postgraduate training program.*

24 (5) *A postgraduate trainee has completed a one-year contract*
25 *approved by the postgraduate training program.*

26 (g) *Upon review of supporting documentation, the board, in its*
27 *discretion, may grant an extension beyond 39 months to a*
28 *postgraduate training licensee to successfully complete the 36*
29 *months of required approved postgraduate training.*

30 (h) *An applicant for a physician's and surgeon's license who*
31 *has successfully completed 36 months of approved postgraduate*
32 *training in another state or in Canada and who is accepted into*
33 *an approved postgraduate training in another state or in Canada*
34 *and who is accepted into an approved postgraduate training*
35 *program in California shall obtain his or her physician's and*
36 *surgeon's license within 90 days after beginning that postgraduate*
37 *training program or all privileges and exemptions under this*
38 *section shall automatically cease.*

39 (f)

40 (i) This section shall become operative on January 1, 2020.

1 *SEC. 8. Section 2135 of the Business and Professions Code,*
2 *as added by Section 64 of Chapter 775 of the Statutes of 2017, is*
3 *amended to read:*

4 2135. The board shall issue a physician and surgeon's
5 certificate to an applicant who meets all of the following
6 requirements:

7 (a) The applicant holds an unlimited license as a physician and
8 surgeon in another state or states, or in a Canadian province or
9 Canadian provinces, which was issued upon:

10 (1) Successful completion of a resident course of professional
11 instruction leading to a degree of medical doctor from a
12 board-approved medical school pursuant to Section 2084.

13 (2) Taking and passing a written examination that is recognized
14 by the board to be equivalent in content to that administered in
15 California.

16 (b) The applicant has held an unrestricted license to practice
17 medicine, in a state or states, in a Canadian province or Canadian
18 provinces, or as a member of the active military, United States
19 Public Health Services, or other federal program, for a period of
20 at least four years. Any time spent by the applicant in an approved
21 postgraduate training program or clinical fellowship acceptable to
22 the board shall not be included in the calculation of this four-year
23 period.

24 (c) The board determines that no disciplinary action has been
25 taken against the applicant by any medical licensing authority and
26 that the applicant has not been the subject of adverse judgments
27 or settlements resulting from the practice of medicine that the
28 board determines constitutes evidence of a pattern of negligence
29 or incompetence.

30 (d) The applicant *(1)* has satisfactorily completed at least one
31 year of approved postgraduate training and is certified by a
32 specialty board approved by the American Board of Medical
33 Specialties or approved by the board pursuant to subdivision (h)
34 of ~~Section 654~~ 651, *(2) has satisfactorily completed at least two*
35 *years of approved postgraduate training, or (3) has satisfactorily*
36 *completed at least one year of approved postgraduate training*
37 *and takes and passes the clinical competency written examination.*

38 (e) The applicant has not committed any acts or crimes
39 constituting grounds for denial of a certificate under Division 1.5

1 (commencing with Section 475) or Article 12 (commencing with
2 Section 2220).

3 (f) Any application received from an applicant who has held an
4 unrestricted license to practice medicine, in a state or states, or
5 Canadian province or Canadian provinces, or as a member of the
6 active military, United States Public Health Services, or other
7 federal program for four or more years shall be reviewed and
8 processed pursuant to this section. Any time spent by the applicant
9 in an approved postgraduate training program or clinical fellowship
10 acceptable to the board shall not be included in the calculation of
11 this four-year period. This subdivision does not apply to
12 applications that may be reviewed and processed pursuant to
13 Section 2151.

14 (g) This section shall become operative on January 1, 2020.

15 ~~SEC. 6.~~

16 *SEC. 9.* Section 2499.5 of the Business and Professions Code
17 is amended to read:

18 2499.5. The following fees apply to certificates to practice
19 podiatric medicine. The amount of fees prescribed for doctors of
20 podiatric medicine shall be determined by the board and shall be
21 as described below. Fees collected pursuant to this section shall
22 be fixed by the board in amounts not to exceed the actual costs of
23 providing the service for which the fee is collected.

24 (a) Each applicant for a certificate to practice podiatric medicine
25 shall pay an application fee of one hundred dollars (\$100) at the
26 time the application is filed. If the applicant qualifies for a
27 certificate, he or she shall pay a fee of one hundred dollars (\$100).

28 (b) Each applicant who qualifies for a certificate, as a condition
29 precedent to its issuance, in addition to other fees required by this
30 section, shall pay an initial license fee. The initial license fee shall
31 be eight hundred dollars (\$800). The initial license shall expire
32 the second year after its issuance on the last day of the month of
33 birth of the licensee. The board may reduce the initial license fee
34 by up to 50 percent of the amount of the fee for any applicant who
35 is enrolled in a postgraduate training program approved by the
36 board or who has completed a postgraduate training program
37 approved by the board within six months prior to the payment of
38 the initial license fee.

39 (c) Before January 1, 2021, the biennial renewal fee shall be
40 one thousand one hundred dollars (\$1,100). Any licensee enrolled

1 in an approved residency program shall be required to pay only
2 50 percent of the biennial renewal fee at the time of his or her first
3 renewal.

4 (d) On and after January 1, 2021, the biennial renewal fee shall
5 be nine hundred dollars (\$900). Any licensee enrolled in an
6 approved residency program shall be required to pay only 50
7 percent of the biennial renewal fee at the time of his or her first
8 renewal.

9 (e) The delinquency fee shall be one hundred fifty dollars
10 (\$150).

11 (f) The duplicate wall certificate fee shall be one hundred dollars
12 (\$100).

13 (g) The duplicate renewal receipt fee shall be fifty dollars (\$50).

14 (h) The endorsement fee shall be thirty dollars (\$30).

15 (i) The letter of good standing fee or for loan deferment shall
16 be one hundred dollars (\$100).

17 (j) There shall be a fee of one hundred dollars (\$100) for the
18 issuance of a resident's license under Section 2475.

19 (k) The fee for approval of a continuing education course or
20 program shall be two hundred fifty dollars (\$250).

21 *SEC. 10. Section 2529.6 of the Business and Professions Code*
22 *is amended to read:*

23 2529.6. (a) Except as provided in subdivisions (b) and (c), the
24 board shall revoke the registration of any person who has been
25 required to register as a sex offender pursuant to Section 290 of
26 the Penal Code for conduct that occurred on or after January 1,
27 2017.

28 (b) This section shall not apply to a person who is required to
29 register as a sex offender pursuant to Section 290 of the Penal
30 Code solely because of a misdemeanor conviction under Section
31 314 of the Penal Code.

32 (c) This section shall not apply to a person who has been relieved
33 under Section 290.5 of the Penal Code of his or her duty to register
34 as a sex offender, or whose duty to register has otherwise been
35 formally terminated under California law.

36 (d) A proceeding to revoke a registration pursuant to this section
37 shall be conducted in accordance with Chapter 5 (commencing
38 with Section 11500) of Part 1 of Division 3 of Title 2 of the
39 Government Code.

1 (e) This section shall become inoperative on January 1, ~~2019,~~
2 2022, and shall be repealed as of that date.

3 ~~SEC. 7.~~

4 *SEC. 11.* Section 2708 of the Business and Professions Code
5 is amended to read:

6 2708. (a) The board shall appoint an executive officer who
7 shall perform the duties delegated by the board and who shall be
8 responsible to it for the accomplishment of those duties.

9 (b) The executive officer shall be a nurse currently licensed
10 under this chapter and shall possess other qualifications as
11 determined by the board.

12 (c) The executive officer shall not be a member of the board.

13 (d) The executive ~~director~~ *officer* is authorized to adopt a
14 decision entered by default and a stipulation for surrender of a
15 license.

16 (e) This section shall remain in effect only until January 1, 2022,
17 and as of that date is repealed, unless a later enacted statute, that
18 is enacted before January 1, 2022, deletes or extends that date.

19 ~~SEC. 8.~~

20 *SEC. 12.* Section 2715 of the Business and Professions Code
21 is amended to read:

22 2715. (a) The board shall prosecute all persons guilty of
23 violating this chapter.

24 (b) Except as provided by Section 159.5, the board, in
25 accordance with the Civil Service Law, may employ personnel as
26 it deems necessary to carry into effect this chapter. The board shall
27 directly employ legal counsel, who shall work exclusively for, and
28 report directly to, the board upon a finding by the board that
29 directly employing legal counsel will further the board's mission.

30 (c) The board shall have and use a seal bearing the name "Board
31 of Registered Nursing." The board may adopt, amend, or repeal,
32 in accordance with the Administrative Procedure Act (Chapter 3.5
33 (commencing with Section 11340) of Part 1 of Division 3 of Title
34 2 of the Government Code), the rules and regulations that may be
35 reasonably necessary to enable it to carry into effect this chapter.

36 ~~SEC. 9.~~

37 *SEC. 13.* Section 2816 of the Business and Professions Code
38 is amended to read:

39 2816. The nonrefundable fee to be paid by a registered nurse
40 for an evaluation of his or her qualifications to use the title "public

1 health nurse” shall not be less than three hundred dollars (\$300)
2 or more than one thousand dollars (\$1,000). The fee to be paid
3 upon the application for renewal of the certificate to practice as a
4 public health nurse shall not be less than one hundred twenty-five
5 dollars (\$125) and not more than five hundred dollars (\$500). The
6 penalty fee for failure to renew a certificate to practice as a public
7 health nurse within the prescribed time shall be 50 percent of the
8 renewal fee in effect on the date of renewal of the certificate, but
9 not less than sixty-two dollars and fifty cents (\$62.50), and not
10 more than two hundred fifty dollars (\$250). All fees payable under
11 this section shall be collected by and paid to the Board of
12 Registered Nursing Fund. It is the intention of the Legislature that
13 the costs of carrying out the purposes of this article shall be covered
14 by the revenue collected pursuant to this section. The board shall
15 refund any registered nurse who paid more than three hundred
16 dollars (\$300) for an evaluation of his or her qualifications to use
17 the title “public health nurse” between April 5, 2018, and December
18 31, 2018.

19 ~~SEC. 10.~~

20 *SEC. 14.* Section 2892.6 of the Business and Professions Code
21 is amended to read:

22 2892.6. The board shall collect an initial approval fee and a
23 biennial renewal fee of one hundred fifty dollars (\$150) unless a
24 higher fee, not to exceed two hundred fifty dollars (\$250), is
25 established by the board, from any provider of a course in
26 continuing education who requests approval by the board of such
27 course for purposes of continuing education requirements under
28 this chapter. That fee, however, shall in no event exceed that cost
29 required for the board to administer the approval of continuing
30 education courses by continuing education providers.

31 ~~SEC. 11.~~

32 *SEC. 15.* Section 2892.7 is added to the Business and
33 Professions Code, to read:

34 2892.7. The board shall collect an initial approval and a biennial
35 renewal fee in the amount of one hundred fifty dollars (\$150)
36 unless a higher fee, not to exceed two hundred fifty dollars (\$250),
37 is established by the board, from any provider of a course in
38 intravenous therapy, blood withdrawal, or intravenous therapy
39 with blood withdrawal, who requests approval by the board of
40 such a course for purposes of intravenous therapy, blood

1 withdrawal, or intravenous therapy with blood withdrawal
2 requirements under this chapter. That fee, however, shall not
3 exceed the regulatory cost required for the board to administer the
4 approval of intravenous therapy, blood withdrawal, or intravenous
5 therapy with blood withdrawal courses by intravenous therapy,
6 blood withdrawal, or intravenous therapy with blood withdrawal
7 providers.

8 ~~SEC. 12.~~

9 *SEC. 16.* Section 2895 of the Business and Professions Code
10 is amended to read:

11 2895. The amount of the fees prescribed by this chapter in
12 connection with the issuance of licenses under its provisions shall
13 be according to the following schedule:

14 (a) The fee to be paid upon the filing of an application for
15 licensure by examination by applicants who have successfully
16 completed a prescribed course of study in a California-approved
17 vocational nursing program shall be two hundred twenty dollars
18 (\$220) unless a higher fee, not to exceed three hundred dollars
19 (\$300), is established by the board.

20 (b) The fee to be paid upon the filing of an application for
21 licensure by examination by applicants who are qualified to take
22 the examination by methods other than as specified in subdivision
23 (a) shall be two hundred fifty dollars (\$250) unless a higher fee,
24 not to exceed three hundred thirty dollars (\$330), is established
25 by the board.

26 (c) The fee to be paid upon the filing of an application for
27 licensure by endorsement shall be two hundred twenty dollars
28 (\$220) unless a higher fee, not to exceed three hundred dollars
29 (\$300), is established by the board.

30 (d) The fee to be paid for taking each examination for licensure
31 shall be the actual cost to purchase the examination from a vendor
32 approved by the board.

33 (e) The fee to be paid for any examination for licensure after
34 the first shall be two hundred twenty dollars (\$220) unless a higher
35 fee, not to exceed three hundred dollars (\$300), is established by
36 the board.

37 (f) The biennial renewal fee to be paid upon the filing of an
38 application for renewal shall be two hundred twenty dollars (\$220)
39 unless a higher fee, not to exceed three hundred dollars (\$300), is
40 established by the board. In addition, an assessment of five dollars

1 (\$5) shall be collected and credited to the Vocational Nurse
2 Education Fund, pursuant to Section 2895.5.

3 (g) Notwithstanding Section 163.5, the delinquency fee for
4 failure to pay the biennial renewal fee within the prescribed time
5 shall be one hundred ten dollars (\$110) unless a higher fee, not to
6 exceed 50 percent of the regular renewal fee and in no case no
7 more than one hundred fifty dollars (\$150), is established by the
8 board.

9 (h) The initial license fee is an amount equal to the biennial
10 renewal fee in effect on the date the application for the license is
11 filed.

12 (i) The fee to be paid for an interim permit shall be twenty
13 dollars (\$20) unless a higher fee, not to exceed fifty dollars (\$50),
14 is established by the board.

15 (j) *The fee to be paid for a duplicate license or wall certificate*
16 *shall be in an amount not less than twenty-five dollars (\$25) and*
17 *may be fixed by the board at an amount no more than fifty dollars*
18 *(\$50).*

19 (~~j~~)

20 (k) The fee to be paid for verification of licensure papers to
21 other states shall be one hundred dollars (\$100) unless a higher
22 fee, not to exceed one hundred fifty dollars (\$150), is established
23 by the board.

24 (~~k~~)

25 (l) The fee to be paid for postlicensure certification in
26 intravenous therapy, blood withdrawal, or intravenous therapy
27 with blood withdrawal shall be twenty dollars (\$20) unless a higher
28 fee, not to exceed fifty dollars (\$50), is established by the board.

29 No further fee shall be required for a license or a renewal thereof
30 other than as prescribed by this chapter.

31 ~~SEC. 13.~~

32 *SEC. 17.* Section 3047 of the Business and Professions Code
33 is amended to read:

34 3047. (a) The board shall develop an interface with the
35 National Practitioner Data Bank for the purpose of conducting
36 inquiries on applicants for licensure, applicants for renewal of
37 licensure, and current licensees.

38 (b) The board shall limit its inquiries to both of the following:

39 (1) Whether an applicant or current licensee has been subject
40 to discipline.

1 (2) Whether an applicant or current licensee has been the subject
2 of an action required to be reported to the National Practitioner
3 Data Bank by federal law.

4 (c) On and after July 1, 2018, the board shall charge, in addition
5 to the fees in Section 3152, an applicant for licensure and an
6 applicant for renewal of licensure four dollars (\$4) for the purposes
7 of this section.

8 ~~SEC. 14.~~

9 *SEC. 18.* Section 3147 of the Business and Professions Code
10 is amended to read:

11 3147. (a) Except as otherwise provided by Section 114, an
12 expired optometrist license may be renewed at any time within
13 three years after its expiration, and a retired license issued for less
14 than three years may be reactivated to active status, by filing an
15 application for renewal or reactivation on a form prescribed by the
16 board, paying all accrued and unpaid renewal fees or reactivation
17 fees determined by the board, paying any delinquency fees
18 prescribed by the board, and submitting proof of completion of
19 the required number of hours of continuing education for the last
20 two years, as prescribed by the board pursuant to Section 3059.
21 Renewal or reactivation to active status under this section shall be
22 effective on the date on which all of those requirements are
23 satisfied. If so renewed or reactivated to active status, the license
24 shall continue as provided in Sections 3146 and 3147.5.

25 (b) Expired statements of licensure, branch office licenses, and
26 fictitious name permits issued pursuant to Sections 3070, 3077,
27 and 3078, respectively, may be renewed at any time by filing an
28 application for renewal, paying all accrued and unpaid renewal
29 fees, and paying any delinquency fees prescribed by the board.

30 ~~SEC. 15.~~

31 *SEC. 19.* Section 3680 of the Business and Professions Code
32 is amended to read:

33 3680. (a) The application fee for a doctor of naturopathic
34 medicine shall be no more than five hundred dollars (\$500) and
35 may be increased to not more than six hundred dollars (\$600).

36 (b) The initial license fee shall be one thousand dollars (\$1,000)
37 and may be increased to not more than one thousand two hundred
38 dollars (\$1,200).

1 (c) The renewal fee for a license shall be one thousand dollars
2 (\$1,000) and may be increased to not more than one thousand two
3 hundred dollars (\$1,200).

4 (d) The late renewal fee for a license shall be two hundred
5 twenty-five dollars (\$225).

6 (e) The fee for processing fingerprint cards shall be the current
7 fee charged by the Department of Justice.

8 (f) The fee for a duplicate or replacement license shall be
9 thirty-eight dollars (\$38).

10 (g) The fee for a certified license verification shall be thirty
11 dollars (\$30).

12 ~~SEC. 16.~~

13 *SEC. 20.* Section 4008 of the Business and Professions Code
14 is amended to read:

15 4008. (a) (1) Except as provided by Section 159.5, the board
16 may employ inspectors of pharmacy. The inspectors, whether the
17 inspectors are employed by the board or the department's Division
18 of Investigation, may inspect during business hours all pharmacies,
19 wholesalers, dispensaries, stores, or places where drugs or devices
20 are compounded, prepared, furnished, dispensed, or stored.

21 (2) The board shall directly employ legal counsel, who shall
22 work exclusively for, and report directly to, the board, upon a
23 finding by the board that directly employing legal counsel will
24 further the board's mission.

25 (b) Notwithstanding subdivision (a), a pharmacy inspector may
26 inspect or examine a physician's office or clinic that does not have
27 a permit under Section 4180 or 4190 only to the extent necessary
28 to determine compliance with and to enforce either Section 4080
29 or 4081.

30 (c) (1) (A) A pharmacy inspector employed by the board or in
31 the department's Division of Investigation shall have the authority,
32 as a public officer, to arrest, without warrant, any person whenever
33 the officer has reasonable cause to believe that the person to be
34 arrested has, in his or her presence, violated a provision of this
35 chapter or of Division 10 (commencing with Section 11000) of
36 the Health and Safety Code.

37 (B) If the violation is a felony, or if the arresting officer has
38 reasonable cause to believe that the person to be arrested has
39 violated any provision that is declared to be a felony, although no
40 felony has in fact been committed, he or she may make an arrest

1 although the violation or suspected violation did not occur in his
2 or her presence.

3 (2) In any case in which an arrest authorized by this subdivision
4 is made for an offense declared to be a misdemeanor, and the
5 person arrested does not demand to be taken before a magistrate,
6 the arresting inspector may, instead of taking the person before a
7 magistrate, follow the procedure prescribed by Chapter 5C
8 (commencing with Section 853.5) of Title 3 of Part 2 of the Penal
9 Code. That chapter shall thereafter apply with reference to any
10 proceeding based upon the issuance of a citation pursuant to this
11 authority.

12 (d) There shall be no civil liability on the part of, and no cause
13 of action shall arise against, a person, acting pursuant to subdivision
14 (a) within the scope of his or her authority, for false arrest or false
15 imprisonment arising out of an arrest that is lawful, or that the
16 arresting officer, at the time of the arrest, had reasonable cause to
17 believe was lawful. An inspector shall not be deemed an aggressor
18 or lose his or her right to self-defense by the use of reasonable
19 force to effect the arrest, to prevent escape, or to overcome
20 resistance.

21 (e) Any inspector may serve all processes and notices throughout
22 the state.

23 (f) A pharmacy inspector employed by the board may enter a
24 facility licensed pursuant to subdivision (c) or (d) of Section 1250
25 of the Health and Safety Code to inspect an automated drug
26 delivery system operated pursuant to Section 4119 or 4119.1.

27 ~~SEC. 17.~~

28 *SEC. 21.* Section 4518 of the Business and Professions Code
29 is amended to read:

30 4518. In the event the board adopts a continuing education or
31 blood withdrawal program, the board shall collect an initial
32 approval and a biennial renewal fee as prescribed under Sections
33 4548 and 4518.1 from any provider of a course in continuing
34 education or blood withdrawal who requests approval by the board
35 of the course for purposes of continuing education or blood
36 withdrawal requirements adopted by the board. The fee, however,
37 shall in no event exceed the cost required for the board to
38 administer the approval of continuing education or blood
39 withdrawal courses by continuing education or blood withdrawal
40 providers.

1 ~~SEC. 18.~~

2 *SEC. 22.* Section 4518.1 is added to the Business and
3 Professions Code, to read:

4 4518.1. The board shall collect an initial approval and a biennial
5 renewal fee in the amount of one hundred fifty dollars (\$150)
6 unless a higher fee, not to exceed two hundred fifty dollars (\$250),
7 is established by the board, from any provider of continuing
8 education or a course to meet the certification requirements for
9 blood withdrawal who requests approval by the board of the course
10 for purposes of continuing education or blood withdrawal
11 requirements under this chapter. That fee, however, shall not
12 exceed the regulatory cost required for the board to administer the
13 approval of continuing education or blood withdrawal by
14 continuing education or blood withdrawal providers.

15 ~~SEC. 19.~~

16 *SEC. 23.* Section 4548 of the Business and Professions Code
17 is amended to read:

18 4548. The amount of the fees prescribed by this chapter in
19 connection with the issuance of licenses under its provisions shall
20 be according to the following schedule:

21 (a) The fee to be paid upon the filing of an application for
22 licensure by examination by applicants who have successfully
23 completed a prescribed course of study in a California-approved
24 school for preparation of psychiatric technicians shall be two
25 hundred sixty-five dollars (\$265) unless a higher fee, not to exceed
26 three hundred forty-five dollars (\$345), is established by the board.

27 (b) The fee to be paid upon the filing of an application for
28 licensure by examination by applicants who are qualified to take
29 the examination by methods other than as described in subdivision
30 (a) shall be two hundred ninety-five dollars (\$295) unless a higher
31 fee, not to exceed three hundred seventy-five dollars (\$375), is
32 established by the board.

33 (c) The fee to be paid upon the filing of an application for
34 licensure by endorsement shall be two hundred twenty dollars
35 (\$220) unless a higher fee, not to exceed three hundred dollars
36 (\$300), is established by the board.

37 (d) The fee to be paid for taking each examination for licensure
38 shall be the actual cost to purchase an examination from a vendor
39 approved by the board.

1 (e) The fee to be paid for any examination for licensure after
2 the first shall be two hundred sixty-five dollars (\$265) unless a
3 higher fee, not to exceed three hundred forty-five dollars (\$345),
4 is established by the board.

5 (f) The biennial renewal fee to be paid upon the filing of an
6 application for renewal shall be two hundred twenty dollars (\$220)
7 unless a higher fee, not to exceed three hundred dollars (\$300), is
8 established by the board.

9 (g) Notwithstanding Section 163.5, the delinquency fee for
10 failure to pay the biennial renewal fee within the prescribed time
11 shall be one hundred ten dollars (\$110) unless a higher fee, not to
12 exceed 50 percent of the regular renewal fee and in no case more
13 than one hundred fifty dollars (\$150), is established by the board.

14 (h) The initial license fee is an amount equal to the biennial
15 renewal fee in effect on the date the application for the license is
16 filed.

17 (i) The fee to be paid for an interim permit shall be twenty
18 dollars (\$20) unless a higher fee, not to exceed fifty dollars (\$50),
19 is established by the board.

20 (j) *The fee to be paid for a duplicate license or wall certificate*
21 *shall be in an amount not less than twenty-five dollars (\$25) and*
22 *may be fixed by the board at an amount no more than fifty dollars*
23 *(\$50).*

24 (j)

25 (k) The fee to be paid for processing verification of licensure
26 papers to other states shall be twenty dollars (\$20) unless a higher
27 fee, not to exceed fifty dollars (\$50), is established by the board.

28 (k)

29 (l) The fee to be paid for postlicensure certification in blood
30 withdrawal shall be twenty dollars (\$20) unless a higher fee, not
31 to exceed fifty dollars (\$50), is established by the board.

32 ~~SEC. 20.~~

33 *SEC. 24.* Section 4604 of the Business and Professions Code
34 is amended to read:

35 4604. (a) In order to obtain certification as a massage therapist,
36 an applicant shall submit a written application and provide the
37 council with satisfactory evidence that he or she meets all of the
38 following requirements:

39 (1) The applicant is 18 years of age or older.

1 (2) The applicant has successfully completed the curricula in
2 massage and related subjects totaling a minimum of 500 hours, or
3 the credit unit equivalent, that incorporates appropriate school
4 assessment of student knowledge and skills.

5 (A) Of the 500 hours, a minimum of 100 hours of instruction
6 shall address anatomy and physiology, contraindications, health
7 and hygiene, and business and ethics.

8 (B) All of the 500 hours shall be from approved schools. The
9 council shall accept the 500 hours if, at the time all of the hours
10 were completed, the school or schools were approved. The 500
11 hours may be completed at more than one approved school.
12 Notwithstanding any other law, pursuant to its policies and
13 procedures for approval of schools, the council shall accept hours
14 earned by an applicant for certification as a massage therapist if
15 those hours were completed before July 1, 2016, and were earned
16 from a school providing education in this state that was unapproved
17 by the council after July 1, 2016, based solely on the fact that the
18 National Certification Board for Therapeutic Massage and
19 Bodywork took denial or disciplinary action against the school.
20 For purposes of this section, “unapproved” means that the council
21 determined that it will not accept hours from a school toward
22 certification.

23 (3) The applicant has passed a massage and bodywork
24 competency assessment examination that meets generally
25 recognized psychometric principles and standards and that is
26 approved by the council. The successful completion of this
27 examination may have been accomplished before the date the
28 council is authorized by this chapter to begin issuing certificates.
29 This paragraph shall be inoperative commencing on January 1,
30 2019, and shall become operative on January 1, 2021.

31 (4) The applicant has successfully passed a background
32 investigation pursuant to Section 4606, and has not violated any
33 of the provisions of this chapter.

34 (5) All fees required by the council have been paid.

35 (6) The council may issue a certificate to an applicant who meets
36 the qualifications of this chapter if he or she holds a current and
37 valid registration, certification, or license from any other state
38 whose licensure requirements meet or exceed those defined within
39 this chapter. If an applicant has received education at a school that
40 is not approved by the council, the council shall have the discretion

1 to give credit for comparable academic work completed by an
2 applicant in a program outside of California.

3 (b) A certificate issued pursuant to this chapter and any
4 identification card issued by the council shall be surrendered to
5 the council by any certificate holder whose certificate is suspended
6 or revoked.

7 ~~SEC. 21.~~

8 *SEC. 25.* Section 4809.7 of the Business and Professions Code
9 is amended to read:

10 4809.7. The board shall establish a regular inspection program
11 that will provide for random, unannounced inspections and the
12 board shall inspect at least 20 percent of veterinary premises on
13 an annual basis.

14 ~~SEC. 22.~~

15 *SEC. 26.* Section 4826.4 is added to the Business and
16 Professions Code, to read:

17 4826.4. (a) A California-licensed veterinarian at premises
18 registered in accordance with Section 4853 that is located within
19 a 25-mile radius of any condition of emergency specified in Section
20 8558 of the Government Code may, in good faith, do both of the
21 following in addition to any other acts authorized by law:

22 (1) Render necessary and prompt care and treatment to an animal
23 patient without establishing a veterinarian-client-patient
24 relationship if conditions are such that one cannot be established
25 in a timely manner.

26 (2) Dispense or prescribe a dangerous drug or device, as defined
27 in Section 4022, in reasonable quantities where failure to provide
28 services or medications, including controlled substances, may
29 result in loss of life or intense suffering of the animal patient. Prior
30 to refilling a prescription pursuant to this paragraph, the
31 veterinarian shall make a reasonable effort to contact the originally
32 prescribing veterinarian.

33 (b) A veterinarian acting under this section shall make an
34 appropriate record that includes the basis for proceeding under
35 this section.

36 (c) A veterinarian who performs services pursuant to this section
37 shall have immunity from liability pursuant to subdivision (b) of
38 Section 8659 of the Government Code.

1 ~~SEC. 23.~~

2 *SEC. 27.* Section 4829.5 is added to the Business and
3 Professions Code, to read:

4 4829.5. (a) Each time a veterinarian initially prescribes,
5 dispenses, or furnishes a dangerous drug, as defined in Section
6 4022, to an animal patient in an outpatient setting, the veterinarian
7 shall offer to provide, in person or through electronic means, to
8 the client responsible for the animal, or his or her agent, a
9 consultation that includes the following information:

- 10 (1) The name and description of the dangerous drug.
- 11 (2) Route of administration, dosage form, dosage, duration of
12 drug therapy, the duration of the effect of the drug, and the common
13 severe adverse effects associated with the use of a short-acting or
14 long-acting drug.
- 15 (3) Any special directions for proper use and storage.
- 16 (4) Actions to be taken in the event of a missed dose.
- 17 (5) If available, precautions and relevant warnings provided by
18 the drug’s manufacturer, including common severe adverse effects
19 of the drug.
- 20 (b) If requested, a veterinarian shall provide drug documentation,
21 if available.
- 22 (c) A veterinarian may delegate to a registered veterinary
23 technician or veterinary assistant the task of providing the
24 consultation and drug documentation required by this section.
- 25 (d) It shall be noted in the medical record of the animal patient
26 if the consultation described in this section is provided or declined
27 by the client or his or her agent.

28 ~~SEC. 24.~~

29 *SEC. 28.* Section 4830 of the Business and Professions Code
30 is amended to read:

- 31 4830. (a) This chapter does not apply to:
- 32 (1) Veterinarians while serving in any armed branch of the
33 military service of the United States or the United States
34 Department of Agriculture while actually engaged and employed
35 in their official capacity.
- 36 (2) Veterinarians holding a current, valid license in good
37 standing in another state or country who provide assistance to a
38 California-licensed veterinarian and attend on a specific case. The
39 California-licensed veterinarian shall maintain a valid
40 veterinarian-client-patient relationship. The veterinarian providing

1 the assistance shall not establish a veterinarian-client-patient
2 relationship with the client by attending the case or at a future time
3 and shall not practice veterinary medicine, open an office, appoint
4 a place to meet patients, communicate with clients who reside
5 within the limits of this state, give orders, or have ultimate authority
6 over the care or primary diagnosis of a patient that is located within
7 this state.

8 (3) Veterinarians called into the state by a law enforcement
9 agency or animal control agency pursuant to subdivision (b).

10 (4) A student of a veterinary medical program accredited by the
11 American Veterinary Medical Association Council on Education
12 who participates as part of his or her formal curriculum in the
13 diagnosis and treatment with direct supervision, or in surgery with
14 immediate supervision, provided all of the following requirements
15 are met:

16 (A) The clinical training site has been approved by the university
17 where the student is enrolled.

18 (B) The student has prior training in diagnosis, treatment, and
19 surgery as part of the formal curriculum.

20 (C) The student is being supervised by a California-licensed
21 veterinarian in good standing, as that term is defined in paragraph
22 (1) of subdivision (b) of Section 4848.

23 (5) A veterinarian who is employed by the Meat and Poultry
24 Inspection Branch of the California Department of Food and
25 Agriculture while actually engaged and employed in his or her
26 official capacity. A person exempt under this paragraph shall not
27 otherwise engage in the practice of veterinary medicine unless he
28 or she is issued a license by the board.

29 (6) Unlicensed personnel employed by the Department of Food
30 and Agriculture or the United States Department of Agriculture
31 when in the course of their duties they are directed by a veterinarian
32 supervisor to conduct an examination, obtain biological specimens,
33 apply biological tests, or administer medications or biological
34 products as part of government disease or condition monitoring,
35 investigation, control, or eradication activities.

36 (b) (1) For purposes of paragraph (3) of subdivision (a), a
37 regularly licensed veterinarian in good standing who is called from
38 another state by a law enforcement agency or animal control
39 agency, as defined in Section 31606 of the Food and Agricultural
40 Code, to attend to cases that are a part of an investigation of an

1 alleged violation of federal or state animal fighting or animal
2 cruelty laws within a single geographic location shall be exempt
3 from the licensing requirements of this chapter if the law
4 enforcement agency or animal control agency determines that it
5 is necessary to call the veterinarian in order for the agency or
6 officer to conduct the investigation in a timely, efficient, and
7 effective manner. In determining whether it is necessary to call a
8 veterinarian from another state, consideration shall be given to the
9 availability of veterinarians in this state to attend to these cases.
10 An agency, department, or officer that calls a veterinarian pursuant
11 to this subdivision shall notify the board of the investigation.

12 (2) Notwithstanding any other provision of this chapter, a
13 regularly licensed veterinarian in good standing who is called from
14 another state to attend to cases that are a part of an investigation
15 described in paragraph (1) may provide veterinary medical care
16 for animals that are affected by the investigation with a temporary
17 shelter facility, and the temporary shelter facility shall be exempt
18 from the registration requirement of Section 4853 if all of the
19 following conditions are met:

20 (A) The temporary shelter facility is established only for the
21 purpose of the investigation.

22 (B) The temporary shelter facility provides veterinary medical
23 care, shelter, food, and water only to animals that are affected by
24 the investigation.

25 (C) The temporary shelter facility complies with Section 4854.

26 (D) The temporary shelter facility exists for not more than 60
27 days, unless the law enforcement agency or animal control agency
28 determines that a longer period of time is necessary to complete
29 the investigation.

30 (E) Within 30 calendar days upon completion of the provision
31 of veterinary health care services at a temporary shelter facility
32 established pursuant to this section, the veterinarian called from
33 another state by a law enforcement agency or animal control agency
34 to attend to a case shall file a report with the board. The report
35 shall contain the date, place, type, and general description of the
36 care provided, along with a listing of the veterinary health care
37 practitioners who participated in providing that care.

38 (c) For purposes of paragraph (3) of subdivision (a), the board
39 may inspect temporary facilities established pursuant to this
40 section.

1 ~~SEC. 25.~~

2 *SEC. 29.* Section 4836.2 of the Business and Professions Code
3 is amended to read:

4 4836.2. (a) Applications for a veterinary assistant controlled
5 substance permit shall be upon a form furnished by the board.

6 (b) The fee for filing an application for a veterinary assistant
7 controlled substance permit shall be set by the board in an amount
8 the board determines is reasonably necessary to provide sufficient
9 funds to carry out the purposes of this section, not to exceed one
10 hundred dollars (\$100).

11 (c) The board may suspend or revoke the controlled substance
12 permit of a veterinary assistant after notice and hearing for any
13 cause provided in this subdivision. The proceedings under this
14 section shall be conducted in accordance with the provisions for
15 administrative adjudication in Chapter 5 (commencing with Section
16 11500) of Part 1 of Division 3 of Title 2 of the Government Code,
17 and the board shall have all the powers granted therein. The board
18 may deny, revoke, or suspend a veterinary assistant controlled
19 substance permit, or, subject to terms and conditions deemed
20 appropriate by the board, issue a probationary veterinary assistant
21 controlled substance permit, for any of the following reasons:

22 (1) The employment of fraud, misrepresentation, or deception
23 in obtaining a veterinary assistant controlled substance permit.

24 (2) Chronic inebriety or habitual use of controlled substances.

25 (3) The applicant or permitholder has been convicted of a state
26 or federal felony controlled substance violation.

27 (4) Violating or attempts to violate, directly or indirectly, or
28 assisting in or abetting the violation of, or conspiring to violate,
29 any provision of this chapter, or of the regulations adopted under
30 this chapter.

31 (5) Conviction of a crime substantially related to the
32 qualifications, functions, or duties of veterinary medicine,
33 veterinary surgery, or veterinary dentistry, in which case the record
34 of the conviction shall be conclusive evidence.

35 (d) The board shall not issue a veterinary assistant controlled
36 substance permit to any applicant with a state or federal felony
37 controlled substance conviction.

38 (e) (1) As part of the application for a veterinary assistant
39 controlled substance permit, the applicant shall submit to the
40 Department of Justice fingerprint images and related information,

1 as required by the Department of Justice for all veterinary assistant
2 applicants, for the purposes of obtaining information as to the
3 existence and content of a record of state or federal convictions
4 and state or federal arrests and information as to the existence and
5 content of a record of state or federal arrests for which the
6 Department of Justice establishes that the person is free on bail or
7 on his or her own recognizance pending trial or appeal.

8 (2) When received, the Department of Justice shall forward to
9 the Federal Bureau of Investigation requests for federal summary
10 criminal history information that it receives pursuant to this section.
11 The Department of Justice shall review any information returned
12 to it from the Federal Bureau of Investigation and compile and
13 disseminate a response to the board summarizing that information.

14 (3) The Department of Justice shall provide a state or federal
15 level response to the board pursuant to paragraph (1) of subdivision
16 (p) of Section 11105 of the Penal Code.

17 (4) The Department of Justice shall charge a reasonable fee
18 sufficient to cover the cost of processing the request described in
19 this subdivision.

20 (f) The board shall request from the Department of Justice
21 subsequent notification service, as provided pursuant to Section
22 11105.2 of the Penal Code, for persons described in paragraph (1)
23 of subdivision (e).

24 (g) This section shall become operative on July 1, 2015.

25 ~~SEC. 26.~~

26 *SEC. 30.* Section 4841.2 is added to the Business and
27 Professions Code, to read:

28 4841.2. (a) Except as provided in subdivision (b), a graduate
29 of a recognized veterinary college shall not perform animal health
30 care tasks otherwise performed by a registered veterinary technician
31 unless the graduate has obtained licensure or registration as
32 otherwise required under this chapter.

33 (b) If, on or before January 1, 2020, a graduate of a recognized
34 veterinary college has performed animal health care tasks otherwise
35 performed by a registered veterinary technician, the graduate shall
36 discontinue performing such duties on or after January 1, 2020,
37 unless the graduate is issued a license or registration as otherwise
38 required under this chapter.

39 ~~SEC. 27. Section 4990.06 of the Business and Professions~~
40 ~~Code is amended to read:~~

1 ~~4990.06. Subject to the State Civil Service Act (Part 2~~
2 ~~(commencing with Section 18500) of Division 5 of Title 2 of the~~
3 ~~Government Code) and except as provided by Sections 155, 156,~~
4 ~~and 159.5, the board may employ any clerical, technical, and other~~
5 ~~personnel as it deems necessary to carry out the provisions of this~~
6 ~~chapter and the other chapters it administers and enforces, within~~
7 ~~budget limitations. The board shall directly employ legal counsel,~~
8 ~~who shall work exclusively for, and report directly to, the board,~~
9 ~~upon a finding by the board that directly employing legal counsel~~
10 ~~will further the board's mission.~~

11 ~~SEC. 28.~~

12 *SEC. 31.* Section 11506 of the Business and Professions Code
13 is amended to read:

14 11506. This part shall be subject to review by the appropriate
15 policy committees of the Legislature.

16 ~~SEC. 29.~~

17 *SEC. 32.* Section 7000 of the Health and Safety Code is
18 amended to read:

19 7000. The definitions in this chapter apply to this division,
20 Division 8 (commencing with Section 8100) and Division 102
21 (commencing with Section 102100) of this code and Chapter 12
22 (commencing with Section 7600) of Division 3 of the Business
23 and Professions Code.

24 ~~SEC. 30.~~

25 *SEC. 33.* Section 7103 of the Health and Safety Code is
26 amended to read:

27 7103. (a) Every person, upon whom the duty of interment is
28 imposed by law, who omits to perform that duty within a
29 reasonable time is guilty of a misdemeanor.

30 (b) Every licensee or registrant pursuant to Chapter 12
31 (commencing with Section 7600) of Division 3 of the Business
32 and Professions Code, and the agents and employees of the licensee
33 or registrant, or any unlicensed person acting in a capacity in which
34 a license from the Cemetery and Funeral Bureau is required, upon
35 whom the duty of interment is imposed by law, who omits to
36 perform that duty within a reasonable time is guilty of a
37 misdemeanor that shall be punishable by imprisonment in a county
38 jail not exceeding one year, by a fine not exceeding ten thousand
39 dollars (\$10,000), or both that imprisonment and fine.

1 (c) In addition, any person, registrant, or licensee described in
2 subdivision (a) or (b) is liable to pay the person performing the
3 duty in his or her stead treble the expenses incurred by the latter
4 in making the interment, to be recovered in a civil action.

5 ~~SEC. 31.~~

6 *SEC. 34.* Section 8731 of the Health and Safety Code is
7 amended to read:

8 8731. (a) The cemetery authority may appoint a board of
9 trustees of not less than three in number as trustees of its
10 endowment care fund. The members of the board of trustees shall
11 hold office subject to the direction of the cemetery authority.

12 (b) If within 30 days after notice of nonreceipt by the Cemetery
13 and Funeral Bureau or other agency with regulatory authority over
14 cemetery authorities, the cemetery authority fails to file the report
15 required by Section 7612.6 of the Business and Professions Code,
16 or if the report is materially not in compliance with law or the
17 endowment care fund is materially not in compliance with law,
18 the cemetery authority may be required to appoint as sole trustee
19 of its endowment care fund under Section 8733.5, any bank or
20 trust company qualified under the provisions of the Banking Law
21 (Division 1 (commencing with Section 99) of the Financial Code)
22 to engage in the trust business. That requirement may be imposed
23 by the Cemetery and Funeral Bureau or other agency with
24 regulatory authority over cemetery authorities, provided that the
25 cemetery authority has received written notice of the alleged
26 violation and has been given the opportunity to correct the alleged
27 violation, and there has been a finding of a material violation in
28 an administrative hearing.

29 (c) (1) Each member of the board of trustees shall provide
30 signatory acknowledgment of understanding of the role of a trustee
31 in managing trust funds in the following areas:

32 (A) Trustee duties, powers, and liabilities as contained in Part
33 4 (commencing with Section 16000) of Division 9 of the Probate
34 Code.

35 (B) Reporting and regulatory requirements contained in Article
36 1.5 (commencing with Section 7611) of Chapter 12 of Division 3
37 of the Business and Professions Code.

38 (C) Provisions related to the care of active cemeteries contained
39 in Chapter 5 (commencing with Section 8700) of Part 3 of Division
40 8.

1 (2) The signatory acknowledgment shall be retained by the
2 cemetery authority during the duration of the trustee's term of
3 office.

4 ~~SEC. 32.~~

5 *SEC. 35.* Section 8778.5 of the Health and Safety Code is
6 amended to read:

7 8778.5. Each special care trust fund established pursuant to
8 this article shall be administered in compliance with the following
9 requirements:

10 (a) (1) The board of trustees shall honor a written request of
11 revocation by the trustor within 30 days upon receipt of the written
12 request.

13 (2) Except as provided in paragraph (3), the board of trustees
14 upon revocation of a special care trust may assess a revocation fee
15 on the earned income of the trust only, the amount of which shall
16 not exceed 10 percent of the trust corpus, as set forth in subdivision
17 (c) of Section 2370 of Title 16 of the California Code of
18 Regulations.

19 (3) If, prior to or upon the death of the beneficiary of a revocable
20 special care trust, the cemetery authority is unable to perform the
21 services of the special care trust fund agreement, the board of
22 trustees shall pay the entire trust corpus and all earned income to
23 the beneficiary or trustor, or the legal representative of either the
24 beneficiary or trustor, without the imposition of a revocation fee.

25 (b) Notwithstanding subdivision (d) of Section 2370 of Title 16
26 of the California Code of Regulations, the board of trustees may
27 charge an annual fee for administering a revocable special care
28 trust fund, which may be recovered by administrative withdrawals
29 from current trust income, but the total administrative withdrawals
30 in any year shall not exceed 4 percent of the trust balance.

31 (c) Notwithstanding Section 8785, any person, partnership, or
32 corporation who violates this section shall be subject to disciplinary
33 action as provided in Article 6 (commencing with Section 7686)
34 of Chapter 12 of Division 3 of the Business and Professions Code,
35 or by a civil fine not exceeding five hundred dollars (\$500), or by
36 both, as determined by the Cemetery and Funeral Bureau and shall
37 not be guilty of a crime.

38 ~~SEC. 33.~~

39 *SEC. 36.* Section 8785 of the Health and Safety Code is
40 amended to read:

1 8785. Any person, partnership, or corporation administering,
2 managing, or having responsibility for endowment care or special
3 care funds who violates the provisions of this chapter relating to
4 the collection, investment, or use of those funds shall be punished
5 either by imprisonment in a county jail for a period not exceeding
6 six months or by fine not exceeding five hundred dollars (\$500),
7 or by both such imprisonment and fine, or by imprisonment
8 pursuant to subdivision (h) of Section 1170 of the Penal Code for
9 16 months, or two or three years. If the violator is a cemetery
10 licensee or the holder of a certificate of authority, he, she, or it
11 shall be subject to disciplinary action as provided in Article 6
12 (commencing with Section 7686) of Chapter 12 of Division 3 of
13 the Business and Professions Code.

14 ~~SEC. 34.~~

15 *SEC. 37.* Section 103775 of the Health and Safety Code is
16 amended to read:

17 103775. (a) Every person, except a parent informant for a
18 certificate of live birth and as provided in subdivision (b), who is
19 responsible for supplying information who refuses or fails to
20 furnish correctly any information in his or her possession that is
21 required by this part, or furnishes false information affecting any
22 certificate or record required by this part, is guilty of a
23 misdemeanor.

24 (b) Every licensee or registrant pursuant to Chapter 12
25 (commencing with Section 7600) of Division 3 of the Business
26 and Professions Code, and the agents and employees of the
27 licensee, or any unlicensed person acting in a capacity in which a
28 license from the Cemetery and Funeral Bureau is required, who
29 is responsible for supplying information and who refuses or fails
30 to furnish correctly any information in his or her possession that
31 is required by this part, or furnishes false information with intent
32 to defraud affecting a death certificate or record required by this
33 part, is guilty of a misdemeanor that shall be punishable by
34 imprisonment in a county jail not exceeding one year, by a fine
35 not exceeding ten thousand dollars (\$10,000), or by both that
36 imprisonment and fine.

37 ~~SEC. 35.~~

38 *SEC. 38.* Section 103780 of the Health and Safety Code is
39 amended to read:

1 103780. (a) Every person, except as provided in subdivision
2 (b), who willfully alters or knowingly possesses more than one
3 altered document, other than as permitted by this part, or falsifies
4 any certificate of birth, fetal death, or death, or marriage license,
5 or any record established by this part is guilty of a misdemeanor.

6 (b) Every licensee or registrant pursuant to Chapter 12
7 (commencing with Section 7600) of Division 3 of the Business
8 and Professions Code, and the agents and employees of the
9 licensee, or any unlicensed person acting in a capacity in which a
10 license from the Cemetery and Funeral Bureau is required, who
11 willfully alters or knowingly possesses more than one altered
12 document, other than as permitted by this part, or falsifies any
13 certificate of death, is guilty of a misdemeanor that shall be
14 punishable by imprisonment in a county jail not exceeding one
15 year, by a fine not exceeding ten thousand dollars (\$10,000), or
16 by both that imprisonment and fine.

17 ~~SEC. 36.~~

18 *SEC. 39.* Section 5 of the Chiropractic Act, as amended by
19 Section 1 of Chapter 533 of the Statutes of 1983, is amended to
20 read:

21 ~~Sec. 5.~~

22 *Sec. 5.* (a) It shall be unlawful for any person to practice
23 chiropractic in this state without a license so to do.

24 (b) Any person wishing to practice chiropractic in this state
25 shall make application to the board 45 days prior to any meeting
26 thereof, upon such form and in such manner as may be provided
27 by the board.

28 (c) Proof of graduation from an approved chiropractic school
29 or college, as defined in Section 4, must reach the board 15 days
30 prior to any meeting thereof.

31 (d) On and after January 1, 2019, each application must be
32 accompanied by the fee specified in subdivision (a) of Section
33 1007 of the Business and Professions Code.

34 (e) Except in the cases herein otherwise prescribed, each
35 applicant shall present to the board at the time of making such
36 application a diploma from a high school and a transcript of 60
37 prechiropractic college credits satisfactory to the board, or proof,
38 satisfactory to the board, of education equivalent in training power
39 to such high school and college courses.

1 (f) The schedule of minimum educational requirements to enable
2 any person to practice chiropractic in this state is as follows, except
3 as herein otherwise provided:

4	Group 1	
5		
6	Anatomy, including embryology and histology.....	14%
7		
8	Group 2	
9		
10	Physiology.....	6%
11		
12	Group 3	
13		
14	Biochemistry and clinical nutrition.....	6%
15		
16	Group 4	
17		
18	Pathology and bacteriology.....	10%
19		
20	Group 5	
21		
22	Public health, hygiene and sanitation.....	3%
23		
24	Group 6	
25		
26	Diagnosis, dermatology, syphilology and geriatrics, and	
27	radiological technology, safety, and interpretation.....	18%
28		
29	Group 7	
30		
31	Obstetrics and gynecology and pediatrics.....	3%
32		
33	Group 8	
34		
35	Principles and practice of chiropractic, physical therapy,	
36	psychiatry, and office procedure.....	25%
37		
38	Total.....	85%
39		
40	Electives.....	15%

1
2 (g) Any applicant who had matriculated at a chiropractic college
3 prior to the effective date of the amendments to this section
4 submitted to the electors by the 1977–78 Regular Session of the
5 Legislature shall meet all requirements that existed immediately
6 prior to the effective date of those amendments but need not meet
7 the change in requirements made by said amendments.

8 ~~SEC. 37.~~

9 *SEC. 40.* Section 12 of the Chiropractic Act, as amended by
10 Section 78 of Chapter 429 of the Statutes of 2017, is amended to
11 read:

12 Sec. 12. (a) Licenses issued under the provisions of this section
13 expire at 12 midnight on the last day of the month of birth of
14 licentiates of the board.

15 (b) The board shall establish regulations for the administration
16 of a birth month renewal program.

17 (c) A person practicing chiropractic within this state shall, on
18 or before the last day of the person’s month of birth of each year,
19 after a license is issued to the person under this act, pay to the
20 Board of Chiropractic Examiners the renewal fee specified under
21 subdivision (d).

22 (d) On and after January 1, 2019, the renewal fee shall be the
23 amount specified in subdivision (c) of Section 1007 of the Business
24 and Professions Code.

25 (e) The secretary shall mail to a licensed chiropractor in this
26 state, on or before 60 days prior to the last day of the month of the
27 licensee’s birth each year, a notice that the renewal fee will be due
28 on or before the last day of the next month following the licensee’s
29 birth. Nothing in this act shall be construed to require the receipts
30 to be recorded in like manner as original licenses.

31 (f) The failure, neglect or refusal of a person holding a license
32 or certificate to practice under this act in the State of California to
33 pay the annual fee during the time the license remains in force
34 shall, after a period of 60 days from the last day of the month of
35 the licensee’s birth, automatically work a forfeiture of the license
36 or certificate, and it shall not be restored except upon the written
37 application therefor and the payment to the board of a fee of twice
38 the annual amount of the renewal fee in effect at the time the
39 restoration application is filed except that a licensee who fails,
40 refuses, or neglects to pay the annual tax within a period of 60

1 days after the last day of the month of the licensee’s birth of each
2 year shall not be required to submit to an examination for the
3 reissuance of the certificate.

4 ~~SEC. 38.~~

5 *SEC. 41.* No reimbursement is required by this act pursuant to
6 Section 6 of Article XIII B of the California Constitution because
7 the only costs that may be incurred by a local agency or school
8 district will be incurred because this act creates a new crime or
9 infraction, eliminates a crime or infraction, or changes the penalty
10 for a crime or infraction, within the meaning of Section 17556 of
11 the Government Code, or changes the definition of a crime within
12 the meaning of Section 6 of Article XIII B of the California
13 Constitution.

AMENDED IN ASSEMBLY JUNE 4, 2018

AMENDED IN SENATE APRIL 2, 2018

SENATE BILL

No. 1491

Introduced by Committee on Business, Professions and Economic Development (Senators Hill (Chair), Dodd, Fuller, Galgiani, Glazer, Hernandez, Newman, Pan, and Wilk)

February 21, 2018

An act to amend Sections 27, 865, 1607, 1611, 1611.3, 1611.5, 1612, 1614, 1615, 1621, 1645, *1680*, 1750, 1750.2, 1750.4, 1751, 1753.7, 2290.5, 2556, 3004, *3040*, 3146, 3735, 3751, 4848, 4980.37, 4980.39, 4980.41, 4980.72, 4980.78, 4980.79, 4990.30, 4992, 4996.17, 4999.14, 4999.22, 4999.32, 4999.48, 4999.60, 4999.62, 4999.63, and 4999.100 of, and to repeal Sections ~~650.4 and 1601.5~~ *650.4, 1601.5, and 1601.6* of, the Business and Professions Code, and to amend Section 6924 of the Family Code, relating to healing arts.

LEGISLATIVE COUNSEL'S DIGEST

SB 1491, as amended, Committee on Business, Professions and Economic Development. Healing arts.

(1) The Dental Practice Act provides for the licensure and regulation of dentists and registered dental assistants by the Dental Board of California, which is within the Department of Consumer Affairs, and requires the board to meet regularly once in San Francisco and once in Los Angeles each year after the commencement of dental schools for the purpose of examining applicants and at such other times as the board may designate. The act entitles the secretary of the board to traveling and other expenses and prohibits the secretary from receiving a salary. The act requires the board to examine all applicants for licensure to practice dentistry in the state and to issue licenses to those applicants

that pass the examination of the board. That act requires the board to adopt reasonably necessary rules concerning, among other things, the establishment of standards for the approval of dental colleges. That act requires the board to only use examiners who have been appointed by the board and meet specified criteria, including that the examiner holds no position as an officer of faculty member at any college, school, or institution that provides dental instruction in the same licensure category as that held by the examiner.

This bill would delete the requirement that the board meet after the commencement of dental schools for the purpose of examining applicants, would delete the authorization for the secretary to receive expenses, and would delete the prohibition on the secretary receiving a salary. The bill would specify that the board is required to also examine applicants for a license to practice dental assisting and is required to issue a license to practice dentistry or a permit to practice dental assisting to an applicant who has successfully passed all licensing and permitting examinations administered by the board or any regional or national testing entity designated to administer an exam. The bill would require the board to adopt regulations instead of reasonably necessary rules concerning, among other things, the establishment of standards for the approval of dental assisting programs and educational courses. The bill would exempt a portfolio examiner from the above-described prohibition that he or she hold no position as an officer or faculty member.

The Dental Practice Act authorizes the board to inspect the books, records, and premises of any licensed dentist and makes failure to allow an inspection grounds for suspension or revocation of a license. That act requires the board to, among other things, keep a record of the names of all persons issued licenses to practice dentistry and issue a specified notice that it is the entity that regulates dentists.

This bill would specify that the above provisions also apply to the practice of dental assisting and to permitted dentists.

The Dental Practice Act also authorizes the board to require licensees to continue their education as a condition of licensure renewal and to submit assurances to the board that the licensees will inform themselves of new developments in the practice of dentistry since the licensees were originally licensed. The act authorizes a dental assistant to perform basic supportive dental procedures without a license under the supervision of a dentist if he or she meets certain requirements, including a board-approved course regarding the Dental Practice Act and a board-approved course in infection control, and requires the employer

of the dental assistant to ensure that he or she has successfully completed or does successfully complete those required courses. The act authorizes the board to issue an orthodontic assistant permit or a dental sedation assistant permit to a person who files an application and meets specified requirements, including completion of at least 12 months of work experience as a dental assistant and completion of a board-approved course regarding the Dental Practice Act and a board-approved course in infection control.

This bill would instead require a licensee under the chapter to continue his or her education as a condition of licensure renewal and would require a licensee to obtain evidence satisfactory to the board that he or she has, in the preceding 2 years, obtained continuing education relevant to the developments in the practice of dentistry or dental assisting consistent with regulations established by the board. The bill would require a dental assistant and an applicant for an orthodontic assistant permit or a dental sedation assistant permit to complete a 2-hour board-approved course in the Dental Practice Act and an 8-hour board-approved course in infection control. The bill would also require an applicant for an orthodontic assistant permit or a dental sedation assistant permit to have a current, ~~active~~ *active*, and valid licensure as a registered dental assistant and at least 12 months of verifiable work experience as a dental assistant.

The Dental Practice Act requires the Dental Board of California to amend, consistent with the federal Centers for Disease Control and Prevention recommendations for water quality, the regulations on the minimum standards for infection control to require water or other methods used for irrigation to be sterile or contain recognized disinfecting or antibacterial properties when performing dental procedures that expose dental pulp.

This bill would repeal that provision and would instead make using water, or other methods used for irrigation, that are not sterile or that do not contain recognized disinfecting or antibacterial properties when performing dental procedures on exposed dental pulp unprofessional conduct by a person licensed pursuant to the Dental Practice Act.

(2) (A) The Optometry Practice Act provides for the licensure and regulation of the practice of optometry by the State Board of Optometry, which is within the Department of Consumer Affairs, and requires a license issued under the act to expire at midnight in the last day of the licenseholder's birth month following its original issuance and thereafter at midnight on the last day of the licenseholder's birth month every 2

years if not renewed. *That act makes it unlawful for a person to engage in the practice of optometry or to display a sign in any other way to advertise or hold himself or herself out as an optometrist without having first obtained an optometrist license from the board or under the provisions of any former act relating to the practice of optometry. That act makes a violation of its provisions punishable as a misdemeanor.*

This bill would change the name of the State Board of Optometry to the California State Board of Optometry, and would require an optometric license to expire at midnight in the last day of the month in which the license was issued during the ~~second~~ 2nd year of a 2-year term if not renewed. *The bill would instead make it unlawful for a person to engage in the practice of optometry or to advertise himself or herself out as an optometrist without a valid, unrevoked California optometrist license. By changing the definition of an existing crime, this bill would result in a state-mandated local program.*

(B) Under existing law, the State Board of Optometry is responsible for the registration and regulation of registered dispensing opticians and makes a violation of any of the provisions regulating registered dispensing opticians punishable as a misdemeanor. Existing law makes it unlawful, except as provided, for a registered dispensing optician to advertise the furnishing of, or to furnish, services of an optometrist or a physician and surgeon, to directly employ an optometrist or physician and surgeon for the purpose of any examination or treatment of the eyes, or to duplicate or change lenses without a prescription or order from a person duly licensed to issue such a prescription or order.

This bill would additionally make it unlawful, except as provided, for a person who engages in the business of, or holds himself or herself out to be, a dispensing optician to do any of those above-described acts. By changing the definition of an existing crime, this bill would result in a state-mandated local program.

(3) The Respiratory Care Practice Act establishes the Respiratory Care Board of California, which is within the Department of Consumer Affairs, for the licensure and regulation of respiratory care practitioners. That act prohibits an applicant for licensure from receiving a license without first successfully passing all parts of the national registered respiratory therapist examination, but exempts a person from taking that exam who provides evidence that he or she passed the National Certified Respiratory Therapist Examination prior to January 1, 2015, if there is no evidence of prior license or job related discipline as determined by the board. That act authorizes a person whose license

has been revoked, surrendered, or suspended to petition the board for reinstatement and requires a person petitioning for reinstatement of his or her license that has been revoked or surrendered for 3 or more years to meet current education requirements required for licensure.

This bill would require an applicant for licensure to successfully pass the National Board for Respiratory Care's Therapist Multiple-Choice Examination, at the cut-off level required to qualify for the Clinical Stimulation Examination, and the Clinical Stimulation Examination, or any succeeding examinations, and would deem a person who took the National Certified Respiratory Therapist Examination prior to January 1, 2015, if there is no evidence of prior license or job related discipline as determined by the board, to meet that requirement. The bill would require a person petitioning the board for reinstatement of his or her license that has been revoked or surrendered for 3 or more years to also meet current examination requirements for initial licensure.

(4) The Veterinary Medicine Practice Act provides for the licensure and regulation of veterinarians and the practice of veterinary medicine by the Veterinary Medical Board, which is within the Department of Consumer Affairs, and requires an applicant for licensure to demonstrate his or her competency by examination. That act requires the examination to consist of certain components, including an examination concerning the act that is required to be administered by the board by mail.

This bill would require that component of the examination to be administered by the board by regular mail, email, or by both regular mail and email.

(5) The Board of Behavioral Sciences, which is within the Department of Consumer Affairs, licenses and regulates marriage and family therapists under the Licensed Marriage and Family Therapist Act, clinical social workers under the Clinical Social Worker Practice Act, and professional clinical counselors under the Licensed Professional Clinical Counselor Act.

(A) Those acts require applicants for licensure to, among other things, take a clinical examination, and authorize an applicant for licensure who obtained a license or registration under another jurisdiction to apply for licensure with the board without taking that examination if specified conditions are met.

This bill would instead provide that such an applicant can qualify for licensure with the board if ~~they~~ *he or she* obtained a license or registration under another jurisdiction and meet the specified conditions.

(B) The Licensed Marriage and Family Therapist Act and the Licensed Professional Clinical Counselor Act provide that any reference in the act to the term “intern” means an “associate.” Those acts require an applicant for licensure to meet specified education requirements, including 6 semester units or 9 quarter units of practicum. Those acts also require applicants for licensure or registration who began graduate study before August 1, 2012, and completed that study on or before December 31, 2018, to comply with specified educational and experience requirements and repeal those provisions on January 1, 2019.

This bill would make conforming changes by changing references to the term “intern” to “associate.” This bill would also require the above practicum requirement to be supervised. The bill would allow an applicant for a professional clinical counselor license to have field study experience instead of the required supervised practicum. The bill would also delete the repeal date for the provisions relating to applicants for licensure or registration who began graduate study before August 1, 2012, and completed that study on or before December 31, 2018.

(C) Under existing law, the offer, delivery, receipt, or acceptance by any person licensed as a healing arts professional of any rebate, refund, commission, preference, patronage, dividend, discount, or other consideration as compensation or inducement for referring patients is unlawful and punishable as a crime. Existing law, however, authorizes the participation in or operation of a group advertising and referral service for licensed marriage and family therapists if certain conditions are met.

This bill would repeal that authorization for licensed marriage and family therapists to participate in or operate a group advertising and referral service. By deleting that authorization, this bill would expand an existing crime and thereby impose a state-mandated local program.

(6) The bill would also make nonsubstantive changes.

(7) The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

Vote: majority. Appropriation: no. Fiscal committee: yes.
State-mandated local program: yes.

The people of the State of California do enact as follows:

1 SECTION 1. Section 27 of the Business and Professions Code
2 is amended to read:

3 27. (a) Each entity specified in subdivisions (c), (d), and (e)
4 shall provide on the Internet information regarding the status of
5 every license issued by that entity in accordance with the California
6 Public Records Act (Chapter 3.5 (commencing with Section 6250)
7 of Division 7 of Title 1 of the Government Code) and the
8 Information Practices Act of 1977 (Chapter 1 (commencing with
9 Section 1798) of Title 1.8 of Part 4 of Division 3 of the Civil Code).
10 The public information to be provided on the Internet shall include
11 information on suspensions and revocations of licenses issued by
12 the entity and other related enforcement action, including
13 accusations filed pursuant to the Administrative Procedure Act
14 (Chapter 3.5 (commencing with Section 11340) of Part 1 of
15 Division 3 of Title 2 of the Government Code) taken by the entity
16 relative to persons, businesses, or facilities subject to licensure or
17 regulation by the entity. The information may not include personal
18 information, including home telephone number, date of birth, or
19 social security number. Each entity shall disclose a licensee's
20 address of record. However, each entity shall allow a licensee to
21 provide a post office box number or other alternate address, instead
22 of his or her home address, as the address of record. This section
23 shall not preclude an entity from also requiring a licensee, who
24 has provided a post office box number or other alternative mailing
25 address as his or her address of record, to provide a physical
26 business address or residence address only for the entity's internal
27 administrative use and not for disclosure as the licensee's address
28 of record or disclosure on the Internet.

29 (b) In providing information on the Internet, each entity specified
30 in subdivisions (c) and (d) shall comply with the Department of
31 Consumer Affairs' guidelines for access to public records.

32 (c) Each of the following entities within the Department of
33 Consumer Affairs shall comply with the requirements of this
34 section:

35 (1) The Board for Professional Engineers, Land Surveyors, and
36 Geologists shall disclose information on its registrants and
37 licensees.

1 (2) The Bureau of Automotive Repair shall disclose information
2 on its licensees, including auto repair dealers, smog stations, lamp
3 and brake stations, smog check technicians, and smog inspection
4 certification stations.

5 (3) The Bureau of Electronic and Appliance Repair, Home
6 Furnishings, and Thermal Insulation shall disclose information on
7 its licensees and registrants, including major appliance repair
8 dealers, combination dealers (electronic and appliance), electronic
9 repair dealers, service contract sellers, and service contract
10 administrators.

11 (4) The Cemetery and Funeral Bureau shall disclose information
12 on its licensees, including cemetery brokers, cemetery salespersons,
13 cemetery managers, crematory managers, cemetery authorities,
14 crematories, cremated remains disposers, embalmers, funeral
15 establishments, and funeral directors.

16 (5) The Professional Fiduciaries Bureau shall disclose
17 information on its licensees.

18 (6) The Contractors' State License Board shall disclose
19 information on its licensees and registrants in accordance with
20 Chapter 9 (commencing with Section 7000) of Division 3. In
21 addition to information related to licenses as specified in
22 subdivision (a), the board shall also disclose information provided
23 to the board by the Labor Commissioner pursuant to Section 98.9
24 of the Labor Code.

25 (7) The Bureau for Private Postsecondary Education shall
26 disclose information on private postsecondary institutions under
27 its jurisdiction, including disclosure of notices to comply issued
28 pursuant to Section 94935 of the Education Code.

29 (8) The California Board of Accountancy shall disclose
30 information on its licensees and registrants.

31 (9) The California Architects Board shall disclose information
32 on its licensees, including architects and landscape architects.

33 (10) The State Athletic Commission shall disclose information
34 on its licensees and registrants.

35 (11) The State Board of Barbering and Cosmetology shall
36 disclose information on its licensees.

37 (12) The State Board of Guide Dogs for the Blind shall disclose
38 information on its licensees and registrants.

39 (13) The Acupuncture Board shall disclose information on its
40 licensees.

1 (14) The Board of Behavioral Sciences shall disclose
2 information on its licensees and registrants.

3 (15) The Dental Board of California shall disclose information
4 on its licensees.

5 (16) The State Board of Optometry shall disclose information
6 on its licensees and registrants.

7 (17) The Board of Psychology shall disclose information on its
8 licensees, including psychologists, psychological assistants, and
9 registered psychologists.

10 (18) The Veterinary Medical Board shall disclose information
11 on its licensees, registrants, and permitholders.

12 (d) The State Board of Chiropractic Examiners shall disclose
13 information on its licensees.

14 (e) The Structural Pest Control Board shall disclose information
15 on its licensees, including applicators, field representatives, and
16 operators in the areas of fumigation, general pest and wood
17 destroying pests and organisms, and wood roof cleaning and
18 treatment.

19 (f) The Bureau of Medical Cannabis Regulation shall disclose
20 information on its licensees.

21 (g) “Internet” for the purposes of this section has the meaning
22 set forth in paragraph (6) of subdivision (f) of Section 17538.

23 SEC. 2. Section 650.4 of the Business and Professions Code
24 is repealed.

25 SEC. 3. Section 865 of the Business and Professions Code is
26 amended to read:

27 865. For the purposes of this article, the following terms shall
28 have the following meanings:

29 (a) “Mental health provider” means a physician and surgeon
30 specializing in the practice of psychiatry, a psychologist, a
31 psychological assistant, intern, or trainee, a licensed marriage and
32 family therapist, a registered associate marriage and family
33 therapist, a marriage and family therapist trainee, a licensed
34 educational psychologist, a credentialed school psychologist, a
35 licensed clinical social worker, an associate clinical social worker,
36 a licensed professional clinical counselor, a registered associate
37 clinical counselor, a professional clinical counselor trainee, or any
38 other person designated as a mental health professional under
39 California law or regulation.

1 (b) (1) “Sexual orientation change efforts” means any practices
2 by mental health providers that seek to change an individual’s
3 sexual orientation. This includes efforts to change behaviors or
4 gender expressions, or to eliminate or reduce sexual or romantic
5 attractions or feelings toward individuals of the same sex.

6 (2) “Sexual orientation change efforts” does not include
7 psychotherapies that: (A) provide acceptance, support, and
8 understanding of clients or the facilitation of clients’ coping, social
9 support, and identity exploration and development, including sexual
10 orientation-neutral interventions to prevent or address unlawful
11 conduct or unsafe sexual practices; and (B) do not seek to change
12 sexual orientation.

13 SEC. 4. Section 1601.5 of the Business and Professions Code
14 is repealed.

15 *SEC. 5. Section 1601.6 of the Business and Professions Code*
16 *is repealed.*

17 ~~1601.6.—(a) Consistent with and in addition to the federal
18 Centers for Disease Control and Prevention recommendations for
19 water quality, the board shall amend the regulations on the
20 minimum standards for infection control (Section 1005 of Title
21 16 of the California Code of Regulations) to require water or other
22 methods used for irrigation to be sterile or contain recognized
23 disinfecting or antibacterial properties when performing dental
24 procedures that expose dental pulp.~~

25 ~~(b) Until December 31, 2018, the adoption and readoption of a
26 regulation by the board consistent with this section shall be deemed
27 to be an emergency necessary for the immediate preservation of
28 the public peace, health and safety, or general welfare for purposes
29 of Sections 11346.1 and 11346.9 of the Government Code and the
30 board is hereby exempted from the requirement that it describe
31 facts showing the need for immediate action and from review of
32 the emergency regulations by the Office of Administrative Law.~~

33 ~~(c) The board shall adopt final regulations consistent with this
34 section on or before December 31, 2018.~~

35 ~~(d) It is the intent of the Legislature that the requirements
36 established by this section and any regulations adopted pursuant
37 to this section apply to individuals licensed to practice dentistry.
38 This section shall not be construed to impose any new duty or
39 obligation on a water district.~~

1 ~~SEC. 5.~~

2 *SEC. 6.* Section 1607 of the Business and Professions Code is
3 amended to read:

4 1607. The board shall meet regularly once each year in San
5 Francisco and once each year in Los Angeles, and at such other
6 times and places as the board may designate, for the purpose of
7 transacting its business.

8 ~~SEC. 6.~~

9 *SEC. 7.* Section 1611 of the Business and Professions Code is
10 amended to read:

11 1611. The board shall carry out the purposes and enforce the
12 provisions of this chapter. It shall examine all applicants for a
13 license or permit to practice dentistry and dental assisting,
14 according to the provisions of this chapter, and shall issue licenses
15 and permits to practice dentistry and dental assisting in this state
16 to such applicants as successfully pass all applicable licensing and
17 permitting examinations administered by the board, or any regional
18 or national testing entity designated to administer licensing or
19 permitting examinations, and otherwise comply with the provisions
20 of this chapter. The board shall collect and apply all fees as directed
21 by this chapter.

22 ~~SEC. 7.~~

23 *SEC. 8.* Section 1611.3 of the Business and Professions Code
24 is amended to read:

25 1611.3. The board shall comply with the requirements of
26 Section 138 by January 1, 2013. The board shall require that the
27 notice under that section include a provision that the board is the
28 entity that regulates dentists and dental assistants and provide the
29 telephone number and Internet address of the board. The board
30 shall require the notice to be posted in a conspicuous location
31 accessible to public view.

32 ~~SEC. 8.~~

33 *SEC. 9.* Section 1611.5 of the Business and Professions Code
34 is amended to read:

35 1611.5. (a) The board may inspect the books, records, and
36 premises of any dentist licensed under this chapter and the licensing
37 documents, records, and premises of any dental assistant permitted
38 under this chapter in response to a complaint that a dentist or dental
39 assistant has violated any law or regulation that constitutes grounds

1 for disciplinary action by the board, and may employ inspectors
2 for this purpose.

3 (b) Failure to allow an inspection or any part thereof shall be
4 grounds for suspension or revocation of the license or permit in
5 accordance with Section 1670.

6 ~~SEC. 9.~~

7 *SEC. 10.* Section 1612 of the Business and Professions Code
8 is amended to read:

9 1612. The board shall keep a record of the names of all persons
10 to whom licenses or permits have been granted by it to practice
11 dentistry, dental assisting, or any other function requiring a permit,
12 and such other records as may be necessary to show plainly all of
13 its acts and proceedings.

14 ~~SEC. 10.~~

15 *SEC. 11.* Section 1614 of the Business and Professions Code
16 is amended to read:

17 1614. The board may adopt regulations pursuant to this chapter
18 concerning:

19 (a) The holding of meetings.

20 (b) The holding of examinations.

21 (c) The manner of issuance and reissuance of licenses.

22 (d) The establishment of standards for the approval of dental
23 colleges and dental assisting programs and educational courses.

24 (e) Prescribing subjects in which applicants are to be examined.

25 (f) The administration and enforcement of this chapter.

26 Such rules shall be adopted, amended, or repealed in accordance
27 with the provisions of the Administrative Procedure Act.

28 ~~SEC. 11.~~

29 *SEC. 12.* Section 1615 of the Business and Professions Code
30 is amended to read:

31 1615. Each member of the board shall receive a per diem and
32 expenses as provided in Section 103.

33 ~~SEC. 12.~~

34 *SEC. 13.* Section 1621 of the Business and Professions Code
35 is amended to read:

36 1621. The board shall utilize in the administration of its
37 licensure examinations only examiners whom it has appointed and
38 who meet the following criteria:

1 (a) Possession of a valid license to practice dentistry in this state
2 or possession of a valid license in one of the registered dental
3 assistant categories licensed under this chapter.

4 (b) Practice as a licensed dentist or in a licensure category
5 described in subdivision (a) for at least five years preceding his or
6 her appointment.

7 (c) Hold no position as an officer or faculty member at any
8 college, school, or institution that provides instruction in the same
9 licensure category as that held by the examiner. This subdivision
10 shall not apply to a portfolio examiner.

11 ~~SEC. 13.~~

12 *SEC. 14.* Section 1645 of the Business and Professions Code
13 is amended to read:

14 1645. (a) (1) All holders of licenses under this chapter shall
15 continue their education after receiving a license as a condition to
16 the renewal thereof, and shall obtain evidence satisfactory to the
17 board that they have, during the preceding two-year period,
18 obtained continuing education relevant to developments in the
19 practice of dentistry and dental assisting consistent with regulations
20 established by the board.

21 (2) The board shall adopt regulations providing for the
22 suspension of the licenses at the end of the two-year period until
23 compliance with this section is accomplished.

24 (b) The board may also, as a condition of license renewal,
25 require licentiates to successfully complete a portion of the required
26 continuing education hours in specific areas adopted in regulations
27 by the board. The board may prescribe this mandatory coursework
28 within the general areas of patient care, health and safety, and law
29 and ethics. The mandatory coursework prescribed by the board
30 shall not exceed fifteen hours per renewal period for dentists, and
31 seven and one-half hours per renewal period for dental auxiliaries.
32 Any mandatory coursework required by the board shall be credited
33 toward the continuing education requirements established by the
34 board pursuant to subdivision (a).

35 (c) For a retired dentist who provides only uncompensated care,
36 the board shall not require more than 60 percent of the hours of
37 continuing education that are required of other licensed dentists.
38 Notwithstanding subdivision (b), all of the hours of continuing
39 education as described in this subdivision shall be gained through
40 courses related to the actual delivery of dental services to the

1 patient or the community, as determined by the board. Nothing in
2 this subdivision shall be construed to reduce any requirements
3 imposed by the board pursuant to subdivision (b).

4 (d) The board shall report on the outcome of subdivision (c)
5 pursuant to, and at the time of, its regular sunset review process,
6 as provided in Section 1601.1.

7 *SEC. 15. Section 1680 of the Business and Professions Code*
8 *is amended to read:*

9 1680. Unprofessional conduct by a person licensed under this
10 chapter is defined as, but is not limited to, any one of the following:

11 (a) The obtaining of any fee by fraud or misrepresentation.

12 (b) The employment directly or indirectly of any student or
13 suspended or unlicensed dentist to practice dentistry as defined in
14 this chapter.

15 (c) The aiding or abetting of any unlicensed person to practice
16 dentistry.

17 (d) The aiding or abetting of a licensed person to practice
18 dentistry unlawfully.

19 (e) The committing of any act or acts of sexual abuse,
20 misconduct, or relations with a patient that are substantially related
21 to the practice of dentistry.

22 (f) The use of any false, assumed, or fictitious name, either as
23 an individual, firm, corporation, or otherwise, or any name other
24 than the name under which he or she is licensed to practice, in
25 advertising or in any other manner indicating that he or she is
26 practicing or will practice dentistry, except that name as is specified
27 in a valid permit issued pursuant to Section 1701.5.

28 (g) The practice of accepting or receiving any commission or
29 the rebating in any form or manner of fees for professional services,
30 radiograms, prescriptions, or other services or articles supplied to
31 patients.

32 (h) The making use by the licensee or any agent of the licensee
33 of any advertising statements of a character tending to deceive or
34 mislead the public.

35 (i) The advertising of either professional superiority or the
36 advertising of performance of professional services in a superior
37 manner. This subdivision shall not prohibit advertising permitted
38 by subdivision (h) of Section 651.

39 (j) The employing or the making use of solicitors.

40 (k) The advertising in violation of Section 651.

1 (l) The advertising to guarantee any dental service, or to perform
2 any dental operation painlessly. This subdivision shall not prohibit
3 advertising permitted by Section 651.

4 (m) The violation of any of the provisions of law regulating the
5 procurement, dispensing, or administration of dangerous drugs,
6 as defined in Chapter 9 (commencing with Section 4000) or
7 controlled substances, as defined in Division 10 (commencing
8 with Section 11000) of the Health and Safety Code.

9 (n) The violation of any of the provisions of this division.

10 (o) The permitting of any person to operate dental radiographic
11 equipment who has not met the requirements of Section 1656.

12 (p) The clearly excessive prescribing or administering of drugs
13 or treatment, or the clearly excessive use of diagnostic procedures,
14 or the clearly excessive use of diagnostic or treatment facilities,
15 as determined by the customary practice and standards of the dental
16 profession.

17 Any person who violates this subdivision is guilty of a
18 misdemeanor and shall be punished by a fine of not less than one
19 hundred dollars (\$100) or more than six hundred dollars (\$600),
20 or by imprisonment for a term of not less than 60 days or more
21 than 180 days, or by both a fine and imprisonment.

22 (q) The use of threats or harassment against any patient or
23 licensee for providing evidence in any possible or actual
24 disciplinary action, or other legal action; or the discharge of an
25 employee primarily based on the employee's attempt to comply
26 with the provisions of this chapter or to aid in the compliance.

27 (r) Suspension or revocation of a license issued, or discipline
28 imposed, by another state or territory on grounds that would be
29 the basis of discipline in this state.

30 (s) The alteration of a patient's record with intent to deceive.

31 (t) Unsanitary or unsafe office conditions, as determined by the
32 customary practice and standards of the dental profession.

33 (u) The abandonment of the patient by the licensee, without
34 written notice to the patient that treatment is to be discontinued
35 and before the patient has ample opportunity to secure the services
36 of another dentist, registered dental hygienist, registered dental
37 hygienist in alternative practice, or registered dental hygienist in
38 extended functions and provided the health of the patient is not
39 jeopardized.

1 (v) The willful misrepresentation of facts relating to a
2 disciplinary action to the patients of a disciplined licensee.

3 (w) Use of fraud in the procurement of any license issued
4 pursuant to this chapter.

5 (x) Any action or conduct that would have warranted the denial
6 of the license.

7 (y) The aiding or abetting of a licensed dentist, dental assistant,
8 registered dental assistant, registered dental assistant in extended
9 functions, dental sedation assistant permitholder, orthodontic
10 assistant permitholder, registered dental hygienist, registered dental
11 hygienist in alternative practice, or registered dental hygienist in
12 extended functions to practice dentistry in a negligent or
13 incompetent manner.

14 (z) (1) The failure to report to the board in writing within seven
15 days any of the following: (A) the death of his or her patient during
16 the performance of any dental or dental hygiene procedure; (B)
17 the discovery of the death of a patient whose death is related to a
18 dental or dental hygiene procedure performed by him or her; or
19 (C) except for a scheduled hospitalization, the removal to a hospital
20 or emergency center for medical treatment of any patient to whom
21 oral conscious sedation, conscious sedation, or general anesthesia
22 was administered, or any patient as a result of dental or dental
23 hygiene treatment. With the exception of patients to whom oral
24 conscious sedation, conscious sedation, or general anesthesia was
25 administered, removal to a hospital or emergency center that is
26 the normal or expected treatment for the underlying dental
27 condition is not required to be reported. Upon receipt of a report
28 pursuant to this subdivision the board may conduct an inspection
29 of the dental office if the board finds that it is necessary. A dentist
30 shall report to the board all deaths occurring in his or her practice
31 with a copy sent to the Dental Hygiene Committee of California
32 if the death was the result of treatment by a registered dental
33 hygienist, registered dental hygienist in alternative practice, or
34 registered dental hygienist in extended functions. A registered
35 dental hygienist, registered dental hygienist in alternative practice,
36 or registered dental hygienist in extended functions shall report to
37 the Dental Hygiene Committee of California all deaths occurring
38 as the result of dental hygiene treatment, and a copy of the
39 notification shall be sent to the board.

1 (2) The report required by this subdivision shall be on a form
2 or forms approved by the board. The form or forms approved by
3 the board shall require the licensee to include, but not be limited
4 to, the following information for cases in which patients received
5 anesthesia: the date of the procedure; the patient's age in years
6 and months, weight, and sex; the patient's American Society of
7 Anesthesiologists (ASA) physical status; the patient's primary
8 diagnosis; the patient's coexisting diagnoses; the procedures
9 performed; the sedation setting; the medications used; the
10 monitoring equipment used; the category of the provider
11 responsible for sedation oversight; the category of the provider
12 delivering sedation; the category of the provider monitoring the
13 patient during sedation; whether the person supervising the sedation
14 performed one or more of the procedures; the planned airway
15 management; the planned depth of sedation; the complications
16 that occurred; a description of what was unexpected about the
17 airway management; whether there was transportation of the patient
18 during sedation; the category of the provider conducting
19 resuscitation measures; and the resuscitation equipment utilized.
20 Disclosure of individually identifiable patient information shall
21 be consistent with applicable law. A report required by this
22 subdivision shall not be admissible in any action brought by a
23 patient of the licensee providing the report.

24 (3) For the purposes of paragraph (2), categories of provider
25 are: General Dentist, Pediatric Dentist, Oral Surgeon, Dentist
26 Anesthesiologist, Physician Anesthesiologist, Dental Assistant,
27 Registered Dental Assistant, Dental Sedation Assistant, Registered
28 Nurse, Certified Registered Nurse Anesthetist, or Other.

29 (4) The form shall state that this information shall not be
30 considered an admission of guilt, but is for educational, data, or
31 investigative purposes.

32 (5) The board may assess a penalty on any licensee who fails
33 to report an instance of an adverse event as required by this
34 subdivision. The licensee may dispute the failure to file within 10
35 days of receiving notice that the board had assessed a penalty
36 against the licensee.

37 (aa) Participating in or operating any group advertising and
38 referral services that are in violation of Section 650.2.

1 (ab) The failure to use a fail-safe machine with an appropriate
2 exhaust system in the administration of nitrous oxide. The board
3 shall, by regulation, define what constitutes a fail-safe machine.

4 (ac) Engaging in the practice of dentistry with an expired license.

5 (ad) Except for good cause, the knowing failure to protect
6 patients by failing to follow infection control guidelines of the
7 board, thereby risking transmission of bloodborne infectious
8 diseases from dentist, dental assistant, registered dental assistant,
9 registered dental assistant in extended functions, dental sedation
10 assistant permitholder, orthodontic assistant permitholder,
11 registered dental hygienist, registered dental hygienist in alternative
12 practice, or registered dental hygienist in extended functions to
13 patient, from patient to patient, and from patient to dentist, dental
14 assistant, registered dental assistant, registered dental assistant in
15 extended functions, dental sedation assistant permitholder,
16 orthodontic assistant permitholder, registered dental hygienist,
17 registered dental hygienist in alternative practice, or registered
18 dental hygienist in extended functions. In administering this
19 subdivision, the board shall consider referencing the standards,
20 regulations, and guidelines of the State Department of Public
21 Health developed pursuant to Section 1250.11 of the Health and
22 Safety Code and the standards, guidelines, and regulations pursuant
23 to the California Occupational Safety and Health Act of 1973 (Part
24 1 (commencing with Section 6300) of Division 5 of the Labor
25 Code) for preventing the transmission of HIV, hepatitis B, and
26 other blood-borne pathogens in health care settings. The board
27 shall review infection control guidelines, if necessary, on an annual
28 basis and proposed changes shall be reviewed by the Dental
29 Hygiene Committee of California to establish a consensus. The
30 committee shall submit any recommended changes to the infection
31 control guidelines for review to establish a consensus. As
32 necessary, the board shall consult with the Medical Board of
33 California, the California Board of Podiatric Medicine, the Board
34 of Registered Nursing, and the Board of Vocational Nursing and
35 Psychiatric Technicians, to encourage appropriate consistency in
36 the implementation of this subdivision.

37 The board shall seek to ensure that all appropriate dental
38 personnel are informed of the responsibility to follow infection
39 control guidelines, and of the most recent scientifically recognized

1 safeguards for minimizing the risk of transmission of bloodborne
2 infectious diseases.

3 (ae) The utilization by a licensed dentist of any person to
4 perform the functions of any registered dental assistant, registered
5 dental assistant in extended functions, dental sedation assistant
6 permitholder, orthodontic assistant permitholder, registered dental
7 hygienist, registered dental hygienist in alternative practice, or
8 registered dental hygienist in extended functions who, at the time
9 of initial employment, does not possess a current, valid license or
10 permit to perform those functions.

11 (af) The prescribing, dispensing, or furnishing of dangerous
12 drugs or devices, as defined in Section 4022, in violation of Section
13 2242.1.

14 (ag) *Using water, or other methods used for irrigation, that are*
15 *not sterile or that do not contain recognized disinfecting or*
16 *antibacterial properties when performing dental procedures on*
17 *exposed dental pulp.*

18 ~~SEC. 14.~~

19 *SEC. 16.* Section 1750 of the Business and Professions Code
20 is amended to read:

21 1750. (a) A dental assistant is an individual who, without a
22 license, may perform basic supportive dental procedures, as
23 authorized by Section 1750.1 and by regulations adopted by the
24 board, under the supervision of a licensed dentist. “Basic supportive
25 dental procedures” are those procedures that have technically
26 elementary characteristics, are completely reversible, and are
27 unlikely to precipitate potentially hazardous conditions for the
28 patient being treated.

29 (b) The supervising licensed dentist shall be responsible for
30 determining the competency of the dental assistant to perform the
31 basic supportive dental procedures, as authorized by Section
32 1750.1.

33 (c) The employer of a dental assistant shall be responsible for
34 ensuring that the dental assistant who has been in continuous
35 employment for 120 days or more, has already successfully
36 completed, or successfully completes, all of the following within
37 a year of the date of employment:

38 (1) A board-approved two-hour course in the Dental Practice
39 Act.

40 (2) A board-approved eight-hour course in infection control.

1 (3) A course in basic life support offered by an instructor
2 approved by the American Red Cross or the American Heart
3 Association, or any other course approved by the board as
4 equivalent and that provides the student the opportunity to engage
5 in hands-on simulated clinical scenarios.

6 (d) The employer of a dental assistant shall be responsible for
7 ensuring that the dental assistant maintains certification in basic
8 life support.

9 (e) This section shall become operative on January 1, 2010.

10 ~~SEC. 15.~~

11 *SEC. 17.* Section 1750.2 of the Business and Professions Code
12 is amended to read:

13 1750.2. (a) The board may issue an orthodontic assistant permit
14 to a person who files a completed application including a fee and
15 provides evidence, satisfactory to the board, of all of the following
16 eligibility requirements:

17 (1) Current, active, and valid licensure as a registered dental
18 assistant or completion of at least 12 months of verifiable work
19 experience as a dental assistant.

20 (2) Successful completion of a two-hour board-approved course
21 in the Dental Practice Act and an eight-hour board-approved course
22 in infection control.

23 (3) Successful completion of a course in basic life support
24 offered by an instructor approved by the American Red Cross or
25 the American Heart Association, or any other course approved by
26 the board as equivalent.

27 (4) Successful completion of a board-approved orthodontic
28 assistant course, which may commence after the completion of six
29 months of work experience as a dental assistant.

30 (5) Passage of a written examination administered by the board
31 after completion of all of the other requirements of this subdivision.
32 The written examination shall encompass the knowledge, skills,
33 and abilities necessary to competently perform the duties specified
34 in Section 1750.3.

35 (b) A person who holds an orthodontic assistant permit pursuant
36 to this section shall be subject to the same continuing education
37 requirements for registered dental assistants as established by the
38 board pursuant to Section 1645 and the renewal requirements of
39 Article 6 (commencing with Section 1715).

1 ~~SEC. 16.~~

2 *SEC. 18.* Section 1750.4 of the Business and Professions Code
3 is amended to read:

4 1750.4. (a) The board may issue a dental sedation assistant
5 permit to a person who files a completed application including a
6 fee and provides evidence, satisfactory to the board, of all of the
7 following eligibility requirements:

8 (1) Current, active, and valid licensure as a registered dental
9 assistant or completion of at least 12 months of verifiable work
10 experience as a dental assistant.

11 (2) Successful completion of a two-hour board-approved course
12 in the Dental Practice Act and an eight-hour board-approved course
13 in infection control.

14 (3) Successful completion of a course in basic life support
15 offered by an instructor approved by the American Red Cross or
16 the American Heart Association, or any other course approved by
17 the board as equivalent.

18 (4) Successful completion of a board-approved dental sedation
19 assistant course, which may commence after the completion of six
20 months of work experience as a dental assistant.

21 (5) Passage of a written examination administered by the board
22 after completion of all of the other requirements of this subdivision.
23 The written examination shall encompass the knowledge, skills,
24 and abilities necessary to competently perform the duties specified
25 in Section 1750.5.

26 (b) A person who holds a permit pursuant to this section shall
27 be subject to the continuing education requirements established
28 by the board pursuant to Section 1645 and the renewal requirements
29 of Article 6 (commencing with Section 1715).

30 ~~SEC. 17.~~

31 *SEC. 19.* Section 1751 of the Business and Professions Code
32 is amended to read:

33 1751. At least once every seven years, the board shall review
34 the allowable duties for dental assistants, registered dental
35 assistants, registered dental assistants in extended functions, dental
36 sedation assistant permitholders, and orthodontic assistant
37 permitholders, the supervision level for these categories, and the
38 settings under which these duties may be performed, and shall
39 update the regulations as necessary to keep them current with the
40 state of the dental practice.

1 ~~SEC. 18.~~

2 *SEC. 20.* Section 1753.7 of the Business and Professions Code
3 is amended to read:

4 1753.7. A licensed dentist may simultaneously utilize in his
5 or her practice no more than three registered dental assistants in
6 extended functions or registered dental hygienists in extended
7 functions licensed pursuant to Section 1753 or 1918.

8 ~~SEC. 19.~~

9 *SEC. 21.* Section 2290.5 of the Business and Professions Code
10 is amended to read:

11 2290.5. (a) For purposes of this division, the following
12 definitions shall apply:

13 (1) “Asynchronous store and forward” means the transmission
14 of a patient’s medical information from an originating site to the
15 health care provider at a distant site without the presence of the
16 patient.

17 (2) “Distant site” means a site where a health care provider who
18 provides health care services is located while providing these
19 services via a telecommunications system.

20 (3) “Health care provider” means either of the following:

21 (A) A person who is licensed under this division.

22 (B) An associate marriage and family therapist or marriage and
23 family therapist trainee functioning pursuant to Section 4980.43.

24 (4) “Originating site” means a site where a patient is located at
25 the time health care services are provided via a telecommunications
26 system or where the asynchronous store and forward service
27 originates.

28 (5) “Synchronous interaction” means a real-time interaction
29 between a patient and a health care provider located at a distant
30 site.

31 (6) “Telehealth” means the mode of delivering health care
32 services and public health via information and communication
33 technologies to facilitate the diagnosis, consultation, treatment,
34 education, care management, and self-management of a patient’s
35 health care while the patient is at the originating site and the health
36 care provider is at a distant site. Telehealth facilitates patient
37 self-management and caregiver support for patients and includes
38 synchronous interactions and asynchronous store and forward
39 transfers.

1 (b) Prior to the delivery of health care via telehealth, the health
2 care provider initiating the use of telehealth shall inform the patient
3 about the use of telehealth and obtain verbal or written consent
4 from the patient for the use of telehealth as an acceptable mode of
5 delivering health care services and public health. The consent shall
6 be documented.

7 (c) Nothing in this section shall preclude a patient from receiving
8 in-person health care delivery services during a specified course
9 of health care and treatment after agreeing to receive services via
10 telehealth.

11 (d) The failure of a health care provider to comply with this
12 section shall constitute unprofessional conduct. Section 2314 shall
13 not apply to this section.

14 (e) This section shall not be construed to alter the scope of
15 practice of any health care provider or authorize the delivery of
16 health care services in a setting, or in a manner, not otherwise
17 authorized by law.

18 (f) All laws regarding the confidentiality of health care
19 information and a patient’s rights to his or her medical information
20 shall apply to telehealth interactions.

21 (g) This section shall not apply to a patient under the jurisdiction
22 of the Department of Corrections and Rehabilitation or any other
23 correctional facility.

24 (h) (1) Notwithstanding any other provision of law and for
25 purposes of this section, the governing body of the hospital whose
26 patients are receiving the telehealth services may grant privileges
27 to, and verify and approve credentials for, providers of telehealth
28 services based on its medical staff recommendations that rely on
29 information provided by the distant-site hospital or telehealth
30 entity, as described in Sections 482.12, 482.22, and 485.616 of
31 Title 42 of the Code of Federal Regulations.

32 (2) By enacting this subdivision, it is the intent of the Legislature
33 to authorize a hospital to grant privileges to, and verify and approve
34 credentials for, providers of telehealth services as described in
35 paragraph (1).

36 (3) For the purposes of this subdivision, “telehealth” shall
37 include “telemedicine” as the term is referenced in Sections 482.12,
38 482.22, and 485.616 of Title 42 of the Code of Federal Regulations.

39 *SEC. 22. Section 2556 of the Business and Professions Code*
40 *is amended to read:*

1 2556. (a) Except as authorized by Section 655, it is unlawful
 2 for a registered dispensing optician *or a person who engages in*
 3 *the business of, or holds himself or herself out to be, a dispensing*
 4 *optician* to do any of the following: to advertise the furnishing of,
 5 or to furnish, the services of an optometrist or a physician and
 6 surgeon, to directly employ an optometrist or physician and surgeon
 7 for the purpose of any examination or treatment of the eyes, or to
 8 duplicate or change lenses without a prescription or order from a
 9 person duly licensed to issue the same. For the purposes of this
 10 section, “furnish” does not mean to enter into a landlord-tenant
 11 relationship of any kind.

12 (b) Notwithstanding Section 125.9, the board may, by regulation,
 13 impose and issue administrative fines and citations for a violation
 14 of this section or Section 655, which may be assessed in addition
 15 to any other applicable fines, citations, or administrative or criminal
 16 actions.

17 ~~SEC. 20.~~

18 ~~SEC. 23.~~ Section 3004 of the Business and Professions Code
 19 is amended to read:

20 3004. (a) As used in this chapter, “board” means the State
 21 Board of Optometry.

22 (b) Any reference in this code or any other code to the “State
 23 Board of Optometry” shall be deemed to refer to the “California
 24 State Board of Optometry.”

25 ~~SEC. 24. Section 3040 of the Business and Professions Code~~
 26 ~~is amended to read:~~

27 3040. (a) It is unlawful for a person to engage in the practice
 28 of optometry ~~or to display a sign or in any other way~~ to advertise
 29 or hold himself or herself out as an optometrist without ~~having~~
 30 ~~first obtained an optometrist license from the board under the~~
 31 ~~provisions of this chapter or under the provisions of any former~~
 32 ~~act relating to the practice of optometry. a valid, unrevoked~~
 33 *California optometrist license.* The practice of optometry includes
 34 the performing or controlling of any acts set forth in Section 3041.

35 ~~In~~

36 (b) *In* any prosecution for a violation of this section, the use of
 37 test cards, test lenses, or of trial frames is prima facie evidence of
 38 the practice of optometry.

1 ~~SEC. 21.~~

2 *SEC. 25.* Section 3146 of the Business and Professions Code
3 is amended to read:

4 3146. An optometric license issued under this chapter expires
5 at midnight on the last day of the month in which the license was
6 issued during the second year of a two-year term if not renewed.
7 To renew an unexpired license, the optometrist shall apply for
8 renewal on a form prescribed by the board and pay the renewal
9 fee prescribed by this chapter.

10 ~~SEC. 22.~~

11 *SEC. 26.* Section 3735 of the Business and Professions Code
12 is amended to read:

13 3735. (a) Except as otherwise provided in this chapter, an
14 applicant shall not receive a license under this chapter without first
15 successfully passing the National Board for Respiratory Care's
16 Therapist Multiple-Choice Examination, at the cut-off level
17 required to qualify for the Clinical Simulation Examination, and
18 the Clinical Simulation Examination, or any succeeding
19 examinations.

20 (b) Notwithstanding subdivision (a), any person applying for
21 licensure who provides evidence that he or she passed the national
22 Certified Respiratory Therapist Examination or Written Registry
23 Examination prior to January 1, 2015, shall be deemed to have
24 met the examination requirement of subdivision (a), provided there
25 is no evidence of prior license or job-related discipline, as
26 determined by the board in its discretion.

27 ~~SEC. 23.~~

28 *SEC. 27.* Section 3751 of the Business and Professions Code
29 is amended to read:

30 3751. (a) A person whose license has been revoked,
31 surrendered, or suspended, or placed on probation, may petition
32 the board for reinstatement, modification, or termination of
33 probation, provided the person has paid all outstanding fees, fines,
34 and cost recovery in full, and monthly probation monitoring
35 payments are current.

36 (b) A person petitioning for reinstatement of his or her license
37 that has been revoked or surrendered for three or more years shall
38 also meet the current education and examination requirements
39 required for initial licensure.

1 (c) A petition may be filed only after a period of time has
2 elapsed, but not less than the following minimum periods from
3 the effective date of the decision ordering that disciplinary action:
4 (1) At least three years for reinstatement of a license that has
5 been revoked or surrendered.
6 (2) At least two years for early termination of probation of three
7 years or more.
8 (3) At least one year for modification of a condition, or
9 reinstatement of a license revoked or surrendered for mental or
10 physical illness, or termination of probation of less than three years.
11 (d) The petition shall state any facts as may be required by the
12 board. The petition shall be accompanied by at least two verified
13 recommendations from licensed health care practitioners who have
14 personal knowledge of the professional activities of the petitioner
15 since the disciplinary penalty was imposed. The board may accept
16 or reject the petition.
17 (e) Written or oral argument may be provided by the petitioner
18 or, at the request of the board, by the Attorney General. Unless
19 the board or the petitioner requests the presentation of oral
20 argument, the petition shall be considered and voted upon by mail.
21 If the petitioner or the board requests the opportunity for oral
22 argument, the petition shall be heard by the board or the board
23 may assign the petition to an administrative law judge.
24 (f) Consideration shall be given to all activities of the petitioner
25 since the disciplinary action was taken, the offense for which the
26 petitioner was disciplined, the petitioner's activities during the
27 time the license was in good standing, and the petitioner's
28 rehabilitative efforts, general reputation for truth, and professional
29 ability.
30 (g) The board may deny the petition for reinstatement, reinstate
31 the license without terms and conditions, require an examination
32 for the reinstatement, restoration, or modification of probation, or
33 reinstate the license with terms and conditions as it deems
34 necessary. Where a petition is heard by an administrative law
35 judge, the administrative law judge shall render a proposed decision
36 to the board denying the petition for reinstatement, reinstating the
37 license without terms and conditions, requiring an examination
38 for the reinstatement, or reinstating the license with terms and
39 conditions as he or she deems necessary. The board may take any

1 action with respect to the proposed decision and petition as it deems
2 appropriate.

3 (h) No petition shall be considered under either of the following
4 circumstances:

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

8 (2) If an accusation or a petition to revoke probation is pending
9 against the person.

10 (i) The board may deny without a hearing or argument any
11 petition filed pursuant to this section within a period of three years
12 from the effective date of the prior decision.

13 (j) Petitions for reinstatement shall include a processing fee
14 equal to fees charged pursuant to subdivisions (a) and (h) of Section
15 3775. In addition, petitions for reinstatement that are granted shall
16 include a fee equal to the fee charged pursuant to subdivision (d)
17 of Section 3775, before the license may be reinstated.

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

20 ~~SEC. 24.~~

21 *SEC. 28.* Section 4848 of the Business and Professions Code
22 is amended to read:

23 4848. (a) (1) The board shall, by means of examination,
24 ascertain the professional qualifications of all applicants for
25 licenses to practice veterinary medicine in this state and shall issue
26 a license to every person whom it finds to be qualified. No license
27 shall be issued to anyone who has not demonstrated his or her
28 competency by examination.

29 (2) The examination shall consist of each of the following:

30 (A) A licensing examination that is administered on a national
31 basis.

32 (B) A California state board examination.

33 (C) An examination concerning those statutes and regulations
34 of the Veterinary Medicine Practice Act administered by the board.
35 The examination shall be administered by regular mail, email, or
36 by both regular mail and email, and provided to applicants within
37 10 to 20 days of eligibility determination. The board shall have 10
38 to 20 days from the date of receipt to process the examination and
39 provide candidates with the results of the examination. The
40 applicant shall certify that he or she personally completed the

1 examination. Any false statement is a violation subject to Section
2 4831. University of California and Western University of Health
3 Sciences veterinary medical students who have successfully
4 completed a board-approved course on veterinary law and ethics
5 covering the Veterinary Medicine Practice Act shall be exempt
6 from this provision.

7 (3) The examinations may be given at the same time or at
8 different times as determined by the board. For examination
9 purposes, the board may make contractual arrangements on a sole
10 source basis with organizations furnishing examination material
11 as it may deem desirable and shall be exempt from Section 10115
12 of the Public Contract Code.

13 (4) The licensing examination may be waived by the board in
14 any case in which it determines that the applicant has taken and
15 passed an examination for licensure in another state substantially
16 equivalent in scope and subject matter to the licensing examination
17 last given in California before the determination is made, and has
18 achieved a score on the out-of-state examination at least equal to
19 the score required to pass the licensing examination administered
20 in California.

21 (5) Nothing in this chapter shall preclude the board from
22 permitting a person who has completed a portion of his or her
23 educational program, as determined by the board, in a veterinary
24 college recognized by the board under Section 4846 to take any
25 examination or any part thereof prior to satisfying the requirements
26 for application for a license established by Section 4846.

27 (b) For purposes of reciprocity, the board shall waive the
28 examination requirements of subdivision (a), and issue a license
29 to an applicant to practice veterinary medicine if the applicant
30 meets all of the following requirements and would not be denied
31 issuance of a license by any other provision of this code:

32 (1) The applicant holds a current valid license in good standing
33 in another state, Canadian province, or United States territory and,
34 within three years immediately preceding filing an application for
35 licensure in this state, has practiced clinical veterinary medicine
36 for a minimum of two years and completed a minimum of 2,944
37 hours of clinical practice. Experience obtained while participating
38 in an American Veterinary Medical Association (AVMA)
39 accredited institution's internship, residency, or specialty board

1 training program shall be valid for meeting the minimum
2 experience requirement.

3 The term “in good standing” means that an applicant under this
4 section:

5 (A) Is not currently under investigation nor has been charged
6 with an offense for any act substantially related to the practice of
7 veterinary medicine by any public agency, nor entered into any
8 consent agreement or been subject to an administrative decision
9 that contains conditions placed by an agency upon an applicant’s
10 professional conduct or practice, including any voluntary surrender
11 of license, nor been the subject of an adverse judgment resulting
12 from the practice of veterinary medicine that the board determines
13 constitutes evidence of a pattern of incompetence or negligence.

14 (B) Has no physical or mental impairment related to drugs or
15 alcohol, and has not been found mentally incompetent by a
16 physician so that the applicant is unable to undertake the practice
17 of veterinary medicine in a manner consistent with the safety of a
18 patient or the public.

19 (2) At the time of original licensure, the applicant passed the
20 national licensing requirement in veterinary science with a passing
21 score or scores on the examination or examinations equal to or
22 greater than the passing score required to pass the national licensing
23 examination or examinations administered in this state.

24 (3) The applicant has either graduated from a veterinary college
25 recognized by the board under Section 4846 or possesses a
26 certificate issued by the Educational Commission for Foreign
27 Veterinary Graduates (ECFVG) or the Program for the Assessment
28 of Veterinary Education Equivalence (PAVE).

29 (4) The applicant passes an examination concerning the statutes
30 and regulations of the Veterinary Medicine Practice Act,
31 administered by the board, pursuant to subparagraph (C) of
32 paragraph (2) of subdivision (a).

33 (5) The applicant completes an approved educational curriculum
34 on regionally specific and important diseases and conditions. The
35 board, in consultation with the California Veterinary Medical
36 Association (CVMA), shall approve educational curricula that
37 cover appropriate regionally specific and important diseases and
38 conditions that are common in California. The curricula shall focus
39 on small and large animal diseases consistent with the current
40 proportion of small and large animal veterinarians practicing in

1 the state. The approved curriculum shall not exceed 30 hours of
2 educational time. The approved curriculum may be offered by
3 multiple providers so that it is widely accessible to candidates
4 licensed under this subdivision.

5 (c) The board shall issue a temporary license valid for one year
6 to an applicant to practice veterinary medicine under the
7 supervision of another California-licensed veterinarian in good
8 standing if the applicant satisfies all of the following requirements:

9 (1) The applicant meets the requirements of paragraphs (1) to
10 (4), inclusive, of subdivision (b).

11 (2) The applicant would not be denied issuance of a license
12 under any other provision of this chapter.

13 (3) The applicant agrees to complete the approved educational
14 curriculum described in paragraph (5) of subdivision (b) on
15 regionally specific and important diseases and conditions during
16 the period of temporary licensure.

17 (d) Upon completion of the curriculum described in paragraph
18 (5) of subdivision (b), a temporary licensee shall submit an
19 application for full licensure accompanied by verification of
20 completion of that curriculum and all applicable fees.

21 (e) The board, in its discretion, may extend the expiration date
22 of a temporary license issued pursuant to subdivision (c) for not
23 more than one year for reasons of health, military service, or undue
24 hardship. An application for an extension shall be submitted on a
25 form provided by the board.

26 ~~SEC. 25.~~

27 *SEC. 29.* Section 4980.37 of the Business and Professions Code
28 is amended to read:

29 4980.37. (a) This section shall apply to applicants for licensure
30 or registration who began graduate study before August 1, 2012,
31 and completed that study on or before December 31, 2018. Those
32 applicants may alternatively qualify under paragraph (2) of
33 subdivision (a) of Section 4980.36.

34 (b) To qualify for a license or registration, applicants shall
35 possess a doctor's or master's degree in marriage, family, and child
36 counseling, marriage and family therapy, couple and family
37 therapy, psychology, clinical psychology, counseling psychology,
38 or counseling with an emphasis in either marriage, family, and
39 child counseling or marriage and family therapy, obtained from a
40 school, college, or university accredited by a regional or national

1 institutional accrediting agency that is recognized by the United
2 States Department of Education or approved by the Bureau for
3 Private Postsecondary Education. The board has the authority to
4 make the final determination as to whether a degree meets all
5 requirements, including, but not limited to, course requirements,
6 regardless of accreditation or approval. In order to qualify for
7 licensure pursuant to this section, a doctor's or master's degree
8 program shall be a single, integrated program primarily designed
9 to train marriage and family therapists and shall contain no less
10 than 48 semester *units* or 72 quarter units of instruction. This
11 instruction shall include no less than 12 semester units or 18 quarter
12 units of coursework in the areas of marriage, family, and child
13 counseling, and marital and family systems approaches to
14 treatment. The coursework shall include all of the following areas:

15 (1) The salient theories of a variety of psychotherapeutic
16 orientations directly related to marriage and family therapy, and
17 marital and family systems approaches to treatment.

18 (2) Theories of marriage and family therapy and how they can
19 be utilized in order to intervene therapeutically with couples,
20 families, adults, children, and groups.

21 (3) Developmental issues and life events from infancy to old
22 age and their effect on individuals, couples, and family
23 relationships. This may include coursework that focuses on specific
24 family life events and the psychological, psychotherapeutic, and
25 health implications that arise within couples and families,
26 including, but not limited to, childbirth, child rearing, childhood,
27 adolescence, adulthood, marriage, divorce, blended families,
28 stepparenting, abuse and neglect of older and dependent adults,
29 and geropsychology.

30 (4) A variety of approaches to the treatment of children.

31 The board shall, by regulation, set forth the subjects of instruction
32 required in this subdivision.

33 (c) (1) In addition to the 12 semester or 18 quarter units of
34 coursework specified in subdivision (b), the doctor's or master's
35 degree program shall contain not less than six semester *units* or
36 nine quarter units of supervised practicum in applied
37 psychotherapeutic technique, assessments, diagnosis, prognosis,
38 and treatment of premarital, couple, family, and child relationships,
39 including dysfunctions, healthy functioning, health promotion,
40 and illness prevention, in a supervised clinical placement that

1 provides supervised fieldwork experience within the scope of
2 practice of a marriage and family therapist.

3 (2) For applicants who enrolled in a degree program on or after
4 January 1, 1995, the practicum shall include a minimum of 150
5 hours of face-to-face experience counseling individuals, couples,
6 families, or groups.

7 (3) The practicum hours shall be considered as part of the 48
8 semester or 72 quarter unit requirement.

9 (d) As an alternative to meeting the qualifications specified in
10 subdivision (b), the board shall accept as equivalent degrees those
11 master's or doctor's degrees granted by educational institutions
12 whose degree program is approved by the Commission on
13 Accreditation for Marriage and Family Therapy Education.

14 (e) In order to provide an integrated course of study and
15 appropriate professional training, while allowing for innovation
16 and individuality in the education of marriage and family therapists,
17 a degree program that meets the educational qualifications for
18 licensure or registration under this section shall do all of the
19 following:

20 (1) Provide an integrated course of study that trains students
21 generally in the diagnosis, assessment, prognosis, and treatment
22 of mental disorders.

23 (2) Prepare students to be familiar with the broad range of
24 matters that may arise within marriage and family relationships.

25 (3) Train students specifically in the application of marriage
26 and family relationship counseling principles and methods.

27 (4) Encourage students to develop those personal qualities that
28 are intimately related to the counseling situation such as integrity,
29 sensitivity, flexibility, insight, compassion, and personal presence.

30 (5) Teach students a variety of effective psychotherapeutic
31 techniques and modalities that may be utilized to improve, restore,
32 or maintain healthy individual, couple, and family relationships.

33 (6) Permit an emphasis or specialization that may address any
34 one or more of the unique and complex array of human problems,
35 symptoms, and needs of Californians served by marriage and
36 family therapists.

37 (7) Prepare students to be familiar with cross-cultural mores
38 and values, including a familiarity with the wide range of racial
39 and ethnic backgrounds common among California's population,

1 including, but not limited to, Blacks, Hispanics, Asians, and Native
2 Americans.

3 (f) Educational institutions are encouraged to design the
4 practicum required by this section to include marriage and family
5 therapy experience in low income and multicultural mental health
6 settings.

7 ~~SEC. 26.~~

8 *SEC. 30.* Section 4980.39 of the Business and Professions Code
9 is amended to read:

10 4980.39. (a) An applicant for licensure whose education
11 qualifies him or her under Section 4980.37 shall complete, as a
12 condition of licensure, a minimum of 10 contact hours of
13 coursework in aging and long-term care, which may include, but
14 is not limited to, the biological, social, and psychological aspects
15 of aging. On and after January 1, 2012, this coursework shall
16 include instruction on the assessment and reporting of, as well as
17 treatment related to, elder and dependent adult abuse and neglect.

18 (b) Coursework taken in fulfillment of other educational
19 requirements for licensure pursuant to this chapter, or in a separate
20 course of study, may, at the discretion of the board, fulfill the
21 requirements of this section.

22 (c) In order to satisfy the coursework requirement of this section,
23 the applicant shall submit to the board a certification from the chief
24 academic officer of the educational institution from which the
25 applicant graduated stating that the coursework required by this
26 section is included within the institution's required curriculum for
27 graduation, or within the coursework, that was completed by the
28 applicant.

29 (d) The board shall not issue a license to the applicant until the
30 applicant has met the requirements of this section.

31 ~~SEC. 27.~~

32 *SEC. 31.* Section 4980.41 of the Business and Professions Code
33 is amended to read:

34 4980.41. (a) An applicant for licensure whose education
35 qualifies him or her under Section 4980.37 shall complete the
36 following coursework or training in order to be eligible to sit for
37 the licensing examinations as specified in subdivision (d) of Section
38 4980.40:

39 (1) A two semester or three quarter unit course in California
40 law and professional ethics for marriage and family therapists,

1 which shall include, but not be limited to, the following areas of
2 study:

3 (A) Contemporary professional ethics and statutory, regulatory,
4 and decisional laws that delineate the profession's scope of
5 practice.

6 (B) The therapeutic, clinical, and practical considerations
7 involved in the legal and ethical practice of marriage and family
8 therapy, including family law.

9 (C) The current legal patterns and trends in the mental health
10 profession.

11 (D) The psychotherapist-patient privilege, confidentiality, the
12 patient dangerous to self or others, and the treatment of minors
13 with and without parental consent.

14 (E) A recognition and exploration of the relationship between
15 a practitioner's sense of self and human values and his or her
16 professional behavior and ethics.

17 This course may be considered as part of the 48 semester or 72
18 quarter unit requirements contained in Section 4980.37.

19 (2) A minimum of seven contact hours of training or coursework
20 in child abuse assessment and reporting as specified in Section 28
21 and any regulations promulgated thereunder.

22 (3) A minimum of 10 contact hours of training or coursework
23 in human sexuality as specified in Section 25, and any regulations
24 promulgated thereunder. When coursework in a master's or
25 doctor's degree program is acquired to satisfy this requirement, it
26 shall be considered as part of the 48 semester or 72 quarter unit
27 requirement contained in Section 4980.37.

28 (4) For persons who began graduate study on or after January
29 1, 1986, a master's or doctor's degree qualifying for licensure shall
30 include specific instruction in alcoholism and other chemical
31 substance dependency as specified by regulation. When coursework
32 in a master's or doctor's degree program is acquired to satisfy this
33 requirement, it shall be considered as part of the 48 semester or
34 72 quarter unit requirement contained in Section 4980.37.
35 Coursework required under this paragraph may be satisfactory if
36 taken either in fulfillment of other educational requirements for
37 licensure or in a separate course. The applicant may satisfy this
38 requirement by successfully completing this coursework from a
39 master's or doctoral degree program at an accredited or approved
40 institution, as described in subdivision (b) of Section 4980.37, or

1 from a board-accepted provider of continuing education, as
2 described in Section 4980.54.

3 (5) For persons who began graduate study during the period
4 commencing on January 1, 1995, and ending on December 31,
5 2003, a master's or doctor's degree qualifying for licensure shall
6 include coursework in spousal or partner abuse assessment,
7 detection, and intervention. For persons who began graduate study
8 on or after January 1, 2004, a master's or doctor's degree qualifying
9 for licensure shall include a minimum of 15 contact hours of
10 coursework in spousal or partner abuse assessment, detection, and
11 intervention strategies, including knowledge of community
12 resources, cultural factors, and same gender abuse dynamics.
13 Coursework required under this paragraph may be satisfactory if
14 taken either in fulfillment of other educational requirements for
15 licensure or in a separate course. The applicant may satisfy this
16 requirement by successfully completing this coursework from a
17 master's or doctoral degree program at an accredited or approved
18 institution, as described in subdivision (b) of Section 4980.37, or
19 from a board-accepted provider of continuing education, as
20 described in Section 4980.54.

21 (6) For persons who began graduate study on or after January
22 1, 2001, an applicant shall complete a minimum of a two semester
23 or three quarter unit survey course in psychological testing. When
24 coursework in a master's or doctor's degree program is acquired
25 to satisfy this requirement, it may be considered as part of the 48
26 semester or 72 quarter unit requirement of Section 4980.37.

27 (7) For persons who began graduate study on or after January
28 1, 2001, an applicant shall complete a minimum of a two semester
29 or three quarter unit survey course in psychopharmacology. When
30 coursework in a master's or doctor's degree program is acquired
31 to satisfy this requirement, it may be considered as part of the 48
32 semester or 72 quarter unit requirement of Section 4980.37.

33 (b) The requirements added by paragraphs (6) and (7) of
34 subdivision (a) are intended to improve the educational
35 qualifications for licensure in order to better prepare future
36 licentiates for practice and are not intended in any way to expand
37 or restrict the scope of practice for licensed marriage and family
38 therapists.

1 ~~SEC. 28.~~

2 *SEC. 32.* Section 4980.72 of the Business and Professions Code
3 is amended to read:

4 4980.72. (a) This section applies to a person who is licensed
5 outside of California and applies for licensure on or after January
6 1, 2016.

7 (b) The board may issue a license to a person who, at the time
8 of submitting an application for a license pursuant to this chapter,
9 holds a valid license in good standing issued by a board of marriage
10 counselor examiners, board of marriage and family therapists, or
11 corresponding authority, of any state or country, if all of the
12 following conditions are satisfied:

13 (1) The applicant's education is substantially equivalent, as
14 defined in Section 4980.79. The applicant's degree title need not
15 be identical to that required by Section 4980.36 or 4980.37.

16 (2) The applicant complies with Section 4980.76, if applicable.

17 (3) The applicant's supervised experience is substantially
18 equivalent to that required for a license under this chapter. The
19 board shall consider hours of experience obtained outside of
20 California during the six-year period immediately preceding the
21 date the applicant initially obtained the license described above.
22 If the applicant has less than 3,000 hours of qualifying supervised
23 experience, time actively licensed as a marriage and family
24 therapist shall be accepted at a rate of 100 hours per month, up to
25 a maximum of 1,200 hours, if the applicant's degree meets the
26 practicum requirement described in subparagraph (C) of paragraph
27 (1) of subdivision (b) of Section 4980.79 without exemptions or
28 remediation.

29 (4) The applicant passes the California law and ethics
30 examination.

31 (5) The applicant passes a clinical examination designated by
32 the board. An applicant who obtained his or her license or
33 registration under another jurisdiction may qualify for licensure
34 with the board without taking the clinical examination if both of
35 the following conditions are met:

36 (A) The applicant obtained a passing score on the clinical
37 licensing examination set forth in regulation as accepted by the
38 board.

39 (B) The applicant's license or registration in that jurisdiction is
40 active, in good standing at the time of his or her application, and

1 is not revoked, suspended, surrendered, denied, or otherwise
2 restricted or encumbered.

3 ~~SEC. 29.~~

4 *SEC. 33.* Section 4980.78 of the Business and Professions Code
5 is amended to read:

6 4980.78. (a) This section applies to persons who apply for
7 licensure or registration on or after January 1, 2016, and who do
8 not hold a license as described in Section 4980.72.

9 (b) For purposes of Section 4980.74, education is substantially
10 equivalent if all of the following requirements are met:

11 (1) The degree is obtained from a school, college, or university
12 accredited by a regional or national institutional accrediting agency
13 that is recognized by the United States Department of Education
14 and consists of, at a minimum, the following:

15 (A) (i) For an applicant who obtained his or her degree within
16 the timeline prescribed by subdivision (a) of Section 4980.36, the
17 degree shall contain no less than 60 semester units or 90 quarter
18 units of instruction.

19 (ii) Up to 12 semester units or 18 quarter units of instruction
20 may be remediated, if missing from the degree. The remediation
21 may occur while the applicant is registered as an intern.

22 (B) For an applicant who obtained his or her degree within the
23 timeline prescribed by subdivision (a) of Section 4980.37, the
24 degree shall contain no less than 48 semester units or 72 quarter
25 units of instruction.

26 (C) Six semester units or nine quarter units of supervised
27 practicum, including, but not limited to, a minimum of 150 hours
28 of face-to-face experience counseling individuals, couples, families,
29 or groups, and an additional 75 hours of either face-to-face
30 experience counseling individuals, couples, families, or groups or
31 client centered advocacy, or a combination of face-to-face
32 experience counseling individuals, couples, families, or groups
33 and client centered advocacy.

34 (D) Twelve semester units or 18 quarter units in the areas of
35 marriage, family, and child counseling and marital and family
36 systems approaches to treatment, as specified in subparagraph (A)
37 of paragraph (1) of subdivision (d) of Section 4980.36.

38 (2) The applicant shall complete coursework in California law
39 and ethics as follows:

1 (A) An applicant who completed a course in law and
2 professional ethics for marriage and family therapists as specified
3 in paragraph (8) of subdivision (a) of Section 4980.81, that did not
4 contain instruction in California law and ethics, shall complete an
5 18-hour course in California law and professional ethics. The
6 content of the course shall include, but not be limited to,
7 advertising, scope of practice, scope of competence, treatment of
8 minors, confidentiality, dangerous patients, psychotherapist-patient
9 privilege, recordkeeping, patient access to records, state and federal
10 laws relating to confidentiality of patient health information, dual
11 relationships, child abuse, elder and dependent adult abuse, online
12 therapy, insurance reimbursement, civil liability, disciplinary
13 actions and unprofessional conduct, ethics complaints and ethical
14 standards, termination of therapy, standards of care, relevant family
15 law, therapist disclosures to patients, differences in legal and ethical
16 standards in different types of work settings, and licensing law
17 and licensing process. This coursework shall be completed prior
18 to registration as an intern.

19 (B) An applicant who has not completed a course in law and
20 professional ethics for marriage and family therapists as specified
21 in paragraph (8) of subdivision (a) of Section 4980.81 shall
22 complete this required coursework. The coursework shall contain
23 content specific to California law and ethics. This coursework shall
24 be completed prior to registration as an intern.

25 (3) The applicant completes the educational requirements
26 specified in Section 4980.81 not already completed in his or her
27 education. The coursework may be from an accredited school,
28 college, or university as specified in paragraph (1), from an
29 educational institution approved by the Bureau for Private
30 Postsecondary Education, or from a continuing education provider
31 that is acceptable to the board as defined in Section 4980.54.
32 Undergraduate courses shall not satisfy this requirement.

33 (4) The applicant completes the following coursework not
34 already completed in his or her education from an accredited
35 school, college, or university as specified in paragraph (1) from
36 an educational institution approved by the Bureau for Private
37 Postsecondary Education, or from a continuing education provider
38 that is acceptable to the board as defined in Section 4980.54.
39 Undergraduate courses shall not satisfy this requirement.

1 (A) At least three semester units, or 45 hours, of instruction
2 regarding the principles of mental health recovery-oriented care
3 and methods of service delivery in recovery-oriented practice
4 environments, including structured meetings with various
5 consumers and family members of consumers of mental health
6 services to enhance understanding of their experience of mental
7 illness, treatment, and recovery.

8 (B) At least one semester unit, or 15 hours, of instruction that
9 includes an understanding of various California cultures and the
10 social and psychological implications of socioeconomic position.

11 (5) An applicant may complete any units and course content
12 requirements required under paragraphs (3) and (4) not already
13 completed in his or her education while registered as an intern,
14 unless otherwise specified.

15 (6) The applicant's degree title need not be identical to that
16 required by subdivision (b) of Section 4980.36.

17 ~~SEC. 30.~~

18 *SEC. 34.* Section 4980.79 of the Business and Professions Code
19 is amended to read:

20 4980.79. (a) This section applies to persons who apply for
21 licensure or registration on or after January 1, 2016, and who hold
22 a license as described in Section 4980.72.

23 (b) For purposes of Section 4980.72, education is substantially
24 equivalent if all of the following requirements are met:

25 (1) The degree is obtained from a school, college, or university
26 accredited by a regional or national institutional accrediting agency
27 recognized by the United States Department of Education and
28 consists of, at a minimum, the following:

29 (A) (i) For an applicant who obtained his or her degree within
30 the timeline prescribed by subdivision (a) of Section 4980.36, the
31 degree shall contain no less than 60 semester units or 90 quarter
32 units of instruction.

33 (ii) Up to 12 semester units or 18 quarter units of instruction
34 may be remediated, if missing from the degree. The remediation
35 may occur while the applicant is registered as an intern.

36 (B) For an applicant who obtained his or her degree within the
37 timeline prescribed by subdivision (a) of Section 4980.37, the
38 degree shall contain no less than 48 semester units or 72 quarter
39 units of instruction.

1 (C) Six semester units or nine quarter units of supervised
2 practicum, including, but not limited to, a minimum of 150 hours
3 of face-to-face experience counseling individuals, couples, families,
4 or groups, and an additional 75 hours of either face-to-face
5 experience counseling individuals, couples, families, or groups or
6 client centered advocacy, or a combination of face-to-face
7 experience counseling individuals, couples, families, or groups
8 and client centered advocacy.

9 (i) An out-of-state applicant who has been licensed for at least
10 two years in clinical practice, as verified by the board, is exempt
11 from this requirement.

12 (ii) An out-of-state applicant who has been licensed for less
13 than two years in clinical practice, as verified by the board, who
14 does not meet the supervised practicum requirement, shall
15 remediate it by obtaining 150 hours of face-to-face experience
16 counseling individuals, couples, families, or groups, and an
17 additional 75 hours of either face-to-face experience counseling
18 individuals, couples, families, or groups or client centered
19 advocacy, or a combination of face-to-face experience counseling
20 individuals, couples, families, or groups and client centered
21 advocacy. These hours are in addition to the 3,000 hours of
22 experience required by this chapter, and shall be gained while
23 registered as an intern.

24 (D) Twelve semester units or 18 quarter units in the areas of
25 marriage, family, and child counseling and marital and family
26 systems approaches to treatment, as specified in subparagraph (A)
27 of paragraph (1) of subdivision (d) of Section 4980.36.

28 (2) An applicant shall complete coursework in California law
29 and ethics as follows:

30 (A) An applicant who completed a course in law and
31 professional ethics for marriage and family therapists as specified
32 in paragraph (8) of subdivision (a) of Section 4980.81 that did not
33 include instruction in California law and ethics, shall complete an
34 18-hour course in California law and professional ethics. The
35 content of the course shall include, but not be limited to,
36 advertising, scope of practice, scope of competence, treatment of
37 minors, confidentiality, dangerous patients, psychotherapist-patient
38 privilege, recordkeeping, patient access to records, state and federal
39 laws relating to confidentiality of patient health information, dual
40 relationships, child abuse, elder and dependent adult abuse, online

1 therapy, insurance reimbursement, civil liability, disciplinary
2 actions and unprofessional conduct, ethics complaints and ethical
3 standards, termination of therapy, standards of care, relevant family
4 law, therapist disclosures to patients, differences in legal and ethical
5 standards in different types of work settings, and licensing law
6 and licensing process. This coursework shall be completed prior
7 to registration as an intern.

8 (B) An applicant who has not completed a course in law and
9 professional ethics for marriage and family therapists as specified
10 in paragraph (8) of subdivision (a) of Section 4980.81 shall
11 complete this required coursework. The coursework shall include
12 content specific to California law and ethics. An applicant shall
13 complete this coursework prior to registration as an intern.

14 (3) The applicant completes the educational requirements
15 specified in Section 4980.81 not already completed in his or her
16 education. The coursework may be from an accredited school,
17 college, or university as specified in paragraph (1), from an
18 educational institution approved by the Bureau for Private
19 Postsecondary Education, or from a continuing education provider
20 that is acceptable to the board as defined in Section 4980.54.
21 Undergraduate coursework shall not satisfy this requirement.

22 (4) The applicant completes the following coursework not
23 already completed in his or her education from an accredited
24 school, college, or university as specified in paragraph (1) above,
25 from an educational institution approved by the Bureau for Private
26 Postsecondary Education, or from a continuing education provider
27 that is acceptable to the board as defined in Section 4980.54.
28 Undergraduate coursework shall not satisfy this requirement.

29 (A) At least three semester units, or 45 hours, of instruction
30 pertaining to the principles of mental health recovery-oriented care
31 and methods of service delivery in recovery-oriented practice
32 environments, including structured meetings with various
33 consumers and family members of consumers of mental health
34 services to enhance understanding of their experience of mental
35 illness, treatment, and recovery.

36 (B) At least one semester unit, or 15 hours, of instruction that
37 includes an understanding of various California cultures and the
38 social and psychological implications of socioeconomic position.

39 (5) An applicant's degree title need not be identical to that
40 required by subdivision (b) of Section 4980.36.

1 (6) An applicant may complete any units and course content
2 requirements required under paragraphs (3) and (4) not already
3 completed in his or her education while registered as an intern,
4 unless otherwise specified.

5 ~~SEC. 31.~~

6 *SEC. 35.* Section 4990.30 of the Business and Professions Code
7 is amended to read:

8 4990.30. (a) A licensed marriage and family therapist, associate
9 marriage and family therapist, licensed clinical social worker,
10 associate clinical social worker, licensed professional clinical
11 counselor, associate professional clinical counselor, or licensed
12 educational psychologist whose license or registration has been
13 revoked, suspended, or placed on probation, may petition the board
14 for reinstatement or modification of the penalty, including
15 modification or termination of probation. The petition shall be on
16 a form provided by the board and shall state any facts and
17 information as may be required by the board including, but not
18 limited to, proof of compliance with the terms and conditions of
19 the underlying disciplinary order. The petition shall be verified by
20 the petitioner who shall file an original and sufficient copies of
21 the petition, together with any supporting documents, for the
22 members of the board, the administrative law judge, and the
23 Attorney General.

24 (b) The licensee or registrant may file the petition on or after
25 the expiration of the following timeframes, each of which
26 commences on the effective date of the decision ordering the
27 disciplinary action or, if the order of the board, or any portion of
28 it, is stayed by the board itself or by the superior court, from the
29 date the disciplinary action is actually implemented in its entirety:

30 (1) Three years for reinstatement of a license or registration that
31 was revoked for unprofessional conduct, except that the board
32 may, in its sole discretion, specify in its revocation order that a
33 petition for reinstatement may be filed after two years.

34 (2) Two years for early termination of any probation period of
35 three years or more.

36 (3) One year for modification of a condition, reinstatement of
37 a license or registration revoked for mental or physical illness, or
38 termination of probation of less than three years.

1 (c) The petition may be heard by the board itself or the board
2 may assign the petition to an administrative law judge pursuant to
3 Section 11512 of the Government Code.

4 (d) The petitioner may request that the board schedule the
5 hearing on the petition for a board meeting at a specific city where
6 the board regularly meets.

7 (e) The petitioner and the Attorney General shall be given timely
8 notice by letter of the time and place of the hearing on the petition
9 and an opportunity to present both oral and documentary evidence
10 and argument to the board or the administrative law judge.

11 (f) The petitioner shall at all times have the burden of production
12 and proof to establish by clear and convincing evidence that he or
13 she is entitled to the relief sought in the petition.

14 (g) The board, when it is hearing the petition itself, or an
15 administrative law judge sitting for the board, may consider all
16 activities of the petitioner since the disciplinary action was taken,
17 the offense for which the petitioner was disciplined, the petitioner's
18 activities during the time his or her license or registration was in
19 good standing, and the petitioner's rehabilitative efforts, general
20 reputation for truth, and professional ability.

21 (h) The hearing may be continued from time to time as the board
22 or the administrative law judge deems appropriate but in no case
23 may the hearing on the petition be delayed more than 180 days
24 from its filing without the consent of the petitioner.

25 (i) The board itself, or the administrative law judge if one is
26 designated by the board, shall hear the petition and shall prepare
27 a written decision setting forth the reasons supporting the decision.
28 In a decision granting a petition reinstating a license or modifying
29 a penalty, the board itself, or the administrative law judge, may
30 impose any terms and conditions that the agency deems reasonably
31 appropriate, including those set forth in Sections 823 and 4990.40.
32 If a petition is heard by an administrative law judge sitting alone,
33 the administrative law judge shall prepare a proposed decision and
34 submit it to the board. The board may take action with respect to
35 the proposed decision and petition as it deems appropriate.

36 (j) The petitioner shall pay a fingerprinting fee and provide a
37 current set of his or her fingerprints to the board. The petitioner
38 shall execute a form authorizing release to the board or its designee,
39 of all information concerning the petitioner's current physical and
40 mental condition. Information provided to the board pursuant to

1 the release shall be confidential and shall not be subject to
2 discovery or subpoena in any other proceeding, and shall not be
3 admissible in any action, other than before the board, to determine
4 the petitioner's fitness to practice as required by Section 822.

5 (k) The board may delegate to its executive officer authority to
6 order investigation of the contents of the petition.

7 (l) No petition shall be considered while the petitioner is under
8 sentence for any criminal offense, including any period during
9 which the petitioner is on court-imposed probation or parole or
10 the petitioner is required to register pursuant to Section 290 of the
11 Penal Code. No petition shall be considered while there is an
12 accusation or petition to revoke probation pending against the
13 petitioner.

14 (m) Except in those cases where the petitioner has been
15 disciplined for violation of Section 822, the board may in its
16 discretion deny without hearing or argument any petition that is
17 filed pursuant to this section within a period of two years from the
18 effective date of a prior decision following a hearing under this
19 section.

20 ~~SEC. 32.~~

21 *SEC. 36.* Section 4992 of the Business and Professions Code
22 is amended to read:

23 4992. (a) Every applicant for a license under this chapter shall
24 file an application with the board accompanied by the application
25 fee prescribed by this chapter. Every application shall also be
26 accompanied by the applicable examination fee prescribed by this
27 chapter.

28 (b) The application shall contain information showing that the
29 applicant has all the qualifications required by the board for
30 admission to an examination.

31 ~~SEC. 33.~~

32 *SEC. 37.* Section 4996.17 of the Business and Professions Code
33 is amended to read:

34 4996.17. (a) (1) Experience gained outside of California shall
35 be accepted toward the licensure requirements if it is substantially
36 the equivalent of the requirements of this chapter.

37 (2) Commencing January 1, 2014, an applicant with education
38 gained outside of California shall complete an 18-hour course in
39 California law and professional ethics. The content of the course
40 shall include, but not be limited to, the following: advertising,

1 scope of practice, scope of competence, treatment of minors,
2 confidentiality, dangerous patients, psychotherapist-patient
3 privilege, recordkeeping, patient access to records, state and federal
4 laws related to confidentiality of patient health information, dual
5 relationships, child abuse, elder and dependent adult abuse, online
6 therapy, insurance reimbursement, civil liability, disciplinary
7 actions and unprofessional conduct, ethics complaints and ethical
8 standards, termination of therapy, standards of care, relevant family
9 law, therapist disclosures to patients, differences in legal and ethical
10 standards in different types of work settings, and licensing law
11 and process.

12 (b) The board may issue a license to any person who, at the time
13 of application, holds a valid clinical social work license issued by
14 a board of clinical social work examiners or corresponding
15 authority of any state, if the person passes, or has passed, the
16 licensing examinations as specified in Section 4996.1 and pays
17 the required fees. Issuance of the license is conditioned upon all
18 of the following:

19 (1) The applicant has supervised experience that is substantially
20 the equivalent of that required by this chapter. If the applicant has
21 less than 3,200 hours of qualifying supervised experience, time
22 actively licensed as a clinical social worker shall be accepted at a
23 rate of 100 hours per month up to a maximum of 1,200 hours.

24 (2) Completion of the following coursework or training in or
25 out of this state:

26 (A) A minimum of seven contact hours of training or coursework
27 in child abuse assessment and reporting as specified in Section 28,
28 and any regulations promulgated thereunder.

29 (B) A minimum of 10 contact hours of training or coursework
30 in human sexuality as specified in Section 25, and any regulations
31 promulgated thereunder.

32 (C) A minimum of 15 contact hours of training or coursework
33 in alcoholism and other chemical substance dependency, as
34 specified by regulation.

35 (D) A minimum of 15 contact hours of coursework or training
36 in spousal or partner abuse assessment, detection, and intervention
37 strategies.

38 (3) Commencing January 1, 2014, completion of an 18-hour
39 course in California law and professional ethics. The content of
40 the course shall include, but not be limited to, the following:

1 advertising, scope of practice, scope of competence, treatment of
2 minors, confidentiality, dangerous patients, psychotherapist-patient
3 privilege, recordkeeping, patient access to records, state and federal
4 laws related to confidentiality of patient health information, dual
5 relationships, child abuse, elder and dependent adult abuse, online
6 therapy, insurance reimbursement, civil liability, disciplinary
7 actions and unprofessional conduct, ethics complaints and ethical
8 standards, termination of therapy, standards of care, relevant family
9 law, therapist disclosures to patients, differences in legal and ethical
10 standards in different types of work settings, and licensing law
11 and process.

12 (4) The applicant's license is in good standing and is not
13 suspended, revoked, restricted, sanctioned, or voluntarily
14 surrendered in any state.

15 (5) The applicant is not currently under investigation in any
16 other state, and has not been charged with an offense for any act
17 substantially related to the practice of social work by any public
18 agency, entered into any consent agreement or been subject to an
19 administrative decision that contains conditions placed by an
20 agency upon an applicant's professional conduct or practice,
21 including any voluntary surrender of license, or been the subject
22 of an adverse judgment resulting from the practice of social work
23 that the board determines constitutes evidence of a pattern of
24 incompetence or negligence.

25 (6) The applicant shall provide a certification from each state
26 where he or she holds a license pertaining to licensure, disciplinary
27 action, and complaints pending.

28 (7) The applicant is not subject to denial of licensure under
29 Section 480, 4992.3, 4992.35, or 4992.36.

30 (c) The board may issue a license to any person who, at the time
31 of application, holds a valid clinical social work license issued by
32 a board of clinical social work examiners or a corresponding
33 authority of any state, if the person has held that license for at least
34 four years immediately preceding the date of application, the person
35 passes, or has passed, the licensing examinations as specified in
36 Section 4996.1, and the person pays the required fees. Issuance of
37 the license is conditioned upon all of the following:

38 (1) Completion of the following coursework or training in or
39 out of state:

1 (A) A minimum of seven contact hours of training or coursework
2 in child abuse assessment and reporting as specified in Section 28,
3 and any regulations promulgated thereunder.

4 (B) A minimum of 10 contact hours of training or coursework
5 in human sexuality as specified in Section 25, and any regulations
6 promulgated thereunder.

7 (C) A minimum of 15 contact hours of training or coursework
8 in alcoholism and other chemical substance dependency, as
9 specified by regulation.

10 (D) A minimum of 15 contact hours of coursework or training
11 in spousal or partner abuse assessment, detection, and intervention
12 strategies.

13 (2) Commencing January 1, 2014, completion of an 18-hour
14 course in California law and professional ethics. The content of
15 the course shall include, but not be limited to, the following:
16 advertising, scope of practice, scope of competence, treatment of
17 minors, confidentiality, dangerous patients, psychotherapist-patient
18 privilege, recordkeeping, patient access to records, state and federal
19 laws related to confidentiality of patient health information, dual
20 relationships, child abuse, elder and dependent adult abuse, online
21 therapy, insurance reimbursement, civil liability, disciplinary
22 actions and unprofessional conduct, ethics complaints and ethical
23 standards, termination of therapy, standards of care, relevant family
24 law, therapist disclosures to patients, differences in legal and ethical
25 standards in different types of work settings, and licensing law
26 and process.

27 (3) The applicant has been licensed as a clinical social worker
28 continuously for a minimum of four years prior to the date of
29 application.

30 (4) The applicant's license is in good standing and is not
31 suspended, revoked, restricted, sanctioned, or voluntarily
32 surrendered in any state.

33 (5) The applicant is not currently under investigation in any
34 other state, and has not been charged with an offense for any act
35 substantially related to the practice of social work by any public
36 agency, entered into any consent agreement or been subject to an
37 administrative decision that contains conditions placed by an
38 agency upon an applicant's professional conduct or practice,
39 including any voluntary surrender of license, or been the subject
40 of an adverse judgment resulting from the practice of social work

1 that the board determines constitutes evidence of a pattern of
2 incompetence or negligence.

3 (6) The applicant provides a certification from each state where
4 he or she holds a license pertaining to licensure, disciplinary action,
5 and complaints pending.

6 (7) The applicant is not subject to denial of licensure under
7 Section 480, 4992.3, 4992.35, or 4992.36.

8 (d) An applicant who obtained his or her license or registration
9 under another jurisdiction may qualify for licensure with the board
10 without taking the clinical examination specified in Section 4996.1
11 if both of the following conditions are met:

12 (1) The applicant obtained a passing score on the clinical
13 licensing examination set forth in regulation as accepted by the
14 board.

15 (2) The applicant's license or registration in that jurisdiction is
16 active, in good standing at the time of his or her application, and
17 is not revoked, suspended, surrendered, denied, or otherwise
18 restricted or encumbered.

19 ~~SEC. 34.~~

20 *SEC. 38.* Section 4999.14 of the Business and Professions Code
21 is amended to read:

22 4999.14. The board shall do all of the following:

23 (a) Communicate information about its activities, the
24 requirements and qualifications for licensure, and the practice of
25 professional clinical counseling to the relevant educational
26 institutions, supervisors, professional associations, applicants,
27 clinical counselor trainees, associates, and the public.

28 (b) Develop policies and procedures to assist educational
29 institutions in meeting the educational qualifications of Sections
30 4999.32 and 4999.33.

31 ~~SEC. 35.~~

32 *SEC. 39.* Section 4999.22 of the Business and Professions Code
33 is amended to read:

34 4999.22. (a) Nothing in this chapter shall prevent qualified
35 persons from doing work of a psychosocial nature consistent with
36 the standards and ethics of their respective professions. However,
37 these qualified persons shall not hold themselves out to the public
38 by any title or description of services incorporating the words
39 "licensed professional clinical counselor" and shall not state that
40 they are licensed to practice professional clinical counseling, unless

1 they are otherwise licensed to provide professional clinical
2 counseling services.

3 (b) Nothing in this chapter shall be construed to constrict, limit,
4 or withdraw provisions of the Medical Practice Act, the Clinical
5 Social Worker Practice Act, the Nursing Practice Act, the
6 Psychology Licensing Law, or the Licensed Marriage and Family
7 Therapist Act.

8 (c) This chapter shall not apply to any priest, rabbi, or minister
9 of the gospel of any religious denomination who performs
10 counseling services as part of his or her pastoral or professional
11 duties, or to any person who is admitted to practice law in this
12 state, or who is licensed to practice medicine, who provides
13 counseling services as part of his or her professional practice.

14 (d) This chapter shall not apply to an employee of a
15 governmental entity or a school, college, or university, or of an
16 institution both nonprofit and charitable, if his or her practice is
17 performed solely under the supervision of the entity, school,
18 college, university, or institution by which he or she is employed,
19 and if he or she performs those functions as part of the position
20 for which he or she is employed.

21 (e) All persons registered as associates or licensed under this
22 chapter shall not be exempt from this chapter or the jurisdiction
23 of the board.

24 ~~SEC. 36.~~

25 *SEC. 40.* Section 4999.32 of the Business and Professions Code
26 is amended to read:

27 4999.32. (a) This section shall apply to applicants for licensure
28 or registration who began graduate study before August 1, 2012,
29 and completed that study on or before December 31, 2018. Those
30 applicants may alternatively qualify under paragraph (2) of
31 subdivision (a) of Section 4999.33.

32 (b) To qualify for licensure or registration, applicants shall
33 possess a master's or doctoral degree that is counseling or
34 psychotherapy in content and that meets the requirements of this
35 section, obtained from an accredited or approved institution, as
36 defined in Section 4999.12. For purposes of this subdivision, a
37 degree is "counseling or psychotherapy in content" if it contains
38 the supervised practicum or field study experience described in
39 paragraph (3) of subdivision (c) and, except as provided in
40 subdivision (d), the coursework in the core content areas listed in

1 subparagraphs (A) to (I), inclusive, of paragraph (1) of subdivision
2 (c).

3 (c) The degree described in subdivision (b) shall contain not
4 less than 48 graduate semester *units* or 72 graduate quarter units
5 of instruction, which shall, except as provided in subdivision (d),
6 include all of the following:

7 (1) The equivalent of at least three semester units or four and
8 one-half quarter units of graduate study in each of the following
9 core content areas:

10 (A) Counseling and psychotherapeutic theories and techniques,
11 including the counseling process in a multicultural society, an
12 orientation to wellness and prevention, counseling theories to assist
13 in selection of appropriate counseling interventions, models of
14 counseling consistent with current professional research and
15 practice, development of a personal model of counseling, and
16 multidisciplinary responses to crises, emergencies, and disasters.

17 (B) Human growth and development across the lifespan,
18 including normal and abnormal behavior and an understanding of
19 developmental crises, disability, psychopathology, and situational
20 and environmental factors that affect both normal and abnormal
21 behavior.

22 (C) Career development theories and techniques, including
23 career development decisionmaking models and interrelationships
24 among and between work, family, and other life roles and factors,
25 including the role of multicultural issues in career development.

26 (D) Group counseling theories and techniques, including
27 principles of group dynamics, group process components,
28 developmental stage theories, therapeutic factors of group work,
29 group leadership styles and approaches, pertinent research and
30 literature, group counseling methods, and evaluation of
31 effectiveness.

32 (E) Assessment, appraisal, and testing of individuals, including
33 basic concepts of standardized and nonstandardized testing and
34 other assessment techniques, norm-referenced and
35 criterion-referenced assessment, statistical concepts, social and
36 cultural factors related to assessment and evaluation of individuals
37 and groups, and ethical strategies for selecting, administering, and
38 interpreting assessment instruments and techniques in counseling.

39 (F) Multicultural counseling theories and techniques, including
40 counselors' roles in developing cultural self-awareness, identity

1 development, promoting cultural social justice, individual and
2 community strategies for working with and advocating for diverse
3 populations, and counselors' roles in eliminating biases and
4 prejudices, and processes of intentional and unintentional
5 oppression and discrimination.

6 (G) Principles of the diagnostic process, including differential
7 diagnosis, and the use of current diagnostic tools, such as the
8 current edition of the Diagnostic and Statistical ~~Manual~~, *Manual*
9 *of Mental Disorders*, the impact of co-occurring substance use
10 disorders or medical psychological disorders, established diagnostic
11 criteria for mental or emotional disorders, and the treatment
12 modalities and placement criteria within the continuum of care.

13 (H) Research and evaluation, including studies that provide an
14 understanding of research methods, statistical analysis, the use of
15 research to inform evidence-based practice, the importance of
16 research in advancing the profession of counseling, and statistical
17 methods used in conducting research, needs assessment, and
18 program evaluation.

19 (I) Professional orientation, ethics, and law in counseling,
20 including professional ethical standards and legal considerations,
21 licensing law and process, regulatory laws that delineate the
22 profession's scope of practice, counselor-client privilege,
23 confidentiality, the client dangerous to self or others, treatment of
24 minors with or without parental consent, relationship between
25 practitioner's sense of self and human values, functions and
26 relationships with other human service providers, strategies for
27 collaboration, and advocacy processes needed to address
28 institutional and social barriers that impede access, equity, and
29 success for clients.

30 (2) In addition to the course requirements described in paragraph
31 (1), a minimum of 12 semester units or 18 quarter units of advanced
32 coursework to develop knowledge of specific treatment issues,
33 special populations, application of counseling constructs,
34 assessment and treatment planning, clinical interventions,
35 therapeutic relationships, psychopathology, or other clinical topics.

36 (3) Not less than six semester units or nine quarter units of
37 supervised practicum or field study experience that involves direct
38 client contact in a clinical setting that provides a range of
39 professional clinical counseling experience, including the
40 following:

- 1 (A) Applied psychotherapeutic techniques.
- 2 (B) Assessment.
- 3 (C) Diagnosis.
- 4 (D) Prognosis.
- 5 (E) Treatment.
- 6 (F) Issues of development, adjustment, and maladjustment.
- 7 (G) Health and wellness promotion.
- 8 (H) Other recognized counseling interventions.
- 9 (I) A minimum of 150 hours of face-to-face supervised clinical
- 10 experience counseling individuals, families, or groups.
- 11 (d) (1) (A) An applicant whose degree is deficient in no more
- 12 than two of the required areas of study listed in subparagraphs (A)
- 13 to (I), inclusive, of paragraph (1) of subdivision (c) may satisfy
- 14 those deficiencies by successfully completing ~~post-master's~~
- 15 *postmaster's* or postdoctoral degree coursework at an accredited
- 16 or approved institution, as defined in Section 4999.12.
- 17 (B) Notwithstanding subparagraph (A), no applicant shall be
- 18 deficient in the required areas of study specified in ~~subparagraphs~~
- 19 *subparagraph* (E) or (G) of paragraph (1) of subdivision (c).
- 20 (2) Coursework taken to meet deficiencies in the required areas
- 21 of study listed in subparagraphs (A) to (I), inclusive, of paragraph
- 22 (1) of subdivision (c) shall be the equivalent of three semester units
- 23 or four and one-half quarter units of study.
- 24 (3) The board shall make the final determination as to whether
- 25 a degree meets all requirements, including, but not limited to,
- 26 course requirements, regardless of accreditation.
- 27 (e) In addition to the degree described in this section, or as part
- 28 of that degree, an applicant shall complete the following
- 29 coursework or training prior to registration as an associate:
- 30 (1) A minimum of 15 contact hours of instruction in alcoholism
- 31 and other chemical substance abuse dependency, as specified by
- 32 regulation.
- 33 (2) A minimum of 10 contact hours of training or coursework
- 34 in human sexuality as specified in Section 25, and any regulations
- 35 promulgated thereunder.
- 36 (3) A two semester unit or three quarter unit survey course in
- 37 psychopharmacology.
- 38 (4) A minimum of 15 contact hours of instruction in spousal or
- 39 partner abuse assessment, detection, and intervention strategies,

1 including knowledge of community resources, cultural factors,
2 and same gender abuse dynamics.

3 (5) A minimum of seven contact hours of training or coursework
4 in child abuse assessment and reporting as specified in Section 28
5 and any regulations adopted thereunder.

6 (6) A minimum of 18 contact hours of instruction in California
7 law and professional ethics for professional clinical counselors
8 that includes, but is not limited to, instruction in advertising, scope
9 of practice, scope of competence, treatment of minors,
10 confidentiality, dangerous clients, psychotherapist-client privilege,
11 recordkeeping, client access to records, dual relationships, child
12 abuse, elder and dependent adult abuse, online therapy, insurance
13 reimbursement, civil liability, disciplinary actions and
14 unprofessional conduct, ethics complaints and ethical standards,
15 termination of therapy, standards of care, relevant family law,
16 therapist disclosures to clients, and state and federal laws related
17 to confidentiality of patient health information. When coursework
18 in a master's or doctoral degree program is acquired to satisfy this
19 requirement, it shall be considered as part of the 48 semester unit
20 or 72 quarter unit requirement in subdivision (c).

21 (7) A minimum of 10 contact hours of instruction in aging and
22 long-term care, which may include, but is not limited to, the
23 biological, social, and psychological aspects of aging. On and after
24 January 1, 2012, this coursework shall include instruction on the
25 assessment and reporting of, as well as treatment related to, elder
26 and dependent adult abuse and neglect.

27 (8) A minimum of 15 contact hours of instruction in crisis or
28 trauma counseling, including multidisciplinary responses to crises,
29 emergencies, or disasters, and brief, intermediate, and long-term
30 approaches.

31 ~~SEC. 37.~~

32 *SEC. 41.* Section 4999.48 of the Business and Professions Code
33 is amended to read:

34 4999.48. The board shall adopt regulations regarding the
35 supervision of associates that may include, but not be limited to,
36 the following:

- 37 (a) Supervisor qualifications.
- 38 (b) Continuing education requirements of supervisors.
- 39 (c) Registration or licensing of supervisors, or both.
- 40 (d) General responsibilities of supervisors.

1 (e) The board's authority in cases of noncompliance or gross
2 or repeated negligence by supervisors.

3 ~~SEC. 38.~~

4 *SEC. 42.* Section 4999.60 of the Business and Professions Code
5 is amended to read:

6 4999.60. (a) This section applies to persons who are licensed
7 outside of California and apply for licensure on or after January
8 1, 2016.

9 (b) The board may issue a license to a person who, at the time
10 of submitting an application for a license pursuant to this chapter,
11 holds a valid license in good standing as a professional clinical
12 counselor, or other counseling license that allows the applicant to
13 independently provide clinical mental health services, in another
14 jurisdiction of the United States, if all of the following conditions
15 are satisfied:

16 (1) The applicant's education is substantially equivalent, as
17 defined in Section 4999.63.

18 (2) The applicant complies with subdivision (c) of Section
19 4999.40, if applicable.

20 (3) The applicant's supervised experience is substantially
21 equivalent to that required for a license under this chapter. The
22 board shall consider hours of experience obtained outside of
23 California during the six-year period immediately preceding the
24 date the applicant initially obtained the license described above.
25 If the applicant has less than 3,000 hours of qualifying supervised
26 experience, time actively licensed as a professional clinical
27 counselor shall be accepted at a rate of 100 hours per month up to
28 a maximum of 1,200 hours if the applicant's degree meets the
29 practicum requirement described in subparagraph (C) of paragraph
30 (1) of subdivision (b) of Section 4999.63 without exemptions or
31 remediation.

32 (4) The applicant passes the examinations required to obtain a
33 license under this chapter. An applicant who obtained his or her
34 license or registration under another jurisdiction may qualify for
35 licensure with the board without taking the clinical examination
36 if both of the following conditions are met:

37 (A) The applicant obtained a passing score on the clinical
38 licensing examination set forth in regulation as accepted by the
39 board.

1 (B) The applicant’s license or registration in that jurisdiction is
2 active, in good standing at the time of his or her application, and
3 is not revoked, suspended, surrendered, denied, or otherwise
4 restricted or encumbered.

5 ~~SEC. 39.~~

6 *SEC. 43.* Section 4999.62 of the Business and Professions Code
7 is amended to read:

8 4999.62. (a) This section applies to persons who apply for
9 licensure or registration on or after January 1, 2016, and who do
10 not hold a license as described in Section 4999.60.

11 (b) For purposes of Section 4999.61, education is substantially
12 equivalent if all of the following requirements are met:

13 (1) The degree is obtained from an accredited or approved
14 institution, as defined in Section 4999.12, and consists of, at a
15 minimum, the following:

16 (A) (i) For an applicant who obtained his or her degree within
17 the timeline prescribed by subdivision (a) of Section 4999.33 the
18 degree shall contain no less than 60 graduate semester units or 90
19 graduate quarter units of instruction.

20 (ii) Up to 12 semester units or 18 quarter units of instruction
21 may be remediated, if missing from the degree. The remediation
22 may occur while the applicant is registered as an associate.

23 (B) For an applicant who obtained his or her degree within the
24 timeline prescribed by subdivision (a) of Section 4999.32 the
25 degree shall contain no less than 48 graduate semester units or 72
26 graduate quarter units of instruction.

27 (C) Six semester units or nine quarter units of supervised
28 practicum or field study experience, including, but not limited to,
29 a minimum of 280 hours of face-to-face supervised clinical
30 experience counseling individuals, families, or groups.

31 (D) The required areas of study listed in subparagraphs (A) to
32 (M), inclusive, of paragraph (1) of subdivision (c) of Section
33 4999.33.

34 (i) (I) An applicant whose degree is deficient in no more than
35 six of the required areas of study listed in subparagraphs (A) to
36 (M), inclusive, of paragraph (1) of subdivision (c) of Section
37 4999.33 may satisfy those deficiencies by successfully completing
38 graduate level coursework at an accredited or approved institution,
39 as defined in Section 4999.12. Coursework taken to meet any

1 deficiencies shall be the equivalent of three semester units or four
2 and one-half quarter units of study.

3 (II) Notwithstanding subclause (I), no applicant shall be deficient
4 in the required areas of study specified in subparagraph (E) or (G)
5 of paragraph (1) of subdivision (c) of Section 4999.33.

6 (ii) An applicant who completed a course in professional
7 orientation, ethics, and law in counseling as required by
8 subparagraph (I) of paragraph (1) of subdivision (c) of Section
9 4999.33 that did not contain instruction in California law and ethics
10 shall complete an 18-hour course in California law and professional
11 ethics that includes, but is not limited to, instruction in advertising,
12 scope of practice, scope of competence, treatment of minors,
13 confidentiality, dangerous clients, psychotherapist-client privilege,
14 recordkeeping, client access to records, state and federal laws
15 relating to confidentiality of patient health information, dual
16 relationships, child abuse, elder and dependent adult abuse, online
17 therapy, insurance reimbursement, civil liability, disciplinary
18 actions and unprofessional conduct, ethics complaints and ethical
19 standards, termination of therapy, standards of care, relevant family
20 law, and therapist disclosures to clients. An applicant shall
21 complete this coursework prior to registration as an associate.

22 (iii) An applicant who has not completed a course in professional
23 orientation, ethics, and law in counseling as required by
24 subparagraph (I) of paragraph (1) of subdivision (c) of Section
25 4999.33 shall complete this required coursework, including content
26 in California law and ethics. An applicant shall complete this
27 coursework prior to registration as an associate.

28 (2) The applicant completes any units required by subdivision
29 (c) of Section 4999.33 not already completed in his or her education
30 as follows:

31 (A) At least 15 semester units or 22.5 quarter units of advanced
32 coursework to develop knowledge of specific treatment issues or
33 special populations. This coursework is in addition to the course
34 requirements described in subparagraph (D) of paragraph (1).

35 (B) Coursework shall be from an accredited or approved school,
36 college, or university as defined in Section 4999.12.

37 (3) (A) The applicant completes the following coursework not
38 already completed in his or her education:

39 (i) A minimum of 10 contact hours of training in human
40 sexuality, as specified in Section 25 and any regulations

1 promulgated thereunder, including the study of the physiological,
2 psychological, and social cultural variables associated with sexual
3 behavior, gender identity, and the assessment and treatment of
4 psychosexual dysfunction.

5 (ii) A minimum of 15 contact hours of instruction in spousal or
6 partner abuse assessment, detection, intervention strategies, and
7 same-gender abuse dynamics.

8 (iii) A minimum of seven contact hours of training or
9 coursework in child abuse assessment and reporting as specified
10 in Section 28 and any regulations promulgated thereunder.

11 (iv) A minimum of 10 contact hours of instruction in aging and
12 long-term care, including biological, social, cognitive, and
13 psychological aspects of aging. This coursework shall include
14 instruction on the assessment and reporting of, as well as treatment
15 related to, elder and dependent adult abuse and neglect.

16 (B) This coursework may be from an accredited or approved
17 school, college, or university as defined in Section 4999.12, or
18 from a continuing education provider that is acceptable to the board
19 as defined in Section 4999.76. Undergraduate coursework shall
20 not satisfy this requirement.

21 (4) The applicant completes the following coursework not
22 already completed in his or her education from an accredited or
23 approved school, college, or university as defined in Section
24 4999.12, or from a continuing education provider that is acceptable
25 to the board as defined in Section 4999.76. Undergraduate
26 coursework shall not satisfy this requirement.

27 (A) At least three semester units, or 45 hours, of instruction
28 regarding the principles of mental health recovery-oriented care
29 and methods of service delivery in recovery-oriented practice
30 environments, including structured meetings with various
31 consumers and family members of consumers of mental health
32 services to enhance understanding of their experiences of mental
33 illness, treatment, and recovery.

34 (B) At least one semester unit, or 15 hours, of instruction that
35 includes an understanding of various California cultures and the
36 social and psychological implications of socioeconomic position.

37 (5) An applicant may complete any units and course content
38 requirements required under paragraph (2), (3), or (4) not already
39 completed in his or her education while registered with the board
40 as an associate.

1 ~~SEC. 40.~~

2 ~~SEC. 44.~~ Section 4999.63 of the Business and Professions Code
3 is amended to read:

4 4999.63. (a) This section applies to persons who apply for
5 licensure or registration on or after January 1, 2016, and who hold
6 a license as described in Section 4999.60.

7 (b) For purposes of Section 4999.60, education is substantially
8 equivalent if all of the following requirements are met:

9 (1) The degree is obtained from an accredited or approved
10 institution, as defined in Section 4999.12, and consists of the
11 following:

12 (A) (i) For an applicant who obtained his or her degree within
13 the timeline prescribed by subdivision (a) of Section 4999.33 the
14 degree shall contain no less than 60 graduate semester *units* or 90
15 graduate quarter units of instruction.

16 (ii) Up to 12 semester units or 18 quarter units of instruction
17 may be remediated, if missing from the degree. The remediation
18 may occur while the applicant is registered as an associate.

19 (B) For an applicant who obtained his or her degree within the
20 timeline prescribed by subdivision (a) of Section 4999.32 the
21 degree shall contain no less than 48 graduate semester *units* or 72
22 graduate quarter units of instruction.

23 (C) Six semester units or nine quarter units of supervised
24 practicum or field study experience, including, but not limited to,
25 a minimum of 280 hours of face-to-face supervised clinical
26 experience counseling individuals, families, or groups.

27 (i) An applicant who has been licensed for at least two years in
28 clinical practice, as verified by the board, is exempt from this
29 requirement.

30 (ii) An out-of-state applicant who has been licensed for less
31 than two years in clinical practice, as verified by the board, who
32 does not meet the supervised practicum or field study experience
33 requirement, shall remediate the requirement by demonstrating
34 completion of a total of 280 hours of face-to-face supervised
35 clinical experience, as specified in subparagraph (K) of paragraph
36 (3) of subdivision (c) of Section 4999.33. Any postdegree hours
37 gained to meet this requirement are in addition to the 3,000 hours
38 of experience required by this chapter, and shall be gained while
39 the applicant is registered with the board as an associate.

1 (D) The required areas of study specified in subparagraphs (A)
2 to (M), inclusive, of paragraph (1) of subdivision (c) of Section
3 4999.33.

4 (i) (I) An applicant whose degree is deficient in no more than
5 six of the required areas of study specified in subparagraphs (A)
6 to (M), inclusive, of paragraph (1) of subdivision (c) of Section
7 4999.33 may satisfy those deficiencies by successfully completing
8 graduate level coursework at an accredited or approved institution,
9 as defined in Section 4999.12. Coursework taken to meet any
10 deficiencies shall be the equivalent of three semester units or four
11 and one-half quarter units of study.

12 (II) Notwithstanding subclause (I), no applicant shall be deficient
13 in the required areas of study specified in ~~subparagraphs~~
14 *subparagraph* (E) or (G) of paragraph (1) of subdivision (c) of
15 Section 4999.33.

16 (ii) An applicant who completed a course in professional
17 orientation, ethics, and law in counseling as required by
18 subparagraph (I) of paragraph (1) of subdivision (c) of Section
19 4999.33 that did not contain instruction in California law and ethics
20 shall complete an 18-hour course in California law and professional
21 ethics that includes, but is not limited to, instruction in advertising,
22 scope of practice, scope of competence, treatment of minors,
23 confidentiality, dangerous clients, psychotherapist-client privilege,
24 recordkeeping, client access to records, state and federal laws
25 relating to confidentiality of patient health information, dual
26 relationships, child abuse, elder and dependent adult abuse, online
27 therapy, insurance reimbursement, civil liability, disciplinary
28 actions and unprofessional conduct, ethics complaints and ethical
29 standards, termination of therapy, standards of care, relevant family
30 law, and therapist disclosures to clients. An applicant shall
31 complete this coursework prior to registration as an associate.

32 (iii) An applicant who has not completed a course in professional
33 orientation, ethics, and law in counseling as required by
34 subparagraph (I) of paragraph (1) of subdivision (c) of Section
35 4999.33 shall complete this required coursework, including content
36 in California law and ethics. An applicant shall complete this
37 coursework prior to registration as an associate.

38 (2) The applicant completes any units required under subdivision
39 (c) of Section 4999.33 not already completed in his or her education
40 as follows:

1 (A) At least 15 semester units or 22.5 quarter units of advanced
2 coursework to develop knowledge of specific treatment issues or
3 special populations. This coursework is in addition to the course
4 requirements described in subparagraph (D) of paragraph (1).

5 (B) Coursework shall be from an accredited or approved school,
6 college, or university as defined in Section 4999.12.

7 (3) The applicant completes the following coursework not
8 already completed in his or her education:

9 (A) A minimum of 10 contact hours of training in human
10 sexuality, as specified in Section 25 and any regulations
11 promulgated thereunder, including the study of the physiological,
12 psychological, and social cultural variables associated with sexual
13 behavior, gender identity, and the assessment and treatment of
14 psychosexual dysfunction.

15 (B) A minimum of 15 contact hours of instruction in spousal
16 or partner abuse assessment, detection, intervention strategies, and
17 same-gender abuse dynamics.

18 (C) A minimum of seven contact hours of training or coursework
19 in child abuse assessment and reporting as specified in Section 28
20 and any regulations promulgated under that section.

21 (D) A minimum of 10 contact hours of instruction in aging and
22 long-term care, including biological, social, cognitive, and
23 psychological aspects of aging. This coursework shall include
24 instruction on the assessment and reporting of, as well as treatment
25 related to, elder and dependent adult abuse and neglect.

26 (E) This coursework may be from an accredited or approved
27 school, college, or university as defined in Section 4999.12, or
28 from a continuing education provider that is acceptable to the board
29 as defined in Section 4999.76. Undergraduate coursework shall
30 not satisfy this requirement.

31 (4) The applicant completes the following coursework not
32 already completed in his or her education from an accredited or
33 approved school, college, or university as defined in Section
34 4999.12, or from a continuing education provider that is acceptable
35 to the board as defined in Section 4999.76. Undergraduate
36 coursework shall not satisfy this requirement.

37 (A) At least three semester units or 45 hours of instruction
38 regarding the principles of mental health recovery-oriented care
39 and methods of service delivery in recovery-oriented practice
40 environments, including structured meetings with various

1 consumers and family members of consumers of mental health
2 services to enhance understanding of their experience of mental
3 illness, treatment, and recovery.

4 (B) At least one semester unit or 15 hours of instruction that
5 includes an understanding of various California cultures and the
6 social and psychological implications of socioeconomic position.

7 (5) An applicant may complete any units and course content
8 requirements required by subparagraph (D) of paragraph (1) or
9 paragraphs (2), (3), and (4) not already completed in his or her
10 education while registered with the board as an associate, unless
11 otherwise specified.

12 ~~SEC. 41.~~

13 *SEC. 45.* Section 4999.100 of the Business and Professions
14 Code is amended to read:

15 4999.100. (a) An associate registration shall expire one year
16 from the last day of the month in which it was issued.

17 (b) To renew a registration, the registrant on or before the
18 expiration date of the registration, shall do the following:

19 (1) Apply for a renewal on a form prescribed by the board.

20 (2) Pay a renewal fee prescribed by the board.

21 (3) Notify the board whether he or she has been convicted, as
22 defined in Section 490, of a misdemeanor or felony, or whether
23 any disciplinary action has been taken by any regulatory or
24 licensing board in this or any other state, subsequent to the
25 registrant's last renewal.

26 (4) Participate in the California law and ethics examination
27 pursuant to Section 4999.53 each year until successful completion
28 of this examination.

29 (c) The associate registration may be renewed a maximum of
30 five times. Registration shall not be renewed or reinstated beyond
31 six years from the last day of the month during which it was issued,
32 regardless of whether it has been revoked. When no further
33 renewals are possible, an applicant may apply for and obtain a
34 subsequent associate registration number if the applicant meets
35 the educational requirements for registration in effect at the time
36 of the application for a subsequent associate registration number
37 and has passed the California law and ethics examination described
38 in Section 4999.53. An applicant who is issued a subsequent
39 associate registration number pursuant to this subdivision shall
40 not be employed or volunteer in a private practice.

1 ~~SEC. 42.~~

2 *SEC. 46.* Section 6924 of the Family Code is amended to read:

3 6924. (a) As used in this section:

4 (1) “Mental health treatment or counseling services” means the
5 provision of mental health treatment or counseling on an outpatient
6 basis by any of the following:

7 (A) A governmental agency.

8 (B) A person or agency having a contract with a governmental
9 agency to provide the services.

10 (C) An agency that receives funding from community united
11 funds.

12 (D) A runaway house or crisis resolution center.

13 (E) A professional person, as defined in paragraph (2).

14 (2) “Professional person” means any of the following:

15 (A) A person designated as a mental health professional in
16 Sections 622 to 626, inclusive, of Article 8 of Subchapter 3 of
17 Chapter 1 of Title 9 of the California Code of Regulations.

18 (B) A marriage and family therapist as defined in Chapter 13
19 (commencing with Section 4980) of Division 2 of the Business
20 and Professions Code.

21 (C) A licensed educational psychologist as defined in Article 5
22 (commencing with Section 4986) of Chapter 13 of Division 2 of
23 the Business and Professions Code.

24 (D) A credentialed school psychologist as described in Section
25 49424 of the Education Code.

26 (E) A clinical psychologist as defined in Section 1316.5 of the
27 Health and Safety Code.

28 (F) The chief administrator of an agency referred to in paragraph
29 (1) or (3).

30 (G) A person registered as an associate marriage and family
31 therapist, as defined in Chapter 13 (commencing with Section
32 4980) of Division 2 of the Business and Professions Code, while
33 working under the supervision of a licensed professional specified
34 in subdivision (g) of Section 4980.03 of the Business and
35 Professions Code.

36 (H) A licensed professional clinical counselor, as defined in
37 Chapter 16 (commencing with Section 4999.10) of Division 2 of
38 the Business and Professions Code.

39 (I) A person registered as an associate professional clinical
40 counselor, as defined in Chapter 16 (commencing with Section

1 4999.10) of Division 2 of the Business and Professions Code, while
2 working under the supervision of a licensed professional specified
3 in subdivision (h) of Section 4999.12 of the Business and
4 Professions Code.

5 (3) “Residential shelter services” means any of the following:

6 (A) The provision of residential and other support services to
7 minors on a temporary or emergency basis in a facility that services
8 only minors by a governmental agency, a person or agency having
9 a contract with a governmental agency to provide these services,
10 an agency that receives funding from community funds, or a
11 licensed community care facility or crisis resolution center.

12 (B) The provision of other support services on a temporary or
13 emergency basis by any professional person as defined in paragraph
14 (2).

15 (b) A minor who is 12 years of age or older may consent to
16 mental health treatment or counseling on an outpatient basis, or
17 to residential shelter services, if both of the following requirements
18 are satisfied:

19 (1) The minor, in the opinion of the attending professional
20 person, is mature enough to participate intelligently in the
21 outpatient services or residential shelter services.

22 (2) The minor (A) would present a danger of serious physical
23 or mental harm to self or to others without the mental health
24 treatment or counseling or residential shelter services, or (B) is
25 the alleged victim of incest or child abuse.

26 (c) A professional person offering residential shelter services,
27 whether as an individual or as a representative of an entity specified
28 in paragraph (3) of subdivision (a), shall make his or her best
29 efforts to notify the parent or guardian of the provision of services.

30 (d) The mental health treatment or counseling of a minor
31 authorized by this section shall include involvement of the minor’s
32 parent or guardian unless, in the opinion of the professional person
33 who is treating or counseling the minor, the involvement would
34 be inappropriate. The professional person who is treating or
35 counseling the minor shall state in the client record whether and
36 when the person attempted to contact the minor’s parent or
37 guardian, and whether the attempt to contact was successful or
38 unsuccessful, or the reason why, in the professional person’s
39 opinion, it would be inappropriate to contact the minor’s parent
40 or guardian.

1 (e) The minor’s parents or guardian are not liable for payment
2 for mental health treatment or counseling services provided
3 pursuant to this section unless the parent or guardian participates
4 in the mental health treatment or counseling, and then only for
5 services rendered with the participation of the parent or guardian.
6 The minor’s parents or guardian are not liable for payment for any
7 residential shelter services provided pursuant to this section unless
8 the parent or guardian consented to the provision of those services.
9 (f) This section does not authorize a minor to receive convulsive
10 therapy or psychosurgery as defined in subdivisions (f) and (g) of
11 Section 5325 of the Welfare and Institutions Code, or psychotropic
12 drugs without the consent of the minor’s parent or guardian.

13 ~~SEC. 43.~~

14 *SEC. 47.* No reimbursement is required by this act pursuant to
15 Section 6 of Article XIII B of the California Constitution because
16 the only costs that may be incurred by a local agency or school
17 district will be incurred because this act creates a new crime or
18 infraction, eliminates a crime or infraction, or changes the penalty
19 for a crime or infraction, within the meaning of Section 17556 of
20 the Government Code, or changes the definition of a crime within
21 the meaning of Section 6 of Article XIII B of the California
22 Constitution.

Veterinary Medical Board

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MEMORANDUM

DATE	August 2018
TO	Veterinary Medical Board
FROM	Ethan Mathes, Operations Manager
SUBJECT	Discuss and Possible Action on Amendments to the Board and Committee Member Administrative Procedure Manual

Background

The Veterinary Medical Board (Board) last reviewed its Administrative Procedure Manual at the October 2017 meeting. Subsequently, Board staff, legal counsel, and Board members have noted additional areas in the Manual that should be considered for discussion and possible amendments including Multidisciplinary Advisory Committee member recruitment, quorum requirements, formal discipline clarification, and various technical cleanup.

Staff Recommendation

Review recommendations and approve updated Administrative Procedure Manual.

Attachment

Amended Administrative Procedure Manual – August 2018

Veterinary Medical Board

State of California



Board and Committee Member

Administrative Procedure Manual

(Rev [2017:August 2018](#))

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Order Fixing Time for Submission of Written Argument 24

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CHAPTER 1

Introduction

Mission

The mission of the Veterinary Medical Board (VMB) is to protect consumers and animals by regulating licensees, promoting professional standards, and diligent enforcement of the ~~California~~ Veterinary Medicine Practice Act ([Practice Act](#)).

Vision

The vision of the VMB is to create an environment in which Californians have access to high-quality veterinary care for all animals.

Overview

The VMB was created in 1893 as a licensing program. Licensing is used to regulate veterinarians and protect the public in all fifty states, territories, and Canada.

The VMB is one of a number of boards, bureaus, commissions, and committees within the Department of Consumer Affairs (DCA), part of the ~~State and Consumer Services~~ [Business, Consumer Services, and Housing](#) Agency under the auspices of the Governor. ~~The Department DCA~~ is responsible for consumer protection and representation through the regulation of licensed professions and the provision of consumer services. While ~~the~~ DCA provides administrative oversight and support services, the VMB sets its own policies, procedures, and regulations.

The VMB is comprised of eight members. Four [licensed](#) veterinarians, three public members and one registered veterinary technician (RVT). The Governor appoints four veterinarian members, one RVT and one public member. The Senate Rules Committee and the Speaker of the Assembly each appoint one public member. Board members may serve up to two full four-year terms. In addition to the two full four-year terms, Board members may serve the partial term of the vacant position to which they are appointed and up to a one-year grace period after a term expires. Board members fill non-salaried positions but are paid per diem for each Board meeting, committee meeting and other meetings approved by the President of the Board. Travel expenses are also reimbursed.

This procedure manual is updated as necessary and provided to VMB board and committee members as a ready reference of important laws, regulations, DCA policies and VMB policies. It is designed to help guide the actions of the Board and committee members and ensure effectiveness and efficiency.

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CHAPTER 2

Board Meeting Procedures

Business and Professions (B&P) Code section 4808
Board policy - The requirement to meet is in ~~the~~ B&P Code. The frequency of the meetings is determined by the Board.

Frequency and Location of Meetings

The Board meets at least four times annually to make policy decisions and review committee recommendations. Special meetings may be called at any time by the Board President or by any four members of the Board, upon notice of such time and in such manner as the Board may provide.

The Board endeavors to hold meetings in different geographic locations throughout the state when possible as a convenience to the public and licensees.

In accordance with B&P Code section 101.7 boards shall meet at least three times each calendar year and at least once in northern California and once in southern California.

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Board Policy

Board Member Attendance at Board Meetings

Board members must attend each meeting of the Board. If a member is unable to attend, he/she is asked to contact the Board President or the Executive Officer and ask to be excused from the meeting for a specific reason.

Board Policy

Board Member Participation

The Board President may contact members who have missed three consecutive meetings to determine the reason they have been absent and whether or not the member is able to continue serving as an active member of the Board. In some cases, the President may suggest that the member consider resigning.

The Board, by resolution, may request in writing to the appointing authority that a member be replaced. The member shall be notified in writing of such proposed action and be given the opportunity to present to the Board his/her written or oral arguments against such action prior to the Board adopting the resolution.

Government (Gov.) Code section 11120 et. seq.

Public Notice/Information at Board Meetings

Meetings are subject to all provisions of the Bagley-Keene Open Meeting Act. This act governs meetings of the State regulatory boards and meetings of committees of those boards where the committee consists of more than two members. It specifies meeting notice and agenda requirements and prohibits discussing or taking action on matters not included in the agenda. Any general discussion of exams or disciplinary procedures shall be held in public.

The Board may meet in closed session to discuss examinations, deliberate on enforcement cases, ~~and~~ review ~~personnel examination~~ issues where a public discussion would compromise the integrity of the examination, a

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disciplinary case, or a personnel issue. If the agenda contains matters that, on advice of legal counsel, are appropriate for closed session, the agenda shall cite the particular statutory section and subdivision authorizing the closed session.

Quorum

Five members of the Board constitute a quorum for transaction of business at any meeting of the board. At a meeting duly held at which a quorum of five members is present, a concurrence of three members of the Board present shall be necessary to constitute an act or decision of the Board. When six or more members of the Board are present at a meeting duly held, the concurrence of five members is necessary to constitute an act or decision of the Board.

B-&P Code section 4807

Commented [DA2]: Question at Oct 2017 Meeting for Board review.

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Agenda Items

Agenda items are generally discussed and agreed upon at a full board meeting. Additional agenda items for a Board meeting from any source, including Board members, must be submitted to the Executive Officer at least 21 days prior to the meeting. The Executive Officer may confer with the Board President prior to adding items to the meeting agenda.

Board Policy

Notice of Meetings

According to the Open Meeting Act, meeting notices (including agendas for Board meetings) must be sent to persons on the Board's mailing list and posted on the Board's Web site at least ten (10) calendar days in advance. The notice must include a staff person's name, work address, and work telephone number to provide further information prior to the meeting.

Gov. Code section 11120 et. seq.

Record of Board Meetings

The minutes are a detailed summary of each Board meeting, not a transcript. Board minutes must be approved at the next scheduled meeting of the Board. Once approved, the minutes serve as the official record of the meeting.

Board Policy

Webcast

Whenever feasible, the Board shall webcast its meetings. An archive of the meeting shall be available for review on the DCA Web site. If webcast is not feasible at a particular meeting site, the Board will ~~post minutes—have written transcript~~ of the meeting on its Web site once the minutes are approved by the Board.

Gov. Code section 11124.1 et. seq.

Any audio or video recording of an open and public meeting made for whatever purpose by or at the direction of the Board shall be subject to inspection pursuant to the California Public Records Act (Chapter 3.5 (commencing with Section 6250) of Division 7 of Title 1), but may be erased or destroyed 30 days after the recording.

Commented [WT4]: This section cites to GC sec. 11124.1, but that section does not require webcast. Recommend adding public disclosure of the recordings pursuant to GC sec. 11124.1.

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Meetings Rules

Board Policy

The Board will use Robert's Rules of Order to the extent that it does not conflict with State law (e.g., Bagley-Keene Open Meeting Act), as a guide when conducting the meetings.

The Vice President of the Board may serve as meeting parliamentarian.

CHAPTER 3

Travel & Salary Policies/Procedures

DCA Memorandum 91-26

Travel Approval

Board members must have Board President approval for all travel, including out-of-state travel, except for regularly scheduled Board and Committee meetings to which the Board member is assigned.

The Board President and the Executive Officer must use the Board's annual budget and DCA Travel Guidelines when considering travel requests.

Board Policy

Travel Arrangements

Board members should attempt to make their own travel arrangements, including airfare, lodging, and rental cars. Board members should use the State contract airline, Southwest, whenever possible. Once appointed and all paperwork is completed by DCA, Board Members will be assigned a CalAters login. The Board Administrative Staff will assist in setting up a profile for each member through the Statewide Travel Program "Travel Store".

SAM section 700 et seq.

Out-of-State Travel

All out-of-state travel for all persons representing the State of California must be approved by the Board President and is ultimately controlled and approved by the Governor. Once approved for out-of-state travel, Board members will be reimbursed actual lodging expenses, supported by vouchers, and will be reimbursed for meal and supplemental expenses. Travel prior to approval by the Governor is at the individual Board or Committee member's own risk and reimbursement may be denied.

B&P Code section 103
Board Policy

Salary Per Diem and Travel Reimbursement

Board members attending meetings or events to perform a substantial Board-related service are paid [salary](#) per diem and reimbursed for travel-related expenses. Attendance at gatherings, events, hearings, conferences or meetings other than official Board or Committee meetings [shall](#) be approved in advance by the Board President and the Executive Officer.

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The term "day actually spent in the discharge of official duties" means Board members are paid such time as is expended from the commencement of a Board meeting or Committee meeting to the conclusion of that meeting. Where it is necessary for a Board member to leave early from a meeting, the Board President shall determine if the member has provided a substantial service during the meeting and, if so, shall authorize payment of salary per diem and reimbursement for travel-related expenses.

Unless it is an unanticipated emergency, Board members must get prior approval from the Board President to leave a meeting early. Because the Board only meets four times a year, Board members are expected to make every effort to stay for the duration of the meeting and make their travel arrangements accordingly.

For Board--specified work, Board members are compensated for actual time spent performing work authorized by the Board President. That work includes, but is not limited to, authorized attendance at other gatherings, events, meetings, hearings, or conferences, or policy and case review activities. Compensation for preparatory time is paid when eight hours are accrued.

Members must submit time sheet summary forms for actual work performed outside a Board meeting in order to be compensated.

CHAPTER 4

Other Policies/Procedures

Board Member Disciplinary Actions

Board Policy

A member may be censured by the Board if, after a hearing before the Board, the Board determines that the member has acted in an inappropriate manner.

The Board President shall sit as chair of the hearing unless the censure involves the President's own actions, in which case the Board Vice President shall sit as chair. In accordance with the Public Meeting Act, the censure hearing shall be conducted in open session.

Removal of Board Members

B&P Code sections 106 and 106.5

The Governor has the power to remove from office at any time any member of any board appointed by him/her for continued neglect of duties required by law or for incompetence or unprofessional or dishonorable conduct.

The Governor may also remove from office a board member who directly or indirectly discloses examination questions to an applicant for examination for licensure.

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Gov. Code section 1750	<p>Resignation of Board Members</p> <p>In the event that it becomes necessary for a Board member to resign, a letter shall be sent to the appropriate appointing authority (Governor, Senate Rules Committee, or Speaker of the Assembly) with the effective date of the resignation. Written notification is required by state law. A copy of this letter shall also be sent to the director of the Department, the Board President, and the Executive Officer.</p>
B-&P Code section 4804	<p>Officers of the Board</p> <p>The Board shall elect from its members a President, and a Vice President, to hold office for one or two years, or until their successors are duly elected and qualified.</p>
Board Policy	<p>Election of Officers</p> <p>The Board may elect the officers at its fall meeting to serve a term of one year, beginning on January 1. In the normal course of events, Board officers should be prepared to serve first as Vice President and then as President, for the length of term decided by the Board. Officers may be re-elected for one consecutive term. All officers may be elected on one motion or ballot as a slate of officers unless objected to by a Board member. Elections are usually scheduled for the October meeting with the new officers assuming office in January at the next regularly scheduled board meeting.</p>
Board Policy	<p>Officer Vacancies</p> <p>If the Office of the President becomes vacant, the Vice President assumes the office of the President and the Board holds an election for Vice President.</p>
Board Policy	<p>Access to Board Files and Records</p> <p>No Board member may access a licensee, applicant, or complaint file without the Executive Officer's knowledge and approval of the conditions of access. Records or copies of records must not be removed from the Board's office.</p>
Board Policy	<p>Communications with Other Organizations/Individuals</p> <p>The Executive Officer, his or her designee, or the Board President serve as spokesperson to the media on Board actions, policies, or any communications that is deemed sensitive or controversial, to any individual or organization. Any Board member who is contacted by any of the above should terminate the contact and inform the Executive Officer or the Board President.</p>
Board Policy	<p>Legal Opinions – Requests from Outside Parties</p> <p>The Board does not provide legal services for persons or entities outside the Board staff. Requests for legal opinions from outside entities are to be discussed with the Board President and Legal Counsel to determine whether it is an issue over which the Board has jurisdiction and the opinion, if</p>

prepared, could be posted on the Board's Web site and benefit the general public rather than one individual. Persons making such requests would be notified that the Board will not be responding directly to their request, but will post the opinion on the Internet when it is final.

Board Staff

DCA Reference Manual

Employees of the Board, with the exception of the Executive Officer, are civil service employees. Their employment, pay, benefits, discipline, termination, and conditions of employment are governed by a myriad of civil service laws and regulations and often by collective bargaining labor agreements. Because of this complexity, it is most appropriate that the Board delegate all authority and responsibility for management of the civil service staff to the Executive Officer.

Board Administration

DCA Reference Manual

Board members should be concerned primarily with formulating decisions on Board policies rather than decisions concerning the means for carrying out a specific course of action. It is inappropriate for Board members to become involved in the details of program delivery. Strategies for the day-to-day management of programs and staff shall be the responsibility of the Executive Officer under the supervision of the Board President.

Examination Preparation

Each person having access to examination content shall sign a security agreement.

Correspondence

B-&-P Code section 110

Originals of all correspondence received must be maintained in the Board's office files. Copies of such correspondence must be given to the Executive Officer and/or Board members as required.

Ethics Training

Gov. Code section 11146 et seq.
Board Policy

Ethics training for continuing and new Board members will be accomplished in accordance with the law and DCA procedures.

Contact with Licensees

Board Policy

Board members must not intervene on behalf of a licensee for any reason. They should forward all contacts or inquiries to the Executive Officer.

Contact with Complainant/Respondent

DCA Reference Manual

Board members should not directly participate in complaint handling and resolution or investigations. To do so would subject the Board member to disqualification in any future disciplinary action against the licensee. If a Board member is contacted by a complainant/respondent or his/her attorney,

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they should refer the individual to the Executive Officer or Board staff.

Gifts from Candidates

Board Policy

Gifts of any kind to Board or Committee members or the staff from candidates for licensure with the Board are not permitted.

Conflict of Interest

Gov. Code section 87100

No Board member may make, participate in making or in any way attempt to use his or her official position to influence a governmental decision in which he or she knows or has reason to know he or she has a financial interest. Any Board member who has a financial interest shall disqualify himself/herself from making or attempting to use his/her official position to influence the decision. Any Board member who feels he or she is entering into a situation where there is a potential for a conflict of interest should immediately consult the Executive Officer or Board President.

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CHAPTER 5

Board President

The duties of the Board President include, but are not limited to:

Supervision of Executive Officer

The Board may appoint a person exempt from civil service who shall be designated as an Executive Officer and who shall exercise the powers and perform the duties delegated by the Board and vested in him or her.

The incoming Board President assumes all delegated duties at the next quarterly meeting, including supervision of the Executive Officer.

The Board President is the immediate supervisor of the Executive Officer. Specific instructions for work on Board policy matters by the Executive Officer from Board members shall be coordinated through the Board President.

It is critical that individual Board members not intervene or become involved in specific the day-to-day board office operations. However, it is also critical that the board hold the Executive Officer accountable for supervising these operations, including workload issues, staff vacation and sick leave balances, labor/personnel disputes, personal actions, etc.

Tracking the Executive Officer's performance and accountability throughout the year is accomplished by direct and frequent oral, written, and in person communications between the Executive Officer and the Board President. In addition, the Executive Officer is responsible for keeping the full Board informed throughout the year (when appropriate) as to occurrences and information that come to the office in between meetings.

Performance Appraisal of Executive Officer

The Board evaluates its Executive Officer on an annual basis. At the April Board meeting, the Board President, or his/her designee, requests that each Board member complete and submit an "Executive Management Appraisal" document as input to the Executive Officer's annual performance appraisal. The completed forms shall be mailed directly back to the Board President or his/her designee. The input from individual members shall be used to prepare a draft appraisal for review at the first meeting of the fiscal year.

The written summary performance appraisal is presented to the Board and the Executive Officer at its July Board meeting. Following review and discussion by the full Board, the appraisal shall be discussed with the Executive Officer. Actions requiring corrective measures shall include specific remedies and reporting timeframes.

B&P Code section 4804.5
Board Policy

Gov. Code section 11126(a)(4)
Board Policy

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Matters relating to the performance of the Executive Officer are discussed by the Board in closed session unless the Executive Officer requests that it be discussed in open session.

CHAPTER 6

Executive Officer

Appointment

B&P Code section 4804.5

The Board appoints an Executive Officer who is exempt from civil service and serves at the pleasure of the Board.

Role

California Code of Regulations (CCR) section 2003

The Executive Officer ~~is the Board's chief executive officer. He or she~~ implements the policies developed by the Board and carries out the tasks delegated by the Board.

Recruitment

Board Policy

The Board may institute an open recruitment plan to obtain a pool of qualified Executive Officer candidates. It may also utilize proven equal employment opportunity and personnel recruitment procedures.

Selection

Gov. Code section 11125

Board Policy

A qualified candidate for Executive Officer must demonstrate the ability to supervise employees, handle conflict resolution and complaint mediation, and conduct public speaking. The Executive Officer must also demonstrate effective written and verbal communication skills and knowledge and expertise in the areas of legislation, regulations, administration, examination, licensing, enforcement, legislation and budgets. The selection of a new Executive Officer is included as an item of business, which must be included in a written agenda and transacted at a public meeting.

CHAPTER 7

Board Committees

Standing Committees

Board Policy

The committee meetings are held as needed at the direction of the full Board and are fully within the scope of the Open Meeting Act. In light of the Board's limited resources, these meetings are a cost-efficient and legal means of gathering information for discussion by the full Board, which enhances the process of the Board's public meetings and addresses the needs of the profession and consumers in California.

Committee Appointments

Board Policy

The Board President establishes committees, whether ad hoc or special, as he or she deems necessary. The Board President determines committee composition and member appointments, including, but not limited to, liaison appointments. When necessary, committee members may make recommendations for new members.

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Ad hoc committees may include the appointment of non-Board members. When appointing non-Board members, all impacted parties should be represented.

Attendance at Public Committee Meetings

Gov. Code section 11122.5(c)(6)

Non-committee Board members may sit in the audience and participate in meeting discussions, unless there is a quorum of Board members in the room. If there is a quorum present (5), non-committee Board members may sit in the audience, but may not participate in the meeting discussions.

Meeting Rules

Board Policy

Committee meetings are conducted under Robert's Rules of Order to the extent that it does not conflict with the Bagley-Keene Open Meeting Act.

Gov. Code section 11122(c)

Committees with two members can meet as necessary without a public notice and can hold teleconference call meetings with the designated staff person participating on the call as necessary.

Committee meetings involving three or more members are subject the Open Meeting Act Requirement and must be noticed as a public meeting.

Committee Meeting Agendas/Public Notice (3 members)

Board Policy

Agendas should focus on the specific tasks assigned by the Board and include:

- Public comment
- Time for committee members to recommend new areas of study to be brought to the Board's attention for possible assignment.
- Only those information items dealing with subjects assigned to the respective committee.

If more than two Board members attend a Committee meeting, the agenda shall contain the statement: "Notice of a Board meeting indicates that three or more members of the Board are present. While the law requires the Board to notice this meeting as a Board meeting, it is not the intent to take action as a Board at this meeting."

Record of Committee Meetings

Board Policy

As with the Board meetings, the minutes are a summary, not a transcript, of each committee meeting. Committee minutes may be approved at the next scheduled Board meeting and serve as the official record of the meeting.

Approved minutes of the open session are available for distribution to the public and shall be posted on the Board's Web site.

Recruitment

Board Policy

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The Board members may assist in recruiting interested persons to serve on committees, e.g., examination item writing, item reviewing, and Angoff workshops.

Staff Participation

Board Policy The Executive Officer and Staff Service Managers (SSM) will provide advice, consultation and support to Committees.

Video Recording

Board Policy Public committee meetings are Video recorded.

Executive Committee

Board Policy The Executive Committee shall consist of the President and the Vice President. The Executive Committee handles time-sensitive policy issues related to budgets, legislation, and regulatory issues that may surface necessitating immediate Board input. The Executive Committee shall report any action it takes on a particular matter to the full Board at the next Board meeting.

Advisory and Ad Hoc Board Committees

Board Policy Board committees are advisory in nature, recommend actions to the Board, and are established by the Board as needed. Committee recommendations and reports shall be submitted to the Board for consideration and possible action.

Multidisciplinary Advisory Committee (MDC)

B&P Code section 4809.8 The [Veterinary Medicine](#) Multidisciplinary Advisory Committee (MDC) is a statutory committee that was created to ~~advise the Board on issues relating to enforcement, hospital inspections, citations and other issues relating to the profession as a whole~~ assist, advise, and make recommendations for the implementation of rules and regulations necessary to ensure proper administration and enforcement of the Practice Act and to assist the Board in its examination, licensure, and registration programs.

The MDC consists of nine (9) members: four licensed veterinarians, two registered veterinary technicians, one public member, and two liaisons of the Board, a veterinarian and the registered veterinary technician. The public member shall not be a licentiate of the Board or of any other board under this division or of any board referred to in Sections 1000 and 3600.

The members of the MDC hold office for a term of three years ~~and shall be staggered~~. Committee members may serve up to two full three-year terms. In addition to the two full three-year terms, Committee members may serve the partial term of the vacant position to which they are appointed and up to a one-year grace period after a term

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Commented [ME6]: Per Dr. Sullivan, wanted to revisit how terms are currently staggered.

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expires. Committee members fill non-salaried positions but are paid per diem and travel expenses for each committee meeting and other meetings approved by the President of the Board.

The Committee meets three times per year unless otherwise approved by the Board.

Commented [ME7]: Specify MDC meets four times per year?

Vacancies occurring are filled by appointment by the Board. The Board will remove from office at any time any member of the MDC for continued neglect of any duty, conflict of interest, incompetence, or unprofessional conduct.

Recruitment efforts for upcoming vacancies on the MDC shall begin at least 12 months prior to the expiration of the said term. The Board shall advertise vacancies on its website and shall work with professional associations and other consumer groups to notify the public of the recruitment process. All new applicants seeking a position on the MDC shall submit a letter of interest, along with a resume, curriculum vitae (CV), or both, to the Board. Upon receipt of a letter of interest, Board staff will perform a prospective committee member compliance evaluation to ensure that potential appointees adhere to California's various statutory and regulatory requirements. Interviews may be conducted by telephonic means at the Board's discretion, provided the telephonic participation is duly noticed on the meeting agenda. Upon a majority vote of the Board, the Board may establish an Elections Committee comprised of the Board President and Vice President, to hold interviews for the purpose of making recommendations to the full Board. The selection of an MDC member shall be made at a Board meeting. MDC members seeking reappointment are not required to be interviewed, unless requested by the Board.

~~The MDC's role is to assist, advise and make recommendations for the implementation of rules and regulations necessary to ensure proper administration and enforcement of the California Veterinary Medicine Practice Act and to assist the Board in its examination, licensure and registration programs (a quote from Section 4809.8).~~

Diversion Evaluation Committee

B&P Code section 4860 et. seq

~~The Veterinary Medicine Diversion Evaluation Committee (DEC) is a statutory committee that was created to identify and rehabilitate veterinarians and registered veterinary technicians with impairment due to abuse of dangerous drugs or alcohol, affecting competency so that veterinarians and registered veterinary technicians so afflicted may be treated and returned to the practice of veterinary medicine in a manner that will not endanger the public health and safety.~~

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~~The DEC consists of five (5) members: three licensed veterinarians and two public members. Each person~~

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appointed to the DEC shall have experience or knowledge in the evaluation or management of persons who are impaired due to alcohol or drug abuse.

The members of the DEC hold office for a term of four years. There is no limit to the number of terms each Committee member may serve. Committee members may serve the partial term of the vacant position to which they are appointed and up to a one-year grace period after a term expires. Committee members fill non-salaried positions but are paid per diem and travel expenses for each committee meeting and other meetings approved by the President of the Board. In addition, a Board staff manager serves as the Diversion Program Manager to administer the program and serve as a liaison between the Board and the DEC.

The Committee meets three times per year unless otherwise approved by the Board.

Vacancies occurring are filled by appointment by the Board. The Board will remove from office at any time any member of the DEC for continued neglect of any duty, conflict of interest, incompetence, or unprofessional conduct.

Recruitment efforts for upcoming vacancies on the DEC shall begin at least 12 months prior to the expiration of the said term. The Board shall advertise vacancies on its website and shall work with professional associations and other consumer groups to notify the public of the recruitment process. All new applicants seeking a position on the DEC shall submit a letter of interest, along with a resume, curriculum vitae (CV), or both, to the Board. Upon receipt of a letter of interest, Board staff will perform a prospective committee member compliance evaluation to ensure that potential appointees adhere to California's various statutory and regulatory requirements. Interviews may be conducted by telephonic means at the Board's discretion, provided the telephonic participation is duly noticed on the meeting agenda. Upon a majority vote of the Board, the Board may establish an Elections Committee comprised of the Board President and Vice President, to hold interviews for the purpose of making recommendations to the full Board. The selection of an DEC member shall be made at a Board meeting. DEC members seeking reappointment are not required to be interviewed, unless requested by the Board.

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CHAPTER 8

Association Membership

AAVSB

The Board maintains membership in the American Association of Veterinary State Boards (AAVSB). The Board also strives to maintain representation on the Executive Board of the AAVSB by supporting members interested in participating as an AAVSB board member.

Board policy

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Board policy

ICVA

The Board strives to maintain representation on the International Council for Veterinary Assessment. Membership on this board is critical to California since it provides representation in the development and administration of the North American Veterinary Licensing Examination (NAVLE).

CHAPTER 9

Enforcement and Information

Complaint Disclosure

Board Policy
CCR section 2043(f)

Complaints are not subject to disclosure. In a citation and fine action, the Board shall provide the public, upon request, with a copy of a final Citation and Fine document. Citations are public information for five (5) years from the ~~issue date of resolution~~ and are then ~~destroyed/purged, unless the citation is part of a formal disciplinary matter within five (5) years immediately following the citation order, and the record of the action expunged as per the Board's Records Retention Schedule.~~

Commented [DA8]: Need to review

The Board only provides citation and fine information in response to specific, individual written requests. The Board does not publish individual names of licensees or registrants [who have been cited and/or fined](#) and does not report such actions to the National Disciplinary Database.

Disciplinary Actions

Board policy

The Board provides information regarding formal discipline/accusations only after the case has been transferred to the Office of the Attorney General. Board staff makes the following disclosure statement: "An investigation has been conducted and the case has been forwarded to the Attorney General's Office for consideration of possible action. At this time, there has been no determination of wrong-doing."

An "accusation" is the first public document in any case. The accusation is prepared and filed by the Deputy Attorney General (DAG). Once the accusation is filed, it is a public document and available on written request. If the accusation results in a final order/decision, once the decision is final, it is also available to the public upon written request.

All final decisions by the Board following formal disciplinary proceedings of alleged violations of the [Practice Act](#) shall be published on the Board's [Web](#) site and in its newsletter after the effective date of the decision. Final decisions shall be reported to the National Disciplinary Database within 30 days of the effective date.

Directory of Licensees

DCA/Board Policy — ~~Adopted~~

A directory of all licensees containing, name, address, type of license, license number, and expiration date shall be published on the Board's Web site.

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Board Policy

Licensee Disciplined in Other States

The Board considers enforcement action against California licensees who have been disciplined in other states in accordance with B&P Code section 4883-(n).

The Board's enforcement staff determines if there are grounds for disciplinary action in California and take appropriate action.

Board Policy

Holding or Rejecting a Stipulated Settlement or Proposed Decision

As a general rule, most stipulated settlements and proposed decisions are well reasoned, consistent with the board's disciplinary guidelines, and may be adopted consistent with sound public policy. If they are not, consider rejecting (or "nonadopting") such decisions. If it is difficult to make that determination, however, stipulated settlements and proposed decisions should be held for closed session discussion.

Consider rejecting a Stipulated Settlement or an ALJ's Proposed Decision in these circumstances:

1. The stipulated settlement or ~~P~~roposed ~~D~~ecision does not provide sufficient public protection given the nature of the violations. For example, important terms of probation are missing, the probationary period is too short, probation is not appropriate, or other significant unexplained deviations from your board's disciplinary guidelines.
2. The ALJ made an error in the Proposed Decision in applying the relevant standard of practice for the issues in controversy at the hearing. ~~{Proposed Decision}~~
3. The ALJ made an error in interpreting law and/or regulations in the ~~{Proposed Decision}~~.

Consider holding a case for closed session discussion when:

1. You are unsure whether the stipulated settlement or proposed decision protects the public and would like to discuss the merits with other board members.
2. You are unsure about the ALJ's reasoning and description. (Proposed Decision)
3. If you believe a discussion of the practice issues with licensee members may make it easier for you to make a decision.
4. If you are unsure whether the ALJ's decision is consistent with the law. (Proposed Decision)

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5. After discussion with the assigned board attorney, you still have questions about the case.

5.

Gov. Code section 11521
Board Policy

Typically, a vote to hold any Proposed Decision for closed session discussion requires a hold vote by two (2) or more Board members.

Petition for Reconsideration

Eligibility to Petition for Reconsideration is limited to Proposed Decisions. A Petition for Reconsideration is the first step available to a party in contesting a final order. ~~This process is governed by Government Code Section 11521.~~ The Board may order Reconsideration of all or part of the case on its own motion or on Petition of any party.

The process, generally, is as follows:

- Petition for Reconsideration is submitted to the Board by Respondent.
 - If additional time is needed to evaluate the Petition filed prior to the expiration of the applicable periods provided under Government Code section 11521(a), the Executive Officer will issue a 10-day Stay of Decision (Attachment 1).
 - The Board reviews the Petition to determine if
- it will issue an Order Granting Reconsideration or Order Denying Reconsideration.

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Denial of a Petition for Reconsideration

- If the Board takes no action on the Petition, votes to DENY the Petition ~~for Reconsideration~~, or if there are insufficient votes to reach a quorum in favor of the petition, the Decision ~~and Order~~ will remain as issued and will become effective as originally ordered.

Grant of a Petition for Reconsideration

- If the Board votes to GRANT the Petition for Reconsideration, the Decision and Order will NOT become effective.
 - ~~When granting the Petition, the Board determines whether to receive oral or written argument or additional evidence. The Board may reconsider the case or remand it to an ALJ.~~
 - The Order Granting Reconsideration will be sent to ~~Respondent~~ ~~the parties~~, and the order ~~will~~ stay the effective date of the Decision indefinitely, ~~and advise the parties whether~~

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written or oral argument or additional evidence may be submitted by the parties. (sample

- o Board staff will order transcripts from the hearing.
- o Upon receipt of the transcripts, the Board President will issue an Order Fixing Time for Submission of Written/Oral Argument (Attachment 2).
 - Only the Board President has the authority to extend the deadline for submission of Written/Oral Argument.
- o Board staff will order transcripts from the hearing
- o Upon close of the Fixed Time for Submission of Written/Oral Argument and receipt of hearing transcripts, the Petition is sent to the Board for review.
 - Written/Oral Argument (Board may choose to accept either or both)
 - Argument/New Evidence (Board may choose to accept either or both)
- o The matter will be discussed in closed session at the next regularly scheduled Board meeting during which the Board can decide to:
 - uphold the original decision
 - Order prepared by DCA Legal Counsel
 - reduce the penalty
 - Order prepared by DCA Legal Counsel
 - remand the matter back to the ALJ for taking and evaluation of further evidence
 - Other options according to Government Code Section 11517

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Commented [WT12]: Moved up the list of steps.

Commented [WT13]: Consider changing this provision to allow Board staff to issue/serve a Notice of Deadline for Submission of Written/Oral Argument or additional evidence.

Commented [WT14]: If the Board voted to receive oral argument and/or additional evidence, the case must be set for a hearing with the ALJ to receive the oral argument and hear objections by the opposing party to the admission of additional evidence. Thus, this statement is only half true.

Commented [WT15]: Only if the case was not remanded to the ALJ and no oral argument or additional evidence is received.

Commented [WT16]: GC sec 11521 says either the Board reconsiders the case or it is remanded to the ALJ. The Board does not receive oral argument/additional evidence, then deliberate whether to remand.

Commented [WT17]: All options have already been discussed, so this provision is unnecessary; consider deleting.

Petition for Modification of Penalty or Reinstatement

In petitioning for Modification of Penalty or Reinstatement under B&P Code Section 4887 and under Government Code Section 11522, the petitioner has the burden of demonstrating that he or she is fit to safely engage in the practice of veterinary medicine within the scope of current law and accepted standards of practice.

A Petition for Modification of Penalty or Reinstatement may be filed ~~4~~one year or more from the effective date of the disciplinary decision. However, in accordance with B&P Code section 4887, the Board may deny without a hearing or argument any petition filed within a period of two years from the effective date of the prior decision following a hearing.

The process for filing of a Petition for Modification of Penalty or Reinstatement is as follows:

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B&P Code section 4887 and Gov. Code section 11522

- Petitioner files the Petition accompanied by all supporting documentation.
- The matter is referred to the Division of Investigation for investigation (Petition for Reinstatement).
- The Petition and investigation report are referred to the Office of the Attorney General for assignment to a Deputy Attorney General.
- The matter is set for hearing before the Board in open session at the next regularly scheduled Board meeting.
- The hearing takes place in open session before the Board and an Administrative Law Judge.
- The Board considers and decides the matter in closed session.
- The Decision and Order is prepared by the Administrative Law Judge.
- The Decision and Order is forwarded to DCA Legal Counsel [for review](#).
- DCA Legal Counsel forwards the Decision and Order to the Board for review and confirmation that the document accurately represents the Board's Decision.
- The Decision and Order is served on Respondent via regular and certified mail.

When the Board considers reinstating the license or registration or modifying a penalty, it may impose terms and conditions as it determines necessary. To reinstate a revoked license or registration or to otherwise reduce a penalty or modify probation shall require a vote of five (5) of the Board members.

Commented [WT18]: This 5-member vote requirement is in BPC 4887(c) and should be noted in the Admin Manual so it's clear this is a statutory requirement.

CHAPTER 10

Continuing Education (CE)

CE Course Evaluation/Waiver Requests

Board policy

Board and/or committee members may assist staff in evaluating the information provided for CE courses and for a waiver request for purposes of possible denial of license or disciplinary action.

Board members who assist staff in reviewing CE information may need to recuse from voting on any case they reviewed that results in discipline. The information in waiver requests is confidential and care must be taken to return all documentation to the Board office.

CHAPTER 11

Abbreviations and Acronyms

Agencies

VMB
MDC
DCA

Veterinary Medical Board
Veterinary Medicine Multidisciplinary Advisory Committee
Department of Consumer Affairs

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OAH	Office of Administrative Hearings
OAL	Office of Administrative Law
OPES	DCA Office of Professional Examination Resources

Codes

B&P Code	Business and Professions Code
CAC	California Administrative Code
CCR	California Code of Regulations
Gov. Code	Government Code

Organizations

AAVSB	American Association of Veterinary State Boards
AVMA	American Veterinary Medical Association
CVMA	California Veterinary Medical Association
CPIL	Center for Public Interest Law
ICVA	International Council for Veterinary Assessment
RACE	Registry of Accredited Continuing Education
VIVA	Veterinary Information Verifying Agency

CHAPTER 12

Conclusion

The Board and Committee Member Administrative Procedure Manual serves as a reference for important laws, regulations, DCA policies and Board policies. Its function is to guide the actions of the Board members and ensure Board effectiveness, efficiency, and consistency. Although reviewed by legal counsel, it is not a legal opinion.

CHAPTER 13

References

Many of the procedures in this manual are specific to the Board. Others are generic for all boards and bureaus within DCA consistent with State law. References for additional information are:

Board Member Orientation and Reference Manual, DCA

Veterinary Medicine Practice Act, B&P Code sections 4800-4917, and CCR sections 2000-2082. Gov. Code sections 1750, 11120 et seq., 11340 et seq., and 11146 et seq.

Attachments

1. Order Granting 10-day Stay of Execution
2. Order Fixing Date for Submission of Written Argument

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Attachment 1

**BEFORE THE
VETERINARY MEDICAL BOARD
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

In the Matter of the Accusation against:

Case No. AV 1234 56

JOE VETERINARIAN, D.V.M.
1234 Main Street
Anytown, CA 12345

OAH No. 0123456789

Veterinary License No. VET 1234

Respondent.

ORDER GRANTING 10-DAY STAY OF EXECUTION

On November 1, 2017, the Veterinary Medical Board (Board) issued its Decision and Order in the above entitled matter. On November 27, 2017, Respondent filed a petition for reconsideration. The effective date of the Decision and Order is December 1, 2017.

Pursuant to 11521(a) of the Government Code, the Board hereby GRANTS a stay of execution of the effective date of the Decision and Order in the above-stated case for ten (10) days, solely for the purpose of considering the motion.

IT IS SO ORDERED this 28th day of November, 2017.

NAME, Executive Officer
Veterinary Medical Board
Department of Consumer Affairs

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Attachment 2

**BEFORE THE
VETERINARY MEDICAL BOARD
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

In the Matter of the Accusation against:

Case No. AV 1234 56

JOE VETERINARIAN, D.V.M.
1234 Main Street
Anytown, CA 12345

OAH No. 0123456789

Veterinary License No. VET 1234

Respondent.

ORDER FIXING DATE FOR SUBMISSION OF WRITTEN ARGUMENT

The transcript of the hearing in the above-entitled matter having now become available, the parties are hereby notified, in accordance with the Order Granting Reconsideration in this matter and Section 11521 of the Government Code, that any written argument they may wish to submit pursuant to this Order shall be filed with the Veterinary Medical Board, 1747 N. Market Blvd., Suite 230, Sacramento, CA 95834, and shall be served upon all parties on or before November 1, 2014 at 5:00 p.m.

The Board will decide the case upon the administrative record, including the transcript of the hearing held on May 12-16, 2014, and upon such written argument as the parties may wish to submit. No evidence outside of the administrative record will be permitted.

A copy of the transcript is available upon request and upon payment of fees covering direct copying costs.

IT IS SO ORDERED this _____ day of _____, 2014.

FOR THE VETERINARY MEDICAL BOARD
Department of Consumer Affairs

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Veterinary Medical Board

1747 N. MARKET BOULEVARD, SUITE 230, SACRAMENTO, CA 95834
TELEPHONE: 916-515-5220 FAX: 916-928-6849 | WWW.VMB.CA.GOV



MEMORANDUM

DATE	August 15, 2018
TO	Veterinary Medical Board
FROM	Amanda Drummond, Administrative Programs Coordinator
SUBJECT	Discussion and Possible Action on American Association of Veterinary State Boards (AAVSB) Resolution 2018-1 and Practice Act Model Changes

Background:

The AAVSB requests the Veterinary Medical Board (Board) discuss their Practice Act Model changes prior to their annual conference in September. In addition, the AAVSB requests the Board review the 2018-a Resolution seeking Board information regarding any statute, rules/regulation, or policy impeding the AAVSB staff from collecting, verifying, and transmitting to primary source data at the applicant's request (such as college transcripts and verifications of licensure status) to the Board.

The following documents are available on (and can be printed from) the Board's website here (https://www.vmb.ca.gov/about_us/agenda_items/meetingmaterials/082018item9.pdf):

- "Resolution 2018-1" memo from AAVSB's Board of Directors
- "AAVSB Practice Act Model (PAM)" memo with AAVSB proposed PAM updates.
- "Proposed Bylaws Amendments" memo
- "VCPR Definition and Telehealth Guidelines" with AAVSB's recommended veterinary medicine telehealth guidelines.

Due to the volume, only electronic copies are provided and will not be printed in the packets.

Action Requested:

Please review/discuss/vote on the documents and provide any additional feedback for the Board delegates to bring to AAVSB's September conference.



MEMORANDUM

To: Executive Directors of the AAVSB Member Boards for Distribution
From: AAVSB Bylaws and Resolution Committee
Date: July 16, 2018
Subject: Resolution 2018-01

Prior to each Annual Meeting, the AAVSB Member Boards can submit resolutions to be voted upon by the Delegate Assembly. As the policy states, resolutions are reserved for important or complex issues that require greater formality than a standard motion.

This year, the AAVSB received one resolution and it is enclosed for your review. Resolution 2018-1 was submitted by the AAVSB Board of Directors as recommended by the AAVSB Member Services Task Force to solicit feedback from Member Boards which will inform the AAVSB's programs and services. The memo from the AAVSB Board of Directors which accompanied the Resolution is enclosed as well.

The Bylaws and Resolution Committee recommends that the Delegate Assembly pass this resolution.

For your review, the resolutions policy is also enclosed.

Enclosures



MEMORANDUM

To: AAVSB Member Boards
From: AAVSB Board of Directors
Date: June 15, 2018
Subject: Resolution 2018-1

The following includes Resolution 2018-1 submitted by the AAVSB Board of Directors as recommended by the Member Services Task Force. The intent of this Resolution is to have Member Boards provide the leadership of the Association information on any issues or laws from each jurisdiction that would limit the ability to submit already-public information to the AAVSB VIVA database. The VIVA database allows all Member Boards to have a centralized clearing house to evaluate veterinarians and veterinary technicians, if applicable, licensed in their jurisdiction on any regulatory action that may have occurred in another jurisdiction.

Additionally, the AAVSB is developing the VAULT program to assist Member Boards in the verification of an applicant's credentials. The Resolution asks Member Boards to provide the leadership of the Association information with any statute, rules/regulation, or policy that would impede the AAVSB staff from collecting, verifying, and transmitting to you primary source data at the applicant's request, such as college transcripts and verifications of licensure status.

This discussion and voting on Resolution 2018-1 will take place at the **2018 AAVSB Annual Meeting & Conference being held September 13 – 15, 2018 in Washington, DC**. We look forward to your participation in the Resolution process at the meeting.



RESOLUTION 2018-01

Submitted by: AAVSB Board of Directors as recommended by the Member Services Task Force

AAVSB Bylaws and Resolution Committee Suggestion: PASS

WHEREAS, the AAVSB Board of Directors appointed a Member Services Task Force as a result of Resolution 2017-1 to encourage and elicit the support and feedback of its Member Boards; and

WHEREAS, all regulatory boards are under heightened legal and political scrutiny, primarily being reviewed for their effectiveness and efficiencies particularly those needs related to mobility and license portability; and

WHEREAS, the regulatory boards of veterinary medicine acknowledge the membership benefits through AAVSB of the collective voice of the veterinary regulatory community and having direct input in the programs and services intended to assist the boards in regulating the profession, including making licensure eligibility and renewal determinations; and

WHEREAS, the AAVSB developed and implemented the Veterinary Information Verification Agency (VIVA) at the request of and for the benefit of the AAVSB membership in 1998; and

WHEREAS, the goals of the VIVA program are to have all Member Board participation in providing license information for new licensees as well as updated license information and in providing final public disciplinary information; and

WHEREAS, the AAVSB has developed and begun implementation of the Veterinary Application for Uniform Licensure Transfer (VAULT) program to increase the efficiency of collecting and transmitting relevant documents necessary for Member Boards to make licensure eligibility determinations in support of a licensure application with a Member Board; and thereby reduces the administrative burden on Member Boards to collect, file, and maintain applicant credential information.

THEREFORE, BE IT RESOLVED THAT, each AAVSB Member Board, in the spirit of providing input into the AAVSB programs and services, will review applicable statutes, rules/regulation, and policies

related to accepting the primary source data verified by AAVSB staff and maintained in the secure centralized databank known as VIVA and transmitted to Member Boards at the licensee's request through the AAVSB VAULT program; and

THEREFORE, BE IT FURTHER RESOLVED THAT, each AAVSB Member Board will share with the AAVSB any barriers or restrictions in the jurisdiction's statutes, rules/regulation, and policies related to participating in the AAVSB VAULT program and timely reporting of license information for new licensees as well as updated license information and final public disciplinary information to the AAVSB VIVA databank; and

THEREFORE, BE IT FURTHER RESOLVED THAT, each AAVSB member board will identify the benefits of accepting and participating in the AAVSB VAULT program and timely reporting of license information for new licensee as well as updated license information and disciplinary information to the AAVSB VIVA databank; and

THEREFORE, BE IT FURTHER RESOLVED THAT, the AAVSB will continue to seek guidance from its Member Boards to tailor services to meet Member Board needs.



American Association of Veterinary State Boards

Policies & Procedures: RESOLUTIONS

OVERVIEW/POLICY

Resolutions should be reserved for important or complex issues that require greater formality than a standard motion, which is contained only in the minutes of Association meetings. AAVSB resolutions are written to stand alone, and typically contain rationale supporting the subject of the resolution. Because of their special nature, resolutions forwarded for consideration by the AAVSB Delegate Assembly will follow submission guidelines.

PROCEDURES

1. No less than 210 days before the date of the Annual Meeting, the Association office will forward a request for proposed resolutions to the Member Boards (Call for Resolutions).
2. Resolutions proposed by a Delegate, Alternate Delegate, or a Committee of the AAVSB, other than the Bylaws and Resolution Committee, shall be in writing and received at the Association office not less than 150 days prior to the Annual Meeting. Such resolutions shall be forwarded to the Bylaws and Resolution Committee within seven days after receipt in the Association office.
3. Resolutions proposed by the Bylaws and Resolution Committee shall be in writing and received at the Association office not less than 100 days prior to the Annual Meeting.
4. Resolutions proposed by the AAVSB Board of Directors shall be in writing and received at the Association office not less than 75 days prior to the Annual Meeting. Such resolutions shall be forwarded to the Bylaws and Resolution Committee within seven days after receipt in the Association office.
5. All resolutions will in some way reflect the AAVSB Mission and Goals, and must include a fiscal note if the implementation of the resolution would require an expenditure of Association funds.
6. The Executive Director shall forward proposed resolutions to all Member Boards not less than 60 days prior to the date of the Annual Meeting.
7. All resolutions submitted to the Delegate Assembly for consideration will be accompanied by a recommendation from the Bylaws and Resolution Committee. That Committee shall attach the following recommendations to a resolution: "pass," "not pass," or "no recommendation."
8. A resolution may be introduced after the above deadlines if it pertains to an event of immediate concern to the Association which occurred after the deadline. The resolution must be submitted to the Bylaws and Resolution Committee not less than 24 hours before the beginning of the business session of the Annual Meeting.



MEMORANDUM

To: AAVSB Member Boards
From: AAVSB Board of Directors
Date: July 3, 2018
Subject: AAVSB Practice Act Model

In 2000, at the direction of the membership, the AAVSB Board of Directors convened a task force to create a veterinary Practice Act Model (PAM) as a resource document available for use by its Member Boards. Because it was envisioned as a “living document”, the task force continued their work by adding statutory language regarding the regulation of veterinary technicians and provided periodic updates to the document that were supported by the membership.

In late 2016, the AAVSB Regulatory Policy Task Force was charged with updating the AAVSB PAM to proactively reflect technological advancements occurring in veterinary medicine. Challenges exist to effectively regulate the use of technology due to its evolving nature and rapid development that often outpace the development and adoption of governing laws and rules. The AAVSB PAM includes broad and effective language addressing the implementation and regulation of the use of technology in veterinary practice.

During the 2018 AAVSB Annual Meeting & Conference, Delegates will be asked to vote on the updated AAVSB PAM to reaffirm the document as a Member Board resource available in response to or as a stimulus of statutory and regulatory updates. Due to significant language revisions to the Veterinary-Client-Patient Relationship (VCPR), a separate vote will be taken for the changes to the definition and accompanying guidance on the use of telehealth in veterinary medicine.

A confirmative vote for the AAVSB PAM would reflect support for the direction of the language revisions and provide a credible resource document to Member Boards and legislatures when considering statutory changes. The AAVSB PAM is a tool that reflects the most current thinking on professional regulation, has a national perspective, and was developed by the AAVSB consistent with its public protection mission. The AAVSB Board of Directors asks that each Member Board discuss the changes prior to the Annual Meeting & Conference and equip your Delegate to discuss and vote on the PAM in September.

It is important to reiterate that the AAVSB Practice Act Model is a fluid document that will always be subject to modifications that reflect changes in technology and professional regulation. The AAVSB looks forward to continued dialogue on its Practice Act Model with its Member Boards and invites comments

from interested persons to discuss issues impacting the regulation of veterinary medicine, veterinary technology and the mission of public protection.

The AAVSB Board of Directors is very grateful to current and past volunteers who have spent countless hours on the AAVSB PAM. The current members of the AAVSB Regulatory Policy Task Force are:

Lila Miller, DVM (New York) - Chair

Timothy Graham, DVM (Wyoming Board)

Cathy Kirkpatrick (Oklahoma Executive Director)

Joseph May, DVM (Virginia)

Marla McGeorge, DVM, JD (Oregon)

Chris Rohlfing (Missouri Board)

Theresa Stir Esq. (Ohio Executive Director)

Cara Tharp (Arkansas Executive Director)

James Unwin, DVM (Nebraska Board)

Debbie Whitten, BS, LVT (Alabama)

Julia Wilson, DVM (Minnesota Executive Director)

Kenichiro Yagi, BS, RVT, VTS (ECC, SAIM) (NAVTA)

Leslie Knachel (Virginia Executive Director) – AAVSB Board of Directors Liaison

The discussion and voting on PAM and the VCPR definition will take place at the **2018 AAVSB Annual Meeting & Conference being held September 13 – 15, 2018 in Washington, DC.**



AMERICAN ASSOCIATION OF VETERINARY STATE BOARDS

Veterinary Medicine and Veterinary Technology Practice Act Model (PAM) with Commentary



AAVSB • 380 West 22nd Street • Suite 101 • Kansas City, MO 64108
1.877-698-8482 • www.aavsb.org

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Introduction

The American Association of Veterinary State Boards (AAVSB) is a not-for-profit, 501(c) (3) association whose membership is comprised of 62 veterinary licensing boards from the United States and its Territories (U.S. Virgin Islands and Puerto Rico), and 9 provinces in Canada. The AAVSB is committed to serving these veterinary regulatory agencies (its Member Boards) by providing quality, relevant programs and services they can rely on to carry out their statutory responsibilities in the interest of public and animal protection.

In 2000, based upon the will of the membership, the AAVSB Board of Directors convened a task force to create a veterinary Practice Act Model (PAM) as a resource document available for use by its Member Boards. Because it was envisioned as a “living document”, the task force continued their work by adding statutory language regarding the regulation of veterinary technicians and provided periodic updates to the document that were supported by the membership.

The purpose of the AAVSB Practice Act Model is to provide a resource to its Member Boards, many of which regulate the practice of Veterinary Medicine as well as Veterinary Technology. This document reflects a national perspective and was developed by the AAVSB consistent with its public protection mission. The AAVSB Practice Act Model reflects the most current thinking on professional regulation. An additional goal is to facilitate greater standardization of terminology and regulation among jurisdictions. It is hoped that such uniformity will begin to allow jurisdictions to provide for increased public protection through effective regulation as well as facilitating mobility of veterinary professionals from jurisdiction to jurisdiction through the licensure process. Such developments are advantageous to the public by clarifying the role of veterinary medical regulatory boards while creating valid and accurate expectations for veterinary medical services. Increased mobility will also provide the public with greater access to qualified veterinarians to perform important services.

The AAVSB Practice Act Model was drafted to withstand legal scrutiny and provide maximum public and animal protection. It was not drafted to protect professional territory or to define or secure specific job descriptions for veterinarians or veterinary technicians. While professional promotion may be an important activity of professional associations, societies, and other professional Veterinary Medicine membership groups, the sole concern of the AAVSB Practice Act Model is the protection of the public and animals. While distancing itself from undue influence from professional associations to avoid legal and practical allegations of the “profession protecting its own,” the AAVSB welcomes input from these organizations, their state chapters, individual practitioners, academia, and others in formulating this document.

It is important to note the AAVSB Practice Act Model is a fluid document that will always be subject to modifications that reflect changes in technology and professional regulation and, thus, can never be “final.” The AAVSB looks forward to continued dialogue on its Practice Act Model whereby Member Boards can comment and fully discuss issues impacting the regulation of Veterinary Medicine, Veterinary Technology and the mission of public protection. The AAVSB Practice Act Model is an example of the resources that can be made available to AAVSB Member Boards when diverse interests work together toward a common goal.

Acknowledgments

The American Association of Veterinary State Boards is very grateful to current and past volunteers who have spent countless hours on the AAVSB Practice Act Model.

Revisions

Veterinary Medicine Practice Act Model with Comments created 2001

Veterinary Medicine and Veterinary Technology Practice Act Model with Comments revised 2002

Articles I and III revised 2005

Article I revised 2009

All articles revised 2014

All articles revised in 2018

Structure and Format

The AAVSB Practice Act Model has been structured to mimic Member Board's existing statutes. It has been formatted to include the model language with corresponding commentary. To provide the rationale and thought processes behind several portions of the Practice Act Model, readers are encouraged to read the commentary as well as the Act to receive a complete perspective. Commentary follows each section if appropriate.

Article I. Title, Purpose, and Definitions.

An ACT concerning the regulation of the practices of Veterinary Medicine and Veterinary Technology. Be it enacted...

Commentary

Introductory Comment to Article I.

The AAVSB believes that the public interest must be the central precept of any professional regulatory act and its administration, and that jurisdiction regulatory boards must constantly strive to ensure that this basic principle is upheld. These beliefs are clearly articulated in the veterinary medicine and veterinary technology practice act model (“act”).

Article I of the act states that safeguarding the public interest is the most compelling reason for regulating the practices of veterinary medicine and veterinary technology, and identifies the activities included within the practices. Definitions of other terms used throughout the act are also included in this article.

Section 101. Title of Act.

This Act shall be known as the “(Name of Jurisdiction) Veterinary Medicine and Veterinary Technology Practice Act.”

Section 102. Legislative Declaration.

- (a) Veterinary Medicine and Veterinary Technology in the Jurisdiction of _____ are declared professional practices affecting the public health, safety, and welfare and are subject to regulation and control in the public interest. It is further declared to be a matter of public interest and concern that the practices of Veterinary Medicine and Veterinary Technology, as defined in the Act, merit and receive the confidence of the public and that only qualified individuals be permitted to practice Veterinary Medicine or Veterinary Technology in the Jurisdiction of _____. This Act shall be liberally construed to carry out these objectives and purposes.
- (b) It is further declared that the intent of this legislation is to regulate the Veterinary Medicine and Veterinary Technology professions and will result in displacing competition by restricting licensure to practice Veterinary Medicine and Veterinary Technology, as such practice is defined and interpreted by the Board, to Persons determined by the Board to be qualified under this Act.
- (c) It is further declared that any such restriction on competition is outweighed by the broader interest in protection of the public health, safety, and welfare. It is understood that the regulatory structure calls for Veterinarians, Veterinary Technicians and public members to serve on the Board and this legislation recognizes the need for professional expertise provided by Veterinarians and Veterinary Technicians serving the public interest.

- (d) This Act is intended to provide active Jurisdiction oversight and supervision through its legislative enactment, the promulgation of enabling regulations, the appointment of Board members by the Governor or legislature, legal representation of the Board by the office of the State Attorney General, legislative appropriation of monies to support the Board, and Board engagement in a periodic review process.

Commentary

Section 102. Legislative Declaration.

Veterinary Medicine and Veterinary Technology are learned professions affecting public health and welfare and should be declared as such by the legislature.

Section 103. Statement of Purpose.

- (a) It is the purpose of this Act to promote, preserve, and protect the public health, safety, and welfare by and through the licensure and regulation of individuals, whether within or outside of the Jurisdiction, who practice Veterinary Medicine or Veterinary Technology within this Jurisdiction. In furtherance of this purpose, this Act creates the Board of Veterinary Medicine whose members, functions, and procedures shall be established in accordance with the provisions of this Act.
- (b) (1) The purpose of this Act is to fully occupy the field of Veterinary Medicine and Veterinary Technology and provide a uniform Jurisdiction-wide regulatory scheme to be enforced by the Board of Veterinary Medicine as defined in the scope of practice. As such, no municipality shall prohibit a Veterinarian or Veterinary Technician, as defined in this Act, from engaging in any act or performing any procedure that falls within the professionally recognized scopes of practice of licensure as a Veterinarian or Veterinary Technician, including but not limited to the scopes of practice set forth in Section 105 and 106 of this Act.
- (2) Nothing in this section 103(b) shall prohibit municipality from:
- (i) levying a business license tax solely for revenue purpose, or
 - (ii) levying a license tax solely for the purpose of covering the cost of regulation.

Commentary

Section 103. Statement of Purpose.

The Statement of Purpose defines the general scope of the Veterinary Medicine and Veterinary Technology Practice Act. A Board must have full knowledge of the Persons practicing Veterinary Medicine and Veterinary Technology within its Jurisdiction and must effectively protect the public through regulation. This section provides for the regulation of both practices and the licensure of Veterinarians and Veterinary Technicians engaged in these practices and stipulates that the regulation of the practices of Veterinary Medicine and Veterinary Technology extends to all Veterinarians and Veterinary Technicians practicing in the Jurisdiction, regardless of their actual Jurisdiction of residency.

Section 104. Definitions.

When used in this Act, these words and phrases shall be capitalized and are defined as follows:

- (a) **Animal** means any member of the Animal kingdom other than humans, whether living or dead.
- (b) **Animal Shelter** means a public or private humane society, Society for the Prevention of Cruelty to Animals, Animal protection shelter or control agency, rescue group, etc., that provides shelter and care for homeless Animals.
- (c) **Applicant** means a Person who submits an application for licensure or registration, whether complete or not, to the Board.
- (d) **Approved Provider of Continuing Education** means any Person, that has met the requirements of the Board to provide educational courses that are designed to assure continued competence in the practice of Veterinary Medicine or Veterinary Technology.
- (e) **Approved Program of Continuing Education** means an educational program approved by the Board or offered by an Approved Provider of Continuing Education.
- (f) **Approved Veterinary Medical Program** means a school of Veterinary Medicine or a veterinary medical education program that has been approved by the Board.
- (g) **Approved Veterinary Technology Program** means a school of Veterinary Technology or a Veterinary Technology or Veterinary Nursing education program that has been approved by the Board.
- (h) **Board of Veterinary Medicine** means the Board of Veterinary Medicine created under this Act.
- (i) **Client** means a Person who has entered into an agreement with a Veterinarian for the purposes of obtaining veterinary medical services in-person or by any means of communication.
- (j) **Complementary and Alternative Veterinary Medicine [Therapies]** means a heterogeneous group of preventive, diagnostic and therapeutic philosophies and practices that are not considered part of conventional Veterinary Medicine. These therapies include, but are not limited to, veterinary acupuncture, acuthery, and acupressure; veterinary homeopathy; veterinary manual or manipulative therapy (i.e., therapies based on techniques practiced in osteopathy, chiropractic medicine, or physical medicine and therapy); veterinary nutraceutical therapy; and veterinary phytotherapy.
- (k) **Consultation** means when a Veterinarian receives advice or assistance in-person, ~~telephonically,~~ ~~electronically,~~ or by any ~~other~~ method of communication, from a veterinarian or other Person whose expertise, in the opinion of the Veterinarian, would benefit a Patient. Under any circumstance, the responsibility for the welfare of the Patient remains with the Veterinarian receiving Consultation.

- (l) **Continuing Education** means training that is designed to assure continued competence in the practice of Veterinary Medicine or Veterinary Technology.
- (m) **Continuing Education Contact Hour** means a fifty (50) minute clock hour of instruction, not including breaks or meals.
- (n) **Conviction** means conviction of a crime by a court of competent jurisdiction and shall include a finding or verdict of guilt, whether or not the adjudication of guilt is withheld or not entered on admission of guilt, a no consent plea, a plea of nolo contendere, or a guilty plea.
- (o) **Examination** means an Examination approved by the Board.
- (p) **Felony** means a criminal act as defined by any Jurisdiction or by definition under federal law.
- (q) **Informed Consent** means the Veterinarian has informed the Client or the Client's authorized representative, in a manner understood by the Client or representative, of the diagnostic and treatment options, risk assessment, and prognosis, and the Client has consented to the recommended treatment.
- (r) **Jurisdiction** means any commonwealth, state, or territory, including the District of Columbia, of the United States of America, or any province of Canada.
- (s) **Licensee** means a Person duly licensed under this Act.
- (t) **Licensure Transfer** means the method whereby a veterinarian or a veterinary technician currently licensed in another Jurisdiction can also become licensed as a Veterinarian or Veterinary Technician in this Jurisdiction.
- (u) **Patient means any Animal or group of Animals receiving veterinary care from a Veterinarian or Veterinary Technician.**
- (v) **Person** means any individual, firm, partnership, association, joint venture, cooperative, corporation, governmental body, or any other group, legal entity or combination acting in concert; and whether or not acting as a principal, trustee, fiduciary, receiver, or as any kind of legal or personal representative, or as the successor in interest, assignee, agent, factor, servant, employee, director, officer, or any other representative of such Person.
- (w) **Premises** means any place where the Animal is located when Veterinary Medicine is being practiced.

- (x) **Supervision**-related terms are defined as follows:
- (1) **Supervising Veterinarian** means a Veterinarian who assumes responsibility for the veterinary care given to a Patient by an individual working under his or her direction. The Supervising Veterinarian must have examined the Patient pursuant to currently acceptable standards of care.
 - (2) **Immediate Supervision** means the Supervising Veterinarian is in the immediate area and within audible and visual range of the Patient and the individual treating the Patient.
 - (3) **Direct Supervision** means the Supervising Veterinarian is readily available on the Premises where the Patient is being treated.
 - (4) **Indirect Supervision** means a Supervising Veterinarian need not be on the Premises but has given either written or oral instructions for the treatment of the Patient and is readily available for communication.
- (y) **Veterinarian** means an individual who is licensed to practice Veterinary Medicine under the provisions of this Act.
- (z) **Veterinarian-Client-Patient Relationship (VCPR)** ~~exists when the Veterinarian has assumed responsibility for making medical judgments regarding the health of the Animal(s) and the need for medical treatment.~~
- exists when:
- 1) Both the Veterinarian and Client agree for the Veterinarian to assume responsibility for making medical judgments regarding the health of the Animal(s); and
 - 2) The Veterinarian has sufficient knowledge of the Animal(s) to initiate at least a general or preliminary diagnosis of the medical condition of the Animal(s); and
 - 3) The practicing veterinarian is readily available for follow-up in case of adverse reactions or failure of the regimen of therapy.
- (aa) **Veterinarian Manager** is a Veterinarian who registers to assume responsibility for the Veterinary Facility registration, management and operation of a Veterinary Facility.
- (bb) **Veterinary Facility** means any building, place or mobile unit from which the practice of Veterinary Medicine and Veterinary Technology is conducted.
- (cc) **Veterinary Technician** means an individual who is duly licensed to practice Veterinary Technology under the provisions of this Act.

Commentary

Section 104. Definitions.

The Practice of Veterinary Medicine and Veterinary Technology are defined in Sections 105 and 106.

Section 104(d) and (e). Approved Provider and Approved Program of Continuing Education - See comment to Section 213(a) regarding Board's role in the approval process of programs and providers.

Section 104(h). Board of Veterinary Medicine - Some Jurisdictions may select the title, Board of Veterinary Medicine and Veterinary Technology.

Section 104(r) Jurisdiction - When not capitalized is referring to authority.

Section 104(t). Licensure Transfer - The AAVSB has elected to use "Licensure Transfer" rather than Licensure by Endorsement or Reciprocity because of the confusion existing in regulation between such terms. "Licensure Transfer" is intended to allow for the possession of multiple veterinary and veterinary technology licenses.

Section 104(w) Premises - Boards may want to define "premises" to include ranches, racetracks, farms or other venues in which veterinary care may be provided.

Section 104(x)(2). Immediate Supervision - The AAVSB recommends that the Boards define through regulations tasks that Veterinary Technicians can perform with or without Immediate Supervision.

Section 104(x)(4). Indirect Supervision - The AAVSB contemplates that this definition of Indirect Supervision includes and incorporates the technological advancements and the ability of Persons to communicate through electronic and other means as a form of supervision. Of course, such supervision must maintain the necessary contact to be as effective as the Veterinarian deems appropriate, using professional judgment.

Commentary

Section 104. Definitions. (continued)

Section 104(y). Veterinarian - To maintain consistency with the regulations promulgated by the Food and Drug Administration, Department of Health and Human Services with regard to Animal Drugs, Feed and Related Products (21 C.F.R. §530.3) which define Veterinarian and the Veterinarian-Client-Patient Relationship, the AAVSB defines Veterinarian as an individual who is duly licensed under the provisions of the Act. The AAVSB recognizes that there may be special limitations to the use of the title of Veterinarian and has defined Special Provisions in Section 107. The AAVSB also strongly believes that limiting the use of the title Veterinarian to individuals licensed to perform veterinary services better protects the public. It must be emphasized that the title restriction does not prevent anyone from referencing a valid educational degree (i.e. DVM) or other recognized credential (i.e. VMD). See also the comment to Section 301(b) of the Act. Several comments addressed this issue, saying the term Veterinarian belonged to individuals by virtue of the receipt of a degree. While this is understandable from an academic perspective, the AAVSB reasoned that the Code of Federal regulations and the potential for confusion to the public, mandate limitation of use of the term “Veterinarian” to Licensees. In that case, there would be no violation and enforcement would be left up to criminal prosecution through the state’s attorney or through civil litigation, involving deceptive trade practices or other applicable remedies. The AAVSB determined this approach does not adequately protect the public because many Jurisdictions lack the resources or incentives to criminally prosecute such offenses or, alternatively, injured parties must pursue matters through an expensive civil process. The AAVSB has chosen to affirmatively address the issue, rather than pass the enforcement to other entities.

Section 104(z). Veterinarian-Client-Patient Relationship (VCPR) – Most Jurisdictions require the establishment of a valid VCPR to provide Patient care and prescribe medication. Failure to establish a valid VCPR may constitute grounds for charges of professional misconduct in many Jurisdictions. The qualifying characteristics of this relationship vary from Patient to Patient and, for a particular Patient, may also vary from situation to situation. The AAVSB determined that the establishment of the VCPR must be specified through general statutory language. Under certain circumstances, the failure to establish the VCPR may severely hinder the Boards’ ability to prosecute or pursue administrative disciplinary actions against Licensees.

Certain comments suggested referencing the definition of VCPR set forth in the Code of Federal Regulations (CFR) within the statute. The AAVSB carefully reviewed the CFR and determined that the above definition was broad enough to encompass the more specific references in the CFR. Also, the AAVSB did not want to bind the Jurisdiction to a federal definition which, if changed, would necessitate subjecting the practice act to modifications and additional scrutiny by the legislature. Finally, the AAVSB determined that the specifics of the VCPR should be contained in the standards of practice/codes of conduct and promulgated through the rule/regulations, a process which is easier to modify, if necessary. Below are comments to the act which provide suggested language to be incorporated in the regulations.

Commentary

Section 104(z). Veterinarian-Client-Patient Relationship (VCPR) (continued)

AAVSB recommends that each jurisdiction promulgate appropriate regulations clarifying who may be included within the scope of a single VCPR such as a Veterinarian or another Veterinarian within the same practice group with access to medical records, or a veterinarian with whom he/she is consulting.

AAVSB recommends that each jurisdiction promulgate appropriate regulations defining how to establish sufficient knowledge of the Animal(s), including the following:

- A. A recent examination of the Animal or group of Animals, either physically or by the use of instrumentation and diagnostic equipment through which images and medical records may be transmitted electronically¹; or
- B. Through medically appropriate and timely visits to the premises at which the Animal or group of Animals are kept.

It is essential for the VCPR to be easily established in order to require the Veterinarian to assume accountability for the Veterinary Medical Services rendered. Furthermore, as standards of practice and codes of conduct change over time, it is easier to promulgate new rules incorporating such changes rather than adopting legislative modifications.

Section 104(bb). Veterinary Facility - “Veterinary Facility” is defined with the intention that Jurisdictions license or otherwise register facilities or issue facility permits as a mechanism for protecting the public, especially when such facilities are owned by non-veterinarians (see Section 309). Boards of Veterinary Medicine can thereafter establish standards and monitor qualifications of such facilities. Indeed, most Jurisdictions already provide for such regulation.

The AAVSB recommends that Boards of Veterinary Medicine consider delineating the various specific Veterinary Facilities within its rules (e.g., clinic, hospital, specialty or referral hospital, etc.). Differing facilities can be defined within rules that can identify minimum standards and the allowable practices to insure public protection.

Section 104(cc). Veterinary Technician - The AAVSB believes that the title “Veterinary Technician” and the practice of Veterinary Technology should be protected as a licensed profession, and this is reflected in the Act. Jurisdictions have created other titles such as veterinary assistant, or veterinary employee to define the roles of staff who may perform tasks not relegated to Veterinary Technicians.

The AAVSB strongly believes there should be uniform degrees and titles for veterinary technicians or veterinary nurses. Regardless, in all cases, Jurisdictions are strongly encouraged to specify the roles of each designated title (in the rules), recognizing that all veterinary employees must be Supervised by a Veterinarian.

¹ – The AAVSB recommends that a guidance document be created for the use of telehealth technologies. See the *AAVSB Recommended Guidelines for the Appropriate Use of Telehealth Technologies in the Practice of Veterinary Medicine* for further guidance.

Section 105. Practice of Veterinary Medicine.

The Practice of Veterinary Medicine means:

Any individual practices Veterinary Medicine when performing any one or more of the following on an Animal:

- (a) Directly or indirectly consults, diagnoses, prognoses, corrects, supervises, recommends or performs medical or surgical treatment, including Complementary and Alternative Therapies for the diagnosis, prevention, cure or relief of a wound, defect, deformity, fracture, bodily injury, disease, dental, physical, behavioral or mental condition;
- (b) Prescribes, dispenses or administers a drug, medicine, anesthetic, biologic, appliance, apparatus, application or treatment;
- (c) Any manual procedure for the diagnosis and/or treatment of pregnancy, sterility, or infertility;
- (d) Determination of the health, fitness, or soundness of an Animal;
- (e) Representation of oneself directly or indirectly, as engaging in the practice of Veterinary Medicine; or
- (f) Use of any words, letters or titles under such circumstance as to induce the belief that the individual using them is authorized to practice Veterinary Medicine, under this Act. Such use shall be prima facie evidence of the intention to represent oneself as engaged in the practice of Veterinary Medicine.

Commentary

Section 105. Practice of Veterinary Medicine.

The practice of Veterinary Medicine or the scope of practice is one of the most important and most-discussed definitions in the AAVSB Veterinary Medicine and Veterinary Technology Practice Act Model. Veterinary Medicine is a dynamic profession, particularly over the past several years, and any definition of practice needs to contain a degree of flexibility that will allow the Board to make necessary adjustments from time to time to meet a changing Veterinary Medicine environment, an evolving practice, and the ongoing needs of consumers. The definition in Section 105 is purposely broad to provide substantial latitude to the Board in the adoption and implementation of rules. However, the definition does specifically identify a range of acceptable activities. The rules process would function as an important tool in the Board's efforts to adapt the definition to the needs of its Jurisdiction, since any new or amended rules that the Board may implement would be promulgated within the requirements of the Jurisdiction's Administrative Procedures Act and would afford all interested parties an opportunity to provide review and comment.

Section 106. Practice of Veterinary Technology.

The Practice of Veterinary Technology means:

Any individual practices Veterinary Technology when performing any one or more of the following on an Animal:

- (a) Provision of professional medical care, monitoring and treatment under Supervision of a Veterinarian;
- (b) Representation of oneself directly or indirectly, as engaged in the practice of Veterinary Technology; or
- (c) Use of any words, letters or titles under such circumstance as to induce the belief that the individual using them is authorized to practice Veterinary Technology under this Act. Such use shall be prima facie evidence of the intention to represent oneself as engaged in the practice of Veterinary Technology. Nothing in this section shall be construed to permit a Veterinary Technician to do the following:
 - (1) surgery;
 - (2) diagnose;
 - (3) prognose; and
 - (4) prescribe.

Regulations defining tasks of Veterinary Technicians:

The Board shall promulgate regulations establishing Animal health care tasks and an appropriate degree of Supervision required for those tasks that may be performed only by a Veterinary Technician or a Veterinarian.

Commentary
<p>Section 106. Practice of Veterinary Technology.</p> <p>See comment to Section 104 (cc) regarding the protection of the title and the licensed profession.</p>

Section 107. Special Provisions.

The licensure requirements of the Act shall not apply to the following:

- (a) Any veterinary medical officer employed by a governmental body performing Veterinary Medicine services within the scope of official duties, provided such Veterinary Medicine services are limited to the period of employment;
- (b) Any Animal care provider employed by a governmental body performing Veterinary Technology services within the scope of official duties, provided such Veterinary Technology services are limited to the period of employment;

- (c) Any individual offering gratuitous services in cases of emergency;
- (d) Any veterinarian who is licensed in another Jurisdiction or country, or any Person whose expertise, in the opinion of a Veterinarian would benefit an Animal, and who is consulting with the Veterinarian, provided such service is limited to the Consultation;
- ~~(e) Any intern or resident who practices Veterinary Medicine in an Approved Veterinary Medical Program and who is a graduate of an Approved Veterinary Medical Program in any Jurisdiction or country, provided such practice is limited to such duties as intern or resident and is under the Direct Supervision of a Veterinarian or faculty under Section 106(11);~~
- (e) Any student currently enrolled and in good standing in an Approved Veterinary Medical Program who engages in a preceptorship or externship performing duties that constitute the practice of Veterinary Medicine for which she/he has received adequate instruction by the college or school, and only under the Immediate or Direct Supervision of a Veterinarian;
- (f) Any student currently enrolled and in good standing in an Approved Veterinary Medical Program who engages in practice at a veterinary teaching hospital under the Immediate Supervision of a Veterinarian under this article; provided however, that only such students who have completed at least X [time period may be reflected in course hours, percentage of completion of curriculum or years] in an Approved Veterinary Medical Program may assist in diagnosis, prognosis, treatment and surgery in such practice, subject to the following limitations:
 - 1) Assistance in diagnosis and surgery must be under the Immediate Supervision of such Veterinarian; and
 - 2) Assistance in treatment must be under the Indirect Supervision of such Veterinarian;
- (g) Any student currently enrolled and in good standing in an Approved Veterinary Technology Program approved by the Board who engages in the practice of Veterinary Technology in pursuance of the required experience component of the program under Immediate Supervision of a Veterinarian or Veterinary Technician or at a veterinary teaching hospital under Immediate Supervision of veterinary faculty;
- (h) An Animal Shelter employee or volunteer who provides care and performs euthanasia for the shelter's Animals in the course and scope of the individual's employment or duties if the individual has successfully completed training acceptable to the Board and is acting under the Supervision of a Veterinarian or in accordance with the written guidelines of a Veterinarian. Such individuals shall not diagnose, prognose, prescribe or perform surgery;
- (i) Any Persons engaged in scientific research that reasonably requires experimentation involving Animals and is conducted in a facility or with a company that complies with federal and Jurisdictional regulations regarding Animal welfare;

- (j) Any Person or that Person's employee, who, subject to the Jurisdiction's anti-cruelty laws, treats Animals belonging to that Person, providing that ownership is not transferred for the purpose of circumventing this Act;
- (k) Any veterinarian or veterinary technician who is licensed in good standing in another Jurisdiction or country and is providing veterinary services in response to an emergency, disaster (natural or man-made) or a case involving Animal cruelty or fighting, provided a request for such assistance is received from a government, law enforcement, or Animal protection agency;
- (l) Any veterinarian who is licensed in good standing in another Jurisdiction or country and is providing a Continuing Education course or training at an Approved Veterinary Medical Program or Approved Veterinary Technology Program or in connection with an Approved Program of Continuing Education.

Commentary

Section 107. Special Provisions.

The AAVSB recognizes that some Jurisdictions include additional special provisions relating to the spaying, neutering, dehorning, castration emasculation or docking of cattle, horses, sheep, goats, or swine in the course or exchange of work for which no monetary compensation is paid, or to artificial insemination and the collection of semen as well as additional services. Due to the potential for harm to the public/Animal(s), it is the intent of the Act to include Persons performing such activities as professionals who must be licensed. Accordingly, these activities are intentionally absent from the list of special provisions and such activities are included in the practice definition.

The special provision for students who practice at a veterinary teaching hospital or under the Immediate or Direct Supervision of a Veterinarian is intended to be restricted to those students who have completed some basic clinical courses. After much discussion and review of the comments, the AAVSB chose to leave the time period blank. The Jurisdictions should determine the requisite time period which can be reflected in hours, percentages or years. Similarly, Jurisdictions should determine the appropriate prerequisites to be completed before Veterinary Technology students are permitted to practice Veterinary Technology.

As drafted, the special provision also restricts the practice of Veterinary Technology to those students who have completed some basic courses and are pursuing completion of the experience component of the program.

In all cases the special provision is intended to apply only to students practicing under the appropriate supervision as determined by the Board. With regard to faculty, the AAVSB noted that several Jurisdictions already require full licensure of faculty who teach clinical curriculum. Others require faculty licenses or institution licenses. The AAVSB feels strongly that Veterinary Medicine faculty involved in direct, clinical relations with the public and its Patients are engaged in practice and, thus, should be licensed, particularly when a VCPR exists.

Commentary

Section 107. Special Provisions. (continued)

Through the Practice Act Model comment process, however, concerns were voiced regarding the practical implications such a licensure requirement would have on the education, recruitment of faculty and the undertaking of research and other important projects related to the educational process. In recognition of the practical implications such a requirement might have on educational institutions, the AAVSB Practice Act Model, provides a faculty license to provide for public protection in Section 306.

To protect the public and to prevent Persons from circumventing the licensure requirements, the faculty license is limited to bona fide faculty members who teach courses in Approved Veterinary Medical Programs.

A special provision is granted in the model statute to Animal Shelter employees who provide care and perform euthanasia. The Task Force acknowledges that many Jurisdictions have adopted more specific language requiring that shelter Animals be euthanized by certified euthanasia technicians when a Veterinarian or Veterinary Technician is not available. Furthermore, Jurisdictions may wish to restrict the delegation of veterinary responsibilities to care designed to prevent disease transmission-i.e., vaccinations, prophylactic control of endo and ectoparasites, diagnostic testing and euthanasia.

A variety of certification methods have emerged through the rules process. To train euthanasia technicians, some Boards have established guidelines to certify euthanasia technicians whereas other Boards have little involvement.

Shelters, private and government agencies often respond to disasters and large-scale cruelty such as dog fighting and puppy mill cases by setting up temporary shelters to provide care and shelter for rescued victims. In disaster cases, the Animals needing care and shelter often number well into the hundreds. To provide appropriate care for these Animals, it may be necessary to recruit veterinarians from outside the Jurisdiction. In cruelty cases, law enforcement often depends upon assistance from veterinarians with expertise in forensics, diagnosing, prognosing and treating Animal in large scale cruelty and fighting cases. They should not be limited in their ability to effectively enforce Jurisdiction criminal laws or render needed veterinary care due to Jurisdiction constraints on veterinary practice.

See section 305. Qualifications for Temporary License and Emergency Practice that would allow Veterinarians and Veterinary Technicians to practice temporarily in response to a declared emergency.

Continuing Education that involves client owned animals may require the Supervision of a Veterinarian.

Article II. Board of Veterinary Medicine.

Commentary

Introductory Comment to Article II.

Before it can regulate the practice of Veterinary Medicine or Veterinary Technology, the Jurisdiction must first establish and empower the Board. Accordingly, Article II of the Act defines and creates the Board by specifying elements necessary to its formation, organization, and operation. Each of the sections contained in this article covers elements that the AAVSB felt necessary to the proper formation and efficient operation of the Board. Several of these sections, especially those that contain innovative or infrequently utilized provisions, are supplemented by individual explanatory comments.

Among the sections of Article II that may be of particular interest to users of the Act are the following: Section 202 and 203(c), pertaining to the inclusion of public members as Board members; Section 207, which provides grounds and procedures for removal of Board members, and Section 213(b)(2), which enables Boards to avail themselves of research and study grants and other non-Jurisdiction monies without having to deposit such funds in Jurisdiction general revenue accounts (thereby losing control over the expenditure of such funds).

It is also important to note that Section 212 specifically empowers the Board to make such rules as are necessary to fully administer and implement the Act. This is a most significant feature of the Act. The underlying philosophy of this approach is that the statute should create goals, guidelines, and policies in general areas, and permit the Board to provide the specifics in its rules. This approach recognizes that it is impossible for State legislatures to enact comprehensive provisions regarding all the matters with which a Board may be confronted or to anticipate the rapidly changing conditions of the professions and the delivery of veterinary medical services. Consequently, the AAVSB recommends that Boards have adequate power to adopt and amend rules with the greatest possible flexibility and autonomy. Section 212 of this Act is designed to accomplish this objective.

Section 201. Designation.

The responsibility for enforcement of the provisions of this act is hereby vested in the Board of Veterinary Medicine (Board). Under active oversight and supervision by the Jurisdiction, the Board shall have all of the duties, powers, and authority specifically granted by or necessary for the enforcement of this Act, as well as such other duties, powers, and authority as it may be granted from time to time by applicable law.

Section 202. Membership.

The Board shall consist of X members, at least one (1) shall be a representative of the public, and the remainder shall be Veterinarians or Veterinary Technicians, who possess the qualifications specified in Section 203. At all times, at least fifty percent (50%) of the members of the Board shall be Veterinarians who are actively engaged in the practice of Veterinary Medicine in this Jurisdiction.

Commentary

Section 202. Membership.

The number of Board members should be determined by each individual Jurisdiction according to its requirements. Individual Jurisdictions may wish to consider Board composition that represents the diversity of practice types and interests within a Jurisdiction. Variable factors, such as Jurisdiction population, number of Veterinarians, and other local considerations, may all be relevant in determining the number of Board members needed to most effectively enforce the Act. Since the mission of the Board is public protection, the AAVSB strongly recommends that the Board have at least one (1) public member.

The AAVSB also strongly recommends that the Board have at least one (1) Veterinary Technician.

Section 203. Qualifications.

- (a) Board members shall at all times maintain eligibility to serve on the Board by avoiding relationships that would interfere with the Board mission of public protection. Board members shall be especially cognizant of issues of conflict of interest.
- (b) Each Veterinarian or Veterinary Technician member of the Board shall at all times:
 - (1) Be a resident of this Jurisdiction for not less than X years;
 - (2) Be currently licensed in good standing and without restriction to engage in the practice of Veterinary Medicine or Veterinary Technology in this Jurisdiction; and
 - (3) Have had at least X years of experience in the practice of Veterinary Medicine or Veterinary Technology.
- (c) The public member(s) of the Board shall be a resident of this Jurisdiction who is at least X years old and shall not be, nor shall ever have been, a veterinarian, veterinary technician or the immediate family member of a veterinarian or veterinary technician, or an individual who has ever had any material financial interest in the provision of veterinary services or who has engaged in any activity directly related to the veterinary profession.

Commentary

Section 203. Qualifications.

Conflict of interest issues provide a legal basis for challenging the actions of a regulatory Board. As has been determined by the United States Supreme Court, a conflict need not be actual, but merely the appearance of an impropriety can create the basis for legal challenges. The AAVSB strongly suggests regulatory Board members not participate as an officer or in a policy-making position of a local, Jurisdiction or national professional association.

Section 203(b). Qualifications.

Section 203(b) of the Act requires that Veterinarians and Veterinary Technicians be licensed to practice at all times while serving as Board members. Although AAVSB recommends that board members should have at least five (5) years of experience in the practice of Veterinary Medicine or Veterinary Technology prior to appointment, it believes the number of years of experience should be determined by each Board. Since the practice of Veterinary Medicine is defined in Section 105 in broad terms, it renders a Veterinarian actively engaged in almost any phase of practice eligible for appointment. This provides for the eligibility of candidates who have divergent backgrounds and experiences, who are knowledgeable in the affairs of the profession, and who represent different geographic areas of the Jurisdiction.

Section 203(c). Qualifications.

Specific qualifying criteria for the public member have been deliberately omitted from this section. Reliance has been placed in the Governor to determine what attributes a Person should possess to meaningfully serve on a Board. To help assure that such a member would be truly independent in judgments, those Persons who have a possible substantial relationship with the profession are rendered ineligible by this section. The AAVSB also recommends that a public member of the Board be at least twenty-one (21) years old.

Section 204. Appointment.

In accordance with the principle of separation of powers and to provide for sufficient oversight by the respective branches of government, the Governor shall appoint the members of the Board in accordance with the provisions of this Article or other applicable laws.

Commentary

Section 204. Appointment.

The AAVSB recognizes that there may be other appointing authorities in some Jurisdictions. Accordingly, Jurisdictions with an appointing authority other than the Governor should insert the appropriate reference to such authority within this section of the Act.

Section 205. Terms of Office.

- (a) Members of the Board shall be appointed for a term of X years, except as provided in subsection (b) and except that members of the Board who are appointed to fill vacancies that occur prior to the expiration of a former member's full term shall serve the unexpired portion of such term.
- (b) The terms of the members of the Board shall be staggered, so that the terms of no more than X members shall expire in any year. Each member shall serve until a qualified successor is appointed.
- (1) The present members of the Board shall serve the balance of their terms.
- (2) Any present Board members appointed initially for a term of less than X years shall be eligible to serve for X additional full terms.
- (c) No member of the Board shall serve more than X consecutive full terms. The completion of the unexpired portion of a full term shall not constitute a full term for purposes of this section.

Commentary**Section 205. Terms of Office.**

The AAVSB recommends that the terms are staggered so that the terms of no more than three (3) members will expire in any year. However, this number may vary based on the number of board members. In addition, because Jurisdiction populations vary so dramatically, rather than recommend specific lengths of terms or term limits, the AAVSB believes each Jurisdiction should make its own determination.

Section 206. Vacancies.

Any vacancy which occurs in the membership of the Board for any reason, including expiration of term, removal, resignation, death, disability, or disqualification, shall be filled within six (6) months as prescribed by Section 204. Failure to fill a vacancy within the six (6) month period shall divest the Governor of the appointment authority for such vacancy and vest such authority in the state senate.

Commentary

Section 206. Vacancies.

Based upon several experiences within Veterinary Medicine and other professions whereby vacancies on regulatory Boards have not been timely appointed, the AAVSB provided for a time period whereby the Governor (or other appointing authority) must fill such vacancies. The AAVSB recommends that failure to make such appointments within the six-(6) month period should divest the Governor of the appointment authority for that vacancy and empower the State Senate in this regard for said vacancy. It is hoped that this time period will provide incentives to the Governor to make such appointments in a timely fashion. However, each individual jurisdiction will have to consider proposed language to ensure such does not conflict with other laws. This is a model act for jurisdictions to consider and, obviously, they may not enact it verbatim. That being said, while boards might not be able to enforce these mandates, including such provisions will at the very least offer guidance to legislatures and courts as to how to ensure public safety by cooperating with and helping regulatory boards.

Section 207. Removal.

- (a) A Board member may be removed by the Governor. In addition, pursuant to the procedures set forth in subsection (b) herein, a board member may be removed by a three-quarter ($\frac{3}{4}$) majority vote of the board upon one or more of the following grounds:
- (1) The refusal or inability for any reason of a Board member to perform the duties as a member of the Board in an efficient, responsible, and professional manner;
 - (2) The misuse of office by a member of the Board to obtain financial or material gain or advantage personally or for another through such office;
 - (3) A final adjudication by a recognized body including the courts that the Board member is in violation of the laws governing the practice of Veterinary Medicine or Veterinary Technology; or
 - (4) Other just and reasonable causes as determined solely by the Board pursuant to applicable law.
- (b) Removal of a member of the Board shall be in accordance with the Administrative Procedures Act of this Jurisdiction, or other applicable laws.

Commentary

Section 207. Removal.

In certain Jurisdictions, there may be general statutory provisions that establish the procedures and grounds for the removal of appointed public officials. In these Jurisdictions, disregard Section 207. Specific grounds may be addressed in the regulations, such as failure to attend meetings, and any other parameters established by the Board.

Section 208. Organization.

- (a) The Board shall elect from its members a Chairperson and such other officers as it deems appropriate and necessary to conduct its business. The Chairperson shall preside at all meetings of the Board, shall be responsible for the performance of all the duties and functions of the Board and shall perform those duties customarily associated with the position and such other duties assigned from time to time by the Board.
- (b) Officers elected by the Board shall serve terms of X year(s) commencing with the day of their election and ending upon election of their successors and shall serve no more than X consecutive full terms in each office to which they are elected.
- (c) The Board shall employ an Executive Director who shall be responsible for the performance of the administrative functions of the Board and such other duties as the Board may direct.

Commentary

Section 208(b). Organization.

The AAVSB recommends one (1) year terms for officers and no more than three (3) consecutive full terms thereafter.

Section 208(c). Organization.

The AAVSB urges that every Board have a permanent administrative official (Executive Director) to perform and supervise the administrative duties and functions for which the Board is responsible on a day-to-day basis. The responsibilities of the Executive Director should include the hiring of necessary staff to assist in fulfilling the responsibilities of the Board. The position title may vary from Jurisdiction to Jurisdiction.

Section 209. Compensation of Board Members.

Each member of the Board shall receive a per diem as specified in the regulations for time engaged in performance of the official duties of the Board and shall also be reimbursed for all reasonable and necessary expenses incurred in connection with the discharge of such official duties.

Commentary

Section 209. Compensation of Board Members.

AAVSB recognizes that many boards do not pay board members, but the AAVSB believes board members should be paid a per diem for their time as well as their travel expenses. Failure to compensate volunteers for their time may result in difficulty recruiting Board members who must travel and may also lose a day's pay.

Section 210. Meetings.

- (a) The Board shall meet at least once every X month(s) to transact its business. The Board shall meet at such additional times as it may determine. Such additional meetings may be called by the Chairperson of the Board or by two-thirds (2/3) of the members of the Board.
- (b) The Board shall give prior notice of the time and place for each meeting in a manner prescribed by the Administrative Procedures Act or other applicable laws.
- (c) A majority of the members of the Board shall constitute a quorum for the conduct of a Board meeting and, except where a greater number is required by the Act or by any rule of the Board, all actions of the Board shall be by a majority of a quorum.
- (d) All Board meetings and hearings shall be open to the public. The Board may, in its discretion and according to law, conduct any portion of its meeting in executive session, closed to the public.

Commentary

Section 210(a). Meetings.

The AAVSB strongly recommends that Boards of Veterinary Medicine meet at least four (4) times per year. This is a minimum standard that would help Boards maintain an adequate level of efficiency and responsiveness.

Section 210(c). Meetings.

The AAVSB recommends that the Boards determine if remote participation is permissible by law.

Commentary

Section 210(e). Meetings.

Many Jurisdictions have adopted “sunshine” laws that provide for open meetings. Section 210(e) may not be necessary or may need revision to eliminate or to curtail the use of executive sessions.

Section 211. Employees.

The Board may, in its discretion, employ individuals in addition to the Executive Director in such other positions or capacities as it deems necessary to the proper conduct of Board business and to the fulfillment of the Board’s responsibilities as defined by the Act.

Commentary

Section 211. Employees.

Inspectors employed by the Board may be Veterinarians or Veterinary Technicians. Boards may wish to consider whether investigators must be Veterinarians.

Section 212. Rules.

The Board shall make, adopt, amend, and repeal such rules as may be deemed necessary by the Board for the proper administration and enforcement of this Act. Such rules shall be promulgated in accordance with the procedures specified in the Administrative Procedures Act.

Commentary

Section 212. Rules.

The legislative authority granted to a Board to adopt, amend and repeal rules is an extremely important power. Boards are encouraged to fully exercise this authority by adopting rules, where necessary, to more specifically address regulatory issues. This rule-making authority is not only beneficial for the protection of the public, but also benefits the Board when it is necessary to interpret the Act. As membership on the Board changes, these rules become increasingly more important to maintain consistency in the application of the Act. Generally, the rule-making process is governed by an Administrative Procedures Act (APA) or other applicable law which provides for public disclosure and comments prior to promulgation. These processes are designed to provide for public input and the necessary checks and balances upon the regulatory Board. Of course, any action undertaken by the Board must be to enhance the Board authority and public protection.

Section 213. Powers and Responsibilities.

- (a) Under active Jurisdiction oversight and supervision, the Board shall be responsible for the control and regulation of the practices of Veterinary Medicine and Veterinary Technology in this Jurisdiction including, but not limited to, the following:
- (1) Licensure by Examination, or Transfer, or issuance of temporary, emergency or faculty licenses, or the renewal of licenses of individuals who are authorized to practice Veterinary Medicine or Veterinary Technology under the provisions of this Act;
 - (2) Registration and renewal of registration or licensure of facilities under provisions of this Act;
 - (3) The establishment and enforcement of standards or criteria of programs or other mechanisms to insure the continuing competence of Licensees;
 - (4) The establishment and enforcement of compliance with minimum standards for the registration of Veterinary Facilities, minimum standards of care and codes of conduct for Licensees who practice Veterinary Medicine or Veterinary Technology;
 - (5) The creation of a Bill of Rights concerning what veterinary services a Client may expect to receive;
 - (6) The determination and issuance of standards for recognition and approval of degree programs of schools and colleges of Veterinary Medicine and Veterinary Technology whose graduates shall be eligible for licensure in this Jurisdiction;
 - (7) The enforcement of those provisions of the Act relating to the conduct or competence of Applicants, Licensees practicing in this Jurisdiction, registration of Veterinary Facilities and the suspension, revocation, or restriction of licenses to practice Veterinary Medicine or Veterinary Technology;
 - (8) The maintenance of jurisdiction over Persons, irrespective of their licensure status, (i.e., active, inactive, expired, lapsed, surrendered or disciplined) relative to acts, omissions, complaints and investigations which occurred during the licensure period. The Board shall also maintain jurisdiction over registered facilities, irrespective of their registration status, relative to acts, omissions, complaints and investigations which occurred during the registration period. Such jurisdiction shall be for purposes of enforcement of all the provisions of this Act and any regulations duly promulgated hereunder, including the assessment and collection of fines, costs, and attorneys' fees. Jurisdiction of the Board shall also extend to Persons engaging in the unauthorized practice of Veterinary Medicine or Veterinary Technology. It is the intent of this subsection that Licensees cannot divest the Board of jurisdiction by changing or relinquishing licensure or registration status;

- (9) Issuance of an order directing an Applicant or Licensee to undergo a mental or physical examination or chemical dependency evaluation, when probable cause exists that the Applicant or Licensee has engaged in conduct prohibited by this Act or a statute or rule enforced by the Board. For the purpose of this Section, every Applicant or Licensee is considered to have consented to undergo a mental and/or physical examination or chemical dependency evaluation when ordered to do so, in writing, by the Board and to have waived all objections to the admissibility of the examiner's or evaluator's testimony or reports on the grounds that the testimony or reports constitute a privileged communication;
 - (10) The collection of data and funds necessary to carry out the provisions of this Act, provided:
 - (i) Such funds are expended for the pursuit of the objective for which they are awarded;
 - (ii) Activities connected with or occasioned by the expenditures of such funds do not interfere with the performance of the Board's duties and responsibilities and do not conflict with the exercise of the Board's powers as specified by this Act;
 - (iii) Such funds are kept in a separate account; and
 - (iv) Periodic reports are made concerning the Board's receipt and expenditure of such funds; and
 - (11) The investigation of any Person, or Veterinary Facility, including facility inspection, during customary business hours for the purpose of determining if any provisions of the Act governing the practice of Veterinary Medicine or Veterinary Technology are being violated. The Board, its officers, inspectors, employees and representatives shall cooperate with all agencies charged with the enforcement of applicable laws relating to the practice of Veterinary Medicine or Veterinary Technology.
- (b) The Board shall have such other duties, powers, and authority as may be necessary to enforce this Act and Board rules, including but not limited to, the following:
- (1) The Board may join such professional organizations and associations organized exclusively to promote the standards of the practices of Veterinary Medicine and Veterinary Technology for the protection of the health and welfare of the public and Animals or whose activities assist and facilitate the work of the Board;
 - (2) The Board may receive and expend funds, in addition to its [annual/biennial] appropriation, from parties other than the Jurisdiction, provided:
 - (i) Such funds are used in the pursuit of a specific objective that the Board is authorized to accomplish by this Act, or which the Board is qualified to accomplish by reason of its jurisdiction or professional expertise;

- (3) Any investigation, inquiry, or hearing that the Board is empowered to hold in accordance with applicable law may be held by or before any member(s) of the Board and the order of such member(s) shall be deemed to be the order of said Board when approved and confirmed as noted in Section 210(d);
- (4) The Board shall report any violation of this Act which also is deemed as violative of applicable criminal statutes to the Attorney General [State's Attorney] to cause appropriate proceedings to be instituted in the proper court without delay and to be prosecuted in the manner required by law. It is the duty of the Attorney General [State's Attorney] to prosecute such violations. Nothing in this paragraph shall be construed to require the Board to report violations whenever the Board believes that the public's interest will be adequately served in the circumstances by a suitable written notice or warning;
- (5) The Board shall have the power to subpoena Persons and documents for purposes of depositions and testimony, or both, in the same manner as prescribed in civil cases in the courts of this Jurisdiction. Any member of the Board, hearing officer, or administrative law judge shall have power to administer oaths to witnesses at any hearing that the Board is authorized to conduct, and any other oaths authorized in any Act administered by the Board;
- (6) In addition to the fees specifically provided for in this Act, the Board may assess additional reasonable fees for services rendered to carry out its duties and responsibilities as required or authorized by this Act or Board rules. Such services shall include but not be limited to the following:
 - (i) Issuance of duplicate certificates or identification cards;
 - (ii) Mailing lists, or reports of data maintained by the Board;
 - (iii) Copies of any documents;
 - (iv) Certification of documents;
 - (v) Notices of meetings;
 - (vi) Licensure Transfer;
 - (vii) Examination administration to a licensure Applicant; and
 - (viii) Examination materials;

- (7) Cost Recovery;
- (i) In any order issued in resolution of a disciplinary proceeding before the Board, the Board may request the Administrative Law Judge/Hearing Officer (ALJ/HO) to direct any Person or Veterinary Facility found to have violated the Act or Board rules, to pay to the Board a sum not to exceed the reasonable costs, including attorneys' fees, of the investigation and prosecution of the case;
 - (ii) The costs to be assessed shall be fixed by the ALJ/HO and shall not be increased by the Board; where the Board does not adopt a proposed decision and remands the case to a(n) ALJ/HO, the ALJ/HO shall not increase any assessed costs;
 - (iii) Where an order for recovery of costs is made and timely payment is not made as directed in the Board's decision, the Board may enforce the order for payment in the _____ Court in the municipality where the administrative hearing was held. This right of enforcement shall be in addition to any other rights the Board may have as to any Person directed to pay costs; and
 - (iv) In any action for recovery of costs, the Board's decision shall be conclusive proof of the validity of the order of payment and the terms for payment.
- (8) Except as otherwise provided to the contrary, the Board shall exercise its duties, powers, and authority in accordance with the Administrative Procedures Act.

(c) Oversight of Board through an annual report.

As a means to provide continued and active oversight, the Board shall file with the Governor an annual report outlining the activities of the Board.

Commentary

Section 213. Powers and Responsibilities.

The AAVSB strongly recommends that Boards provide training for new members on their powers and responsibilities.

Section 213(a)(1). Powers and Responsibilities.

See Section 104(t) and Section 307 and the corresponding comments for a definition and explanation of "Licensure Transfer."

Commentary

Section 213. Powers and Responsibilities. (continued)**Section 213(a)(3)(4)(5)(6). Powers and Responsibilities.**

Great care should be exercised by the Boards with respect to these Sections. Many Jurisdictions have statutes or rules which provide, for example, that approved degree programs of schools or colleges of Veterinary Medicine are those accredited by the Council on Education (COE) of the American Veterinary Medical Association (AVMA). Similarly, with regard to accredited Veterinary Technology programs, many Jurisdictions have statutes or rules that provide that approved programs are those accredited by the Committee on Veterinary Technician Education and Activities (CVTEA) of the AVMA. Furthermore, some Boards through their regulation/rules, rely upon the standards of practice or codes of ethics of private outside entities like the professional associations. As is emphasized by this Practice Act Model and Comments and for reasons stated below, the legislatures and/or regulatory Boards are encouraged to adopt, by statute or through the rule making process, the actual standards or criteria of the private outside entity to avoid allegations of improper delegation.

It is a well-established rule of administrative law that any delegation of governmental power (through statute or by rule) must carry with it appropriate limitations and procedural safeguards for affected individuals. For example, a direct, unequivocal grant of the accreditation function to a private organization, such as AVMA COE, by the legislature through a practice act or by the Board through the rule making process, might be deemed an unauthorized, improper, and invalid delegation of legislative or Board authority. Similarly, a direct reliance upon standards of practice or a code of conduct of a private outside body over which the legislature or Board has no control may constitute an unconstitutional delegation of authority. This doctrine is based upon the simple premise that regulatory decisions impacting an individual's property right (i.e. a license) must be made by Boards that have been created and empowered to protect the public and are answerable to the general public. Further, regulatory Boards in Veterinary Medicine have no control over AVMA activities. A review of this legal doctrine reveals case law invalidating legislation and rules that, without limitation, rely upon these outside entities without public accountability. See Garces v. Department of Registration and Education, 254 N.E.2d 622 (Ill. App.,1969); Gumbhir v. Kansas State Board of Pharmacy, 618 P. 2d 837 (Ks 1980); Coffman v. State Board of Examiners in Optometry, 50 N.W. 2d 322 (MI 1951); FM Properties Operating Co. v. City of Austin, 22 S.W. 3d 868 (TX 2000), Balian v. Board of Licensure in Medicine, 722 A. 2d 364 (ME 1999).

The AAVSB recommends that the statutory language grant the Board the authority to approve Veterinary Medicine programs and Veterinary Technology programs. Boards thereafter may adopt in their rules the standards, criteria and policies of accreditation established from time to time by the COE or the CVTEA, the nationally recognized accrediting agencies for Veterinary Medicine degree programs and Veterinary Technology programs. Thereafter, the regulatory Boards can annually adopt in their minutes the list of accredited Veterinary Medicine and Technology programs using the AVMA COE and CVTEA list. A similar process can take place by the Board should it wish to rely upon others in determining the standards of practice or codes of conduct. This will allow the legislatures and Boards to utilize the expertise of such private outside entities without improperly delegating such authority to an organization over whom the Boards have no control, and which is not accountable to the public.

Commentary

Section 213. Powers and Responsibilities. (continued)**Section 213(a)(4)(5). Powers and Responsibilities.**

To avoid improper delegation allegations as referenced above, the standards of practice and codes of conduct should be a product of the Board. Again, the Board may rely upon the expertise of outside private entities by adopting those standards which the Board deems acceptable.

The “Bill of Rights” is intended to provide legislative or regulatory guidance to practitioners regarding the information to be made available to Clients, preferably during the establishment of the professional relationship. Included would be information regarding the qualification of Licensees (licensure status, specialty certification), the regulatory Board and contact information in the event of a complaint, billing policies, Informed Consent and the like. The “Bill of Rights” should be consistent with standards of practice, codes of ethics and regulations that the Board has adopted under the Act to avoid inadvertently expanding the role and the responsibilities of the Licensee through the establishment of such a “Bill of Rights”.

Section 213(a)(9). Powers and Responsibilities.

This section allows a Board to order mental or physical examination or chemical dependence evaluations upon showing probable cause. This power should be used judiciously, only when the Board has reason to believe that there may be a connection between a mental and/or physical condition and the alleged misconduct. This power is necessary to ensure to the public that an Applicant or Licensee’s ability to practice Veterinary Medicine or Veterinary Technology safely and competently is not impaired.

The legislative process provides a system of checks and balances to ensure that the Board acts within the scope of its authority and in accordance with all other applicable laws, such as the Administrative Procedures Act.

Section 213(b)(7). Cost Recovery

The ALJ/HO interspersed throughout this section refer to the terms: “administrative law judge,” or “hearing officer” as determined by individual Jurisdictions.

Section 213(c). Powers and Responsibilities.

The AAVSB recommends that in addition to including reference to the effectiveness and efficiencies of the Board, the annual report shall through numeric statistics at a minimum, identify the number of Licensees, Applicants, renewals, complaints and disposition of such complaints, along with the number of Board meetings, and all financial data relevant to Board operations.

Article III. Licensing.

Commentary

Introductory Comment to Article III.

Article III of this Act sets out the requirements for initial licensure of Veterinarians and Veterinary Technicians, and registration of Veterinary Facilities, as well as Licensure Transfer, renewal, and emergency, temporary or faculty licensure. As in other parts of the Act, this Article establishes basic criteria and delegates the authority for implementing those criteria to the Board. The Board exercises this authority by promulgating specific rules and utilizing appropriate enforcement mechanisms. For example, regarding initial licensure, the Act would be implemented by the Board's approval of Veterinarian or Veterinary Technician degree programs, specifications of the Examinations to be used, and establishment of all other prerequisites that must be met by each Applicant to whom it issues a license.

This article as well as the entire Act, also reflects the AAVSB's efforts to develop uniform standards for the transfer of licensure. The veterinary medical profession has become increasingly mobile, and Boards need to examine the ways in which differing standards between Jurisdictions may be affecting the public's access to qualified Licensees.

Section 301. Unlawful Practice.

- (a) The practice of Veterinary Medicine and Veterinary Technology in this Jurisdiction is subject to enforcement by the Board. Except as otherwise provided in this Act, it shall be unlawful for any Person to practice Veterinary Medicine or Veterinary Technology in this Jurisdiction through any means, unless duly licensed under the applicable provisions of this Act.
- (b)
 - (1) No Person shall use the designation Veterinarian, Licensed Veterinarian or any other designation indicating licensure status, including abbreviations, or hold themselves out as a Veterinarian unless duly licensed as such.
 - (2) No Person shall use the designation Veterinary Technician, Licensed Veterinary Technician or any other designation indicating licensure status, including abbreviations, or hold themselves out as a Veterinary Technician unless duly licensed as such.
- (c) The practice of Veterinary Medicine or Veterinary Technology through electronic or other means in this Jurisdiction shall constitute the practice of Veterinary Medicine or Veterinary Technology subject to licensure and enforcement by the Board.

- (d) Any Person who, after a hearing, shall be found by the Board to have unlawfully engaged in the practice of Veterinary Medicine or Veterinary Technology may be subject to a fine to be imposed by the Board which may include cost recovery as set forth in this Act or Board rules. The Board may also seek to issue an order, obtain an injunction or seek other administrative, civil or criminal court action to restrain any Person from violating the provisions of this Veterinary Practice Act. Each violation of this Act or Board rules pertaining to unlawfully engaging in the practice of Veterinary Medicine or Veterinary Technology shall also constitute a (misdemeanor/felony) punishable upon conviction as provided in the criminal code of this Jurisdiction.
- (e) Nothing in this Act shall be construed to prevent members of other professions from performing functions for which they are duly licensed. However, such other professionals must not hold themselves out or refer to themselves by any title or description stating or implying that they are licensed or otherwise entitled to practice Veterinary Medicine or Veterinary Technology.

Commentary

Section 301. Unlawful Practice.

Section 301 establishes the basis for this Article by making it unlawful for any unlicensed Person to engage in the practice of Veterinary Medicine or Veterinary Technology, and by enabling the Board to impose penalties for unlawful practice. See Sections 105 and 106 for the definitions of the practice of Veterinary Medicine and Veterinary Technology.

Boards are often confronted with the issue of preventing unlicensed Persons from engaging in practice. Most practice acts do not give the Board jurisdiction and authority to act against individuals other than those who are licensed or Applicants seeking licensure. Thus, Boards must rely on the difficult task of persuading local prosecutors to take criminal action against Persons not licensed to practice. This gap in jurisdictional authority makes it difficult to effectively prevent unlawful practice.

This section is intended to empower the Board with jurisdiction over Persons engaged in unlicensed practice. The regulation of the practices of Veterinary Medicine and Veterinary Technology, including jurisdiction over unlicensed practice in the professions, has a reasonable and rational relation to public health, safety, and welfare. See, e.g., State v. Wakeen, 57N.W.2d 364 (Wis., 1953). cf. State v. VanKeegan, 113 A.2d141 (Conn., 1955), and Williamson v. Lee Optical of Oklahoma, 348 U.S. 483 (1955). For this reason, vesting power in the Board to regulate illegal practice would not appear to violate constitutional due process requirements. Because monetary fines are not generally considered criminal sanctions, it can be strongly argued that there are no constitutional barriers that would restrict the imposition of findings by a Board. See, e.g., Helvering v. Mitchell, 303 U.S. 376 (1938); City of Waukegan v. Pollution Control Boards, 311 N.E.2d 146 (Ill., 1974); County Council for Montgomery County v. Investors Funding Corp., 312 A.2d 225 (Md., 1973); and Roday v. Hollis, 500 P.2d 97 (Wash., 1972).

Commentary

Section 301. Unlawful Practice. (continued)**Section 301(b). Unlawful Practice.**

This provision is intended to restrict the use of the terms Veterinarian and Veterinary Technician to those who are duly licensed under the provisions of this Act and is not intended to prevent accurate use of initials or abbreviations, such as DVM, VMD or any corresponding degree initials for Veterinary Technicians, indicating academic achievement. This Act is also not intended to prevent other licensed professionals from practicing within other “allied scopes.” However, it is important to recognize the Veterinarian and Veterinary Technician titles and link this name recognition to licensure. This link protects the public through an assurance that there is regulatory consistency associated with the Veterinary Medicine and Veterinary Technology identity. See also the Comments to Section 104(y), defining the term Veterinarian.

Section 301(c). Unlawful Practice.

A license shall be required for any Veterinarian or Veterinary Technician who provides veterinary medical services to a Patient or Client in this Jurisdiction through telephonic, electronic or other means. Many factors, including technological advancements, increase the likelihood of the practice of Veterinary Medicine via electronic means and without physical presence, both intrastate and interstate. While the judiciary may have the final word on regulating professions across Jurisdiction lines, this section is designed to specifically address the issue of where practice takes place. The AAVSB believes the practice of Veterinary Medicine takes place where the Patient is located when the VCPR is established. Because the Board’s central mission is to protect the public in its Jurisdiction, it must make every effort to regulate the practice of Veterinary Medicine being received in that Jurisdiction, regardless of the location of the Veterinarian providing the services. Arguments can also be made that identify the location of practice under these circumstances as occurring in both Jurisdictions; that is where the Patient is located and where the Veterinarian is located.

Veterinarians in this Jurisdiction may wish to utilize the services of other veterinarians not licensed to practice in this Jurisdiction or other Persons. Consultations are defined in Section 104, and there are special provisions in Section 107(c) and (d) for Consultations with other veterinarians and Persons. The responsibility for the welfare of the animal remains with the Veterinarian in this Jurisdiction.

Commentary

Section 301. Unlawful Practice. (continued)**Section 301(d). Unlawful Practice.**

It is a common belief that the veterinary practice act allows Boards to act against Licensees only. However, a survey of the AAVSB Member Boards revealed that about 60% of the Boards are empowered to act against unlicensed practice. In Jurisdictions without this authorization, whenever non-veterinarians are illegally engaged in veterinary activities, the Board must rely upon the Attorney General or other legal authorities to act against these individuals. Sadly, in many cases, illegal veterinary practice is considered a low-level criminal activity that seldom gets a response from law enforcement agencies. Unfortunately, the undertaking of criminal proceedings against unlicensed practice may be beyond the ability of many Boards with limited resources, and if undertaken, caution is advised because the criminal code takes effect and the due process rights granted the accused increase significantly based upon the rights at stake. The Oklahoma Practice Act has language that allows the Board to take more direct action against unlicensed practice.

“Act to halt the unlicensed or illegal practice of veterinary medicine and seek administrative, criminal and civil penalties against those engaged in such practice”.

Some Boards may want to adopt this language. The ability to act against unlicensed practice should be delineated in the actual Practice Act, whereas the administrative process and specific actions to be taken should be outlined in the administrative code.

Section 302. Qualifications for Licensure by Examination.

- (a) To obtain a license to practice Veterinary Medicine, an Applicant for licensure by Examination shall bear the burden of substantiating to the Board that the following criteria have been met:
- (1) Submission of a completed application in the form approved by the Board;
 - (2) Attainment of twenty-one (21) years of age;
 - (3) Is of good moral character. As one element of good moral character, the Board shall require each applicant for licensure to submit a full set of fingerprints for the purpose of obtaining criminal records checks, pursuant to applicable law. All good moral character information, including the information obtained through the criminal background checks, shall be relevant to licensure eligibility determinations to the extent permitted by law.
 - (4) Graduation and receipt of a doctorate degree in Veterinary Medicine from an Approved Veterinary Medical Program;
 - (5) Successful completion, within the X years preceding application, of an Examination(s) approved by the Board; and
 - (6) Payment of all applicable fees specified by the Board relative to the licensure process.
- (b) To obtain a license to practice Veterinary Technology, an Applicant for licensure by Examination shall bear the burden of substantiating to the Board that the following criteria have been met:
- (1) Submission of a completed application in the form approved by the Board;
 - (2) Attainment of eighteen (18) years of age;
 - (3) Is of good moral character. As one element of good moral character, the Board shall require each applicant for licensure to submit a full set of fingerprints for the purpose of obtaining criminal records checks, pursuant to applicable law. All good moral character information, including the information obtained through the criminal background checks, shall be relevant to licensure eligibility determinations to the extent permitted by law.
 - (4) Graduation and receipt of a degree from an Approved Veterinary Technology Program;
 - (5) Successful completion, within the X years preceding application of an Examination(s) approved by the Board; and
 - (6) Payment of all applicable fees specified by the Board relative to the licensure process.

Commentary

Section 302(a)(3). Qualifications for Licensure by Examination.

Legislatures have generally agreed that “good moral character” is a proper requirement for licensure of Veterinarians and Veterinary Technicians. Defining precisely what constitutes good or bad character has caused regulatory Boards and courts considerable difficulty, and a review of applicable case law reveals a considerable variance in the judicial opinions concerning the interpretation of good character requirements. Nevertheless, the courts have uniformly enforced such requirements, reasoning that because regulatory Boards are composed primarily of members of the profession being regulated, they are capable of applying character standards to their professions with relevance and specificity.

While specific character requirements may vary from Jurisdiction to Jurisdiction and may even appear to vary from case to case, the purpose of these requirements remains constant. The public has the right to expect the highest degree of integrity from members of the veterinary medical and technology professions. Boards have a duty to ensure that these expectations are realized. From this perspective, requirements of good moral character for licensure can be expected to be sustained by the courts so long as their enforcement is reasonably related to protection of the public health, safety, and welfare.

When grounded in public protection, issues involving moral character may lead to concerns about the potential for this qualification to be misused by Boards. Although there are many legal ways to ensure that the good moral character issue is not misapplied, including Jurisdiction and federal civil rights legislation, when making character judgments Boards need to be extremely sensitive. Practice act provisions that bear a reasonable relationship to the purpose of protecting the public welfare will generally be regarded as constitutionally acceptable by most courts, so long as the enforcement by Boards is reasonably related to the protection of the public.

Section 302(a)(4). Qualifications for Licensure by Examination.

The AAVSB anticipates that Boards will approve those programs whose standards are at least equivalent to the minimum standards required by the AVMA’s Committee on Education. See Comment to Section 213(a)(3)(4)(5)(6) for a discussion of the Board’s role in the approval process.

Section 302(a)(5). Qualifications for Licensure by Examination.

The AAVSB believes that, for public protection, Boards should limit the amount of time to five (5) years that Applicants can wait after passing the licensing exam to obtain an initial license because entry level skills may not be retained long term without ever practicing.

Section 302(b). Qualifications for Licensure by Examination.

Recognizing that different Jurisdictions have varying requirements for Veterinary Technicians, this section provides the basis for standardized requirements that Boards may wish to work toward.

Section 302(b)(4). Qualifications for Licensure by Examination.

The AAVSB anticipates that Boards will approve those programs whose standards are at least equivalent to the minimum standards required by the AVMA’s Committee on Veterinary Technician Education and Activities (CVTEA). See Comment to Section 213(a)(3)(4)(5)(6) for a discussion of the Board’s role in the approval process.

Section 303. Educational Equivalence.

By rule, the Board may set forth a procedure for Applicants who have graduated from a program/school that is not approved by the Board for an equivalency determination related the educational component of licensure.

Commentary

Section 303. Educational Equivalence.

One of the most difficult tasks for regulatory Boards is to assess the educational equivalence of graduates of veterinary programs outside the United States and Canada that have not been evaluated by a recognized accrediting body under specific standards and criteria. There are currently two (2) programs designed to measure educational equivalence, the AAVSB Program for the Assessment of Veterinary Education Equivalence (PAVE) and the AVMA Educational Commission for Foreign Veterinary Graduates (ECFVG) program. As an entity with public protection as its primary mission and whose membership consists of veterinary Boards who share in this mission, the PAVE program was designed by the AAVSB in response to a request from its member Boards to assist them in the accurate and timely assessment of educational equivalence of foreign graduates. Boards are encouraged to adopt the standards and criteria of PAVE through their rule making process rather than through the statutes. Details of the PAVE program can be found on the AAVSB website. Details of the ECFVG program can be found on the AVMA website.

Section 304. Examinations.

- (a) Any Examination for licensure required under this Act, shall be given by the Board at least two (2) times during each year. The Board shall approve the content and subject matter of each Examination, the place, time and dates of administration of the Examination.
- (b) The Examination shall measure the entry level competence of the Applicant to practice Veterinary Medicine or Veterinary Technology. The Board may employ, cooperate, and contract with any organization or consultant in the preparation, administration and grading of an Examination, but shall retain the sole discretion and responsibility for determining which Applicants have successfully passed such an Examination.

Commentary

Section 304. Examinations.

As has been emphasized throughout this document and comments, the AAVSB recommends that the authority to make decisions directly impacting the licensure process be specifically vested in the Board. On a similar note, the discretion to determine the content and subject matter of each Examination and the passing score necessary to indicate minimum competence for purposes of licensure belongs solely to the Board. The Board, of course, may rely upon the expertise of the owner of the Examination in determining the content areas and pass/fail scores, however, the Board must be the ultimate decision-maker. That is, statutes and/or rules cannot blindly, and without limitations, delegate the decision to the outside entity. See the Comments to Section 213(a) for a more complete explanation.

Section 305. Qualifications for a Temporary License and Emergency Practice.

- (a) Temporary License: The Board may issue a temporary license to practice Veterinary Medicine and Veterinary Technology to an individual licensed in good standing in another Jurisdiction upon approval of an application to the Board. Practice in this Jurisdiction must fall within the scope of practice designated by such license, is permitted for no more than X days per year without applying for a license and is subject to restrictions deemed appropriate by the Board. Such individual shall not be eligible to practice under this temporary license until the date the Board approves the application, shall be deemed to have submitted to the jurisdiction of the applicable Board and shall be bound by the laws of this Jurisdiction.
- (b) Emergency Practice: Any individual licensed in good standing to practice Veterinary Medicine or Veterinary Technology in another Jurisdiction who is providing services within the scope of practice designated by such license and in response to an emergency or disaster declared by the appropriate authority or Jurisdiction may, upon written notice to the Board, provide such services in this Jurisdiction for a period of time in accordance with the declared emergency, but not to exceed X consecutive days per year without applying for a license. Such individual shall be deemed to have submitted to the jurisdiction of the applicable Board and be bound by the laws of this Jurisdiction.

Commentary

Section 305(a). Qualifications for a Temporary License.

The privilege of practicing temporarily is only granted to individuals duly licensed and in good standing to practice Veterinary Medicine or Veterinary Technology in another Jurisdiction. Based upon the uniformity in accredited educational programs and the uniform national Examination(s), it is perceived that minimum competence in one Jurisdiction is reasonably equated to minimum competence in another Jurisdiction. Furthermore, practice privileges apply to such individuals only if the requirements for licensure in the Jurisdiction of licensure are substantially similar to the requirements for licensure in this Jurisdiction.

By design, the language of the temporary license references an “application” to be submitted to the Board prior to engaging in practice under this section. It is up to each individual Board to determine the extent of the application.

The unspecified time period is also, by design, left to the interpretation of a Board as to how the period is to be determined.

Finally, Veterinarians and Veterinary Technicians providing services under this temporary practice privilege are deemed to have submitted to the jurisdiction of the applicable Board and agree to be bound by the laws of the Jurisdictions thereof. It is recommended that the application determined by the Board contain language that verifies the submission of the Person to the Jurisdiction and the applicability of the laws of the Jurisdiction. It provides the Boards with important information about who is practicing (through the application). It also provides the Board with appropriate waivers relative to jurisdiction and the laws of the Jurisdiction. Finally, it provides a privilege which can be removed by the Board through the disciplinary process, reported to the databank, and, if Jurisdiction laws allow, have an eventual impact upon the actual license in the Jurisdiction of licensure.

Section 305(b). Qualifications for Emergency Practice.

See comments to 305(a) relative to the overall rationale for a temporary license and the applicability of jurisdictional and other legal issues. Similar rationale applies to this section as well. In addition, emergency practice in the case of a declared disaster is left to the Board to determine.

Again, this provides the Board with valuable information as to who is practicing within the Jurisdiction in the event of a reported complaint or wrongdoing. Written notice can be determined by the Board, but it is suggested it be limited to a simple statement as to the fact that a disaster has been declared, the Person has a license in good standing and is practicing relative to the disaster, submits him/herself to the jurisdiction of the Board and will abide by the applicable laws of the Jurisdiction. It is not anticipated any such notice will be subject to approval by the Board, thus eliminating the time-consuming Board approval process due to the emergency nature of the situation.

Alternatively, Boards may choose to use the special provisions approach for veterinarians providing services during disasters and other emergency found in Section 107(c).

Section 306. Faculty Licensure.

The Board may issue a faculty license to an Applicant who is a member of the faculty at an Approved Veterinary Medical or Veterinary Technology Program in this Jurisdiction, is actively and currently involved in the instruction of students and is engaged in the practice of Veterinary Medicine or Veterinary Technology. Holders of a faculty license are permitted to practice Veterinary Medicine or Veterinary Technology while engaged in the performance of his or her official duties as a faculty member only.

- (a) To obtain a faculty license, an Applicant shall bear the burden of substantiating to the Board that the following criteria have been met:
 - (1) Completion of the application form approved by the Board. If the Applicant is licensed in another Jurisdiction or country, he or she shall disclose if they have been convicted of a Felony or been the recipient of a disciplinary action by a veterinary Board within the last X years;
 - (2) Proof of graduation and receipt of a degree from an Approved Veterinary Medical or Veterinary Technology Program;
 - (3) Proof of employment at or an appointment to the faculty of an Approved Veterinary Medical or Veterinary Technology Program teaching students, including a description of their faculty responsibilities; and
 - (4) Proof of successful completion, within the X years preceding application, of a faculty licensure Examination(s) approved by the Board.
- (b) A faculty license authorizes the Licensee to practice Veterinary Medicine or Veterinary Technology only while engaged in the performance of his or her official duties as a faculty member and is confined to clinical, hospital or field services units, of the Approved Veterinary Medical or Veterinary Technology Program where employed.
- (c) Faculty Licensees must abide by all the laws governing the practice of Veterinary Medicine or Veterinary Technology in this Jurisdiction and are subject to the same disciplinary action as any other Licensee.
- (d) The faculty license may be renewed at an interval to be determined by the Board.
 - (i) A faculty license shall expire upon receipt by the Board of information that the holder of the license is no longer employed as faculty of an Approved Veterinary Medical or Veterinary Technology Program.
 - (ii) Faculty Licensees must notify the Board of termination of employment or appointment within X days of termination.

Commentary

Section 306. Faculty Licensure.

The AAVSB believes all members of faculty at a college or school of Veterinary Medicine should have a license if they practice on Client-owned Animals in direct association with their employment at the Approved Veterinary Medical Program. Veterinary colleges have indicated that flexibility in licensure is needed in employing eminent scholars from around the world, especially those who practice a sub specialty and may not want to or be able to pass the comprehensive American national licensing exam that covers all species and topics. Yet if faculty are practicing Veterinary Medicine, a mechanism must be in place to ensure public protection if a complaint arises regarding veterinary incompetence or a violation of the Practice Act. The school or college does not have a mission of public protection and it is not their responsibility nor can responsibility be delegated to them to investigate or take appropriate action regarding a complaint. The primary purpose of the faculty license is to allow Approved Veterinary Medical Programs a procedure to bring much desired talent to the faculty while the Jurisdictions can still ensure public protection subject to this article.

Section 306(a)(4). Faculty Licensure.

The faculty licensure examination may be a jurisprudence examination, or any other examination deemed appropriate for this specific purpose, not to be confused with the North American Veterinary Licensing Examination (NAVLE).

Section 307. Qualifications for Licensure Transfer.

- (a) In order for a veterinarian or veterinary technician currently licensed in another Jurisdiction to obtain a license as a Veterinarian or Veterinary Technician by Licensure Transfer in this Jurisdiction, an Applicant shall bear the burden of substantiating to the Board that the following criteria have been met:
- (1) Submission of a completed application in the form approved by the Board;
 - (2) Is of good moral character. As one element of good moral character, the Board shall require each applicant for licensure to submit a full set of fingerprints for the purpose of obtaining criminal records checks, pursuant to applicable law. All good moral character information, including the information obtained through the criminal background checks, shall be relevant to licensure eligibility determinations to the extent permitted by law;
 - (3) Active practice of Veterinary Medicine or Veterinary Technology for at least X hours during the X years preceding application;
 - (4) Proof that a Veterinary or Veterinary Technician license is current, unrestricted and in good standing;

- (5) Proof that any other Veterinary or Veterinary Technology license granted to the Applicant by any other Jurisdiction has not been suspended, revoked, or otherwise restricted for any reason nor subject to any corrective action or discipline; however the Board shall have the discretion to assess the magnitude of any such disciplinary action and determine the licensure eligibility of such Applicant;
- (6) Successful completion of the Jurisdiction Examination, if applicable; and
- (7) Payment of the fees specified by the Board.

Commentary

Section 307(a)(6). Qualifications for License Transfer.

Section 307(a)(6) is applicable to those Jurisdictions that utilize a Jurisdiction-specific Examination as part of the licensure process.

Section 308. Continuing Education.

The Board shall, by rule, establish requirements for Continuing Education in Veterinary Medicine and Veterinary Technology including the determination of acceptable program content. The Board shall adopt rules necessary to carry out the stated objectives and purposes and to enforce the provisions of this Section and the continuing competence of Licensees.

Commentary

Section 308. Continuing Education.

The issue of how best to ensure and assess continuing competence is an on-going concern. Numerous options are being considered by several national organizations including self-assessment tools, continuing competence Examinations, Continuing Education, and others, but no single model has emerged as the single most effective way to ensure continuing competence.

The AAVSB considered several alternatives to mandated Continuing Education, the method currently used by most Jurisdictions. These alternatives ranged from simply stating that Licensees will maintain continuing competence as a standard of practice, to requiring retesting at periodic intervals. The AAVSB recognized that while some of these alternatives might better evaluate the continuing competence of Licensees, it might be premature to recommend an alternative to mandated Continuing Education.

Commentary

Section 308. Continuing Education. (continued)

Continuing Education has been widely used as an acceptable method for ensuring the continued competence of Licensees. Many Boards mandate that Licensees obtain a specified number of hours of Continuing Education within a licensure renewal period. Some Boards specify that Licensees must obtain Continuing Education in certain practice areas. However, most Boards require that Continuing Education consist of more general content areas in Veterinary Medicine or Veterinary Technology. The AAVSB recommends that Boards require Licensees to complete a specified number of Continuing Education hours in each licensure renewal period and develop a method for ensuring compliance such as random audits.

Lending credibility to Continuing Education hours is imperative to the Board's mission of assessing the continuing competence of Licensees.

Rather than rely upon the expectation that Continuing Education programs chosen by the Licensee will meet the criteria of the Board, it is recommended that an assessment mechanism of programs or providers of CE be adopted. Evaluation of programs or providers of CE by experts can assist veterinary Boards by relieving them of time-consuming administrative responsibilities while providing content expertise and uniformity.

To this end, the AAVSB has instituted the Registry of Approved Continuing Education (RACE) program whereby the Association, on behalf of its Member Boards, approves providers and programs of Continuing Education. As set forth in the Definitions, an "Approved Program of Continuing Education" means an educational program approved by the Board or offered by an "Approved Provider of Continuing Education." The AAVSB has adopted stringent criteria utilized in its RACE program in determining Approved Providers and Approved Programs. This criterion was developed based upon an analysis of requirements currently used by the AAVSB Member Boards, along with a review of other organizations that also approve Continuing Education (CE) providers or programs.

At their option, the AAVSB Member Boards may wish to recognize the AAVSB RACE approved providers or programs as "approved" within their Jurisdictions for purposes of accepting CE for licensure renewal.

Such a process will save the administrative burdens placed upon the Board in assessing CE providers or programs while at the same time promoting the mission of the AAVSB to bring uniformity to the licensure and renewal processes. To avoid allegations of improper delegation of authority (see Comments, Section 213(a)), Boards are encouraged to adopt such criteria as established from time to time by the AAVSB RACE Program as the criteria of such Board. This "two-step" process will insure that the Board maintains the ultimate decision-making authority and avoids the legal pitfalls of improper delegation. Details about RACE can be found on the AAVSB website.

Section 309. Registration of Veterinary Facilities.

- (a) All Veterinary Facilities shall be registered with the Board.
- (b) Mobile units shall be exempted from independent registration with the Board when they are operated from a registered Veterinary Facility and the registration identifies and declares the use of the mobile unit.
- (c) Each application to register a Veterinary Facility must identify the Veterinarian Manager who is responsible for its operation and management.
 - (i) The Veterinarian Manager's license must be active and in good standing.
 - (ii) The Veterinarian Manager has the burden to notify the Board of any change in status within X days.
- (d) The Board shall promulgate rules that determine the minimum standards for the Veterinary Facility, including guidelines for application, inspection, sanitation, etc.
- (e) The Board may revoke or suspend or take other disciplinary action deemed appropriate against the registration, including ordering closure of the Veterinary Facility, on any of the following grounds:
 - (i) The Board or its agents are denied access to conduct an inspection or investigation;
 - (ii) The holder of a registration does not pay any and all prescribed fees or monetary penalties; or
 - (iii) There is no Veterinarian Manager identified.

Commentary
<p>Section 309. Registration of Veterinary Facilities.</p> <p>Many Jurisdictions choose to regulate the practice of Veterinary Medicine by registering Veterinary Facilities with the Board. This is also known in some Jurisdictions as a Facility or premise permit. A Veterinarian who registers to be responsible for the operation and management of the Facility is known as the Veterinarian or Veterinarian Manager. Minimum standards of practice, recordkeeping, and sanitation, etc., are some of the guidelines defined by the Board, usually through rules, as well as a time for inspections and renewal of the registration. The Veterinarian Manager is responsible for ensuring that all veterinary standards of care are met by the Facility; failure to do so can result in the loss of registration, closure of the Facility or other penalties. In some Jurisdictions, inspection is required before a new Facility opens or if an application for a new Veterinarian Manager is received.</p>

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- (f) An application for renewal shall be made every X years.

Commentary

Section 309. Registration of Veterinary Facilities. (continued)

The AAVSB recommends that the statute include a provision that the Veterinarian Manager has the burden to notify the Board of any change in status of the Veterinarian Manager and should notify the Board within 14 days of such change. Facility registration is particularly useful in Jurisdictions that permit corporate or non-veterinarian ownership of practices; some of these Jurisdictions permit the manager of the practice to be a non-veterinarian and allow for discipline or corrective action to be taken against a non-Licensee.

Boards may want to consider whether to place a limit on the number of facilities a Veterinarian can register to manage, or whether to require their physical presence for a designated period of time at the facility. In addition, the Board may use its discretion to waive the restrictions for an Applicant to be a Veterinarian Manager upon receipt of a detailed description of any probationary or disciplinary actions against their license or any other violations of the Act.

Some Jurisdictions include standards of practice in the rules for registering a facility. California is an example of a Jurisdiction that has extensive minimum standards of practice in the regulations pertaining to veterinary premise inspection.

Section 310. Licensure Renewal Requirements.

- (a) Licensees shall be required to renew their license at the time and in the manner established by the Board. Under no circumstances, however, shall the renewal period exceed X years;
- (b) As a requirement for licensure renewal, each Licensee shall provide evidence satisfactory to the Board that the Licensee has completed at least X Continuing Education hours of an Approved Program of Continuing Education during the renewal period;
- (c) Veterinary Facilities shall be required to renew their registrations, at the time and in the manner established by the Board. Under no circumstances, however, shall the renewal period exceed X years.

Commentary

Section 310. Licensure Renewal Requirements.

The AAVSB determined that an inactive license status was not necessary as Section 311 allows for reinstatement of an expired license. However, the following language regarding inactive status is provided for reference:

- (a) Any Licensee who is in good standing with the Board and who has ceased the practice of Veterinary Medicine or Veterinary Technology may apply for inactive status. The Board, at its discretion, may place the Licensee on an inactive list and thereafter the inactive Licensee shall not practice Veterinary Medicine or Veterinary Technology, nor be required to pay the annual license renewal fee or required to earn Continuing Education credits.
- (b) Any inactive Licensee who desires to be reinstated or to resume the practice of Veterinary Medicine or Veterinary Technology may be reinstated at the discretion of the Board upon application and the determination that the inactive Licensee has paid the required license renewal fee for the current year in which the application is filed; and that the Licensee earned the required Continuing Education credits in an appropriate timeframe as determined by the Board.

Section 311. Requirements for Reinstatement of an Expired License.

- (a) The Board shall promulgate rules for reinstatement of an expired license for failure to renew within X amount of time.

Commentary

Section 311(a). Requirements for Reinstatement of an Expired License.

The term “expire” is used in this model. Some Jurisdictions use the term “lapse”. In the interest of furthering greater consistency and understanding of terms, the AAVSB recommends the use of “expire” when referring to the status of a license that is not renewed by the required date.

The AAVSB believes that Boards should establish time limits for Licensees to renew their licenses. Recommendations include:

- a) 120 days allowed for lateness if all other renewal requirements have been met and possible late fees have been paid,
- b) 2 years allowed if Applicant fees, CE requirements, and other renewal requirements have been met.

Section 312. Source of Data.

In making determinations under this Article III and to promote uniformity and administrative efficiencies, the Board shall be authorized to rely upon the expertise of and verified data gathered and stored by not for profit organizations that share in the public protection mission of this Board including the American Association of Veterinary State Boards (AAVSB).

Article IV. Discipline.

Commentary

Introductory Comment to Article IV.

The enforcement power of the Boards is at the very heart of any practice act. To fulfill its responsibilities, the Board must have authority to discipline Persons or Licensees who violate the Act or its rules, including the ability to prohibit these Persons from continuing to harm the public. The Board must be able to stop wrongdoers, discipline them, and where appropriate, guide and assist them in continued competence and/or re-education and rehabilitation.

This Act's disciplinary provisions were drafted with the purpose of granting the Board the widest possible scope within which to perform its disciplinary functions. The grounds for disciplinary actions were developed to ensure protection of the public while giving Boards the power to expand or adapt them to changing conditions. The penalties outlined under the Act give the Board the flexibility to tailor disciplinary actions to individual offenses.

Section 401. Grounds, Penalties, and Reinstatement.

- (a) The Board may refuse to issue or renew, or take any action deemed appropriate including suspend, revoke, reprimand, restrict or limit the license or registration of or assess costs or fine any Person or Veterinary Facility, whether or not licensed, pursuant to the Administrative Procedures Act or the procedures set forth in Section 402 herein below, upon one or more of the following grounds:
- (1) Unprofessional conduct as determined by the Board;
 - (2) Practicing Veterinary Medicine or Veterinary Technology outside the scope of practice authorized by this Act;
 - (3) Conduct that violates any of the provisions of this Act or rules adopted pursuant to this Act, including the failure to cooperate with the Board in the inspection or investigative process within a reasonable time period;
 - (4) Incapacity or impairment that prevents a Licensee from practicing Veterinary Medicine or Veterinary Technology with reasonable skill, competence, and safety to the public;
 - (5) Conviction of a Felony (as defined under Jurisdictional or federal law);
 - (6) Any act involving moral turpitude or immorality;
 - (7) Violations of any law, rule or regulation applicable to the practice of Veterinary Medicine or Veterinary Technology;

- (8) Failure to provide medical records in a timely fashion upon proper request by the Client, law enforcement, the Board or other regulatory agency;
- (9) Unauthorized disclosure of confidential information;
- (10) Being found by the Board or any court of competent jurisdiction to have engaged in acts of cruelty or abuse of Animals;
- (11) Misrepresentation of a fact by an Applicant or Licensee;
 - (a) In securing or attempting to secure the issuance or renewal of a license;
 - (b) In statements regarding the Licensee's skills or value of any treatment provided or to be provided or using any false, fraudulent, or deceptive statement connected with the practice of Veterinary Medicine or Veterinary Technology including, but not limited to, false or misleading advertising;
- (12) Fraud by a Licensee in connection with the practice of Veterinary Medicine or Veterinary Technology including engaging in improper or fraudulent billing practices;
- (13) Engaging in, or aiding and abetting any individual engaging in the practice of Veterinary Medicine or Veterinary Technology without a license, or falsely using the title of Veterinarian, or Veterinary Technician or a derivative thereof;
- (14) Failing to conform to currently accepted standards of practice;
- (15) Failing to maintain a Veterinary Facility at accepted minimum standards as defined by Board rules;
- (16) Failing to pay the costs assessed in a disciplinary matter or failing to comply with any stipulation or agreement involving probation or settlement of any disciplinary matter with the Board or with any order entered by the Board;
- (17) Conduct which violates the security of any licensure Examination, including, but not limited to:
 - (a) Removing from the Examination room any Examination materials without authorization;
 - (b) Unauthorized reproduction by any means of any portion of the actual Examination;
 - (c) Aiding by any means the unauthorized reproduction of any portion of the actual Examination;
 - (d) Paying or using professional or paid examination-takers for the purpose of taking or reconstructing any portion of the Examination;

- (e) obtaining Examination questions or other Examination material, except by specific authorization either before, during or after an Examination;
 - (f) using any Examination questions or materials that were improperly removed or taken from any Examination; or
 - (g) selling, distributing, buying, receiving, or having unauthorized possession of any portion of a future, current, or previously administered Examination;
 - (i) Communicating with any other examinee during the administration of an Examination;
 - (ii) Copying answers from another examinee or permitting one's answers to be copied by another examinee;
 - (iii) Having in one's possession during the administration of the Examination any books, equipment (e.g., cell phones, tablets, computers, cameras or other electronic devices), notes, written or printed materials, or data of any kind, other than the Examination materials distributed, or otherwise authorized to be in one's possession during the Examination; or
 - (iv) Impersonating any examinee or having an impersonator take the Examination on one's behalf;
 - (18) Failure of a Licensee or Applicant to report to the Board any information as required under Article VI of this Act; and
 - (19) Being the subject of a disciplinary action, revocation, suspension, or surrender of a Veterinarian or Veterinary Technician license or Veterinary Facility registration or premise permit in another Jurisdiction or country, including the failure to report such adverse action to the Board.
- (b) The Board may defer action with regard to an impaired Licensee who voluntarily signs an agreement, in a form satisfactory to the Board, to enter an approved treatment and monitoring program in accordance with rules duly promulgated by the Board, provided that this Section shall not apply to a Licensee who has been convicted of, pleads guilty to, or enters a plea of nolo contendere to a Felony or a Conviction relating to a controlled substance in a court of law of the United States or any other Jurisdictions, territory, or country, or a Conviction related to sexual misconduct.

- (c) Subject to an order duly entered by the Board, any Licensee whose license has been suspended or restricted pursuant to this Act, whether voluntarily or by action of the Board, shall have the right, at reasonable intervals as determined by the Board, to petition the Board for reinstatement of such license. Such petition shall be made in a form approved by the Board. Upon investigation and hearing, the Board may, at its discretion, grant or deny such petition, or it may modify its original finding to reflect any circumstances which have changed sufficiently to warrant such modifications. The Board, also at its discretion, may require such individual to pass an Examination(s), complete Board imposed Continuing Education requirements, or any other sanctions deemed appropriate by the Board for reentry into practice.
- (d) The Board may issue a cease and desist order to stop any Person from engaging in unauthorized practice or violating or threatening to violate a statute, rule, or order that the Board has issued or is empowered to enforce. The cease and desist order must state the reason for its issuance and give notice of the Person's right to request a hearing under applicable procedures as set forth in the Administrative Procedures Act. Nothing herein shall be construed as barring criminal prosecutions for violations of this Act.
- (e) All final decisions by the Board shall be subject to judicial review pursuant to the Administrative Procedures Act.
- (f) Any Veterinarian or Veterinary Technician whose license is revoked, suspended, or not renewed shall return such license to the offices of the Board within X days after notice of such action.
- (g) The Board is authorized to make public as much disciplinary information about Licensees as the law allows.

Commentary

Section 401. Grounds, Penalties, and Reinstatement.

Under this section, Boards are granted authority over both Licensees and Applicants. General powers are phrased in such a way as to allow the Board a wide range of actions, including the refusal to issue or renew a license, and the use of license restrictions or limitations. Similarly, the penalties outlined in this section give the Board wide latitude to make the disciplinary action fit the offense. Please refer to the Board powers of Section 213 for additional authority. Any "reasonable intervals," such as in 401(c), would be determined by the Board.

The AAVSB recommends that Boards develop clear policies regarding the reporting of disciplinary actions taken against Licensees, subject to confidentiality and to the applicable laws of the Jurisdictions. It is strongly recommended that Boards make public as much disciplinary action information as Jurisdiction law allows, and that all Boards participate in the AAVSB Veterinarian Information Verification Agency (VIVA), a national databank that allows Boards to review veterinary licensure candidates for past disciplinary actions from other Jurisdictions

Commentary

Section 401. Grounds, Penalties, and Reinstatement. (continued)**Section 401(a). Grounds, Penalties, and Reinstatement.**

This section must be examined in light of other applicable laws. Some Jurisdictions, for example, restrict the circumstances under which a license may be denied to an individual who has committed a Felony. Additionally, an individual who has been convicted of a Felony or an act of gross immorality and who has paid the debt to society has restored constitutional protections. These protections may curtail a strict application of Section 401(a) to this individual.

These potential issues make it essential for Boards to promulgate rules that make the grounds for disciplinary action specific, understandable, and reasonable. Boards must ensure that these rules are published for the benefit of all Licensees. Taking these steps will assure the Board of the authority to make effective and meaningful disciplinary actions that will not be overturned by the courts.

Section 401(a)(1). Grounds, Penalties, and Reinstatement.

Boards must be specific when defining the grounds for revoking or suspending a license. The term “unprofessional conduct” is particularly susceptible to judicial challenge for being unconstitutionally vague. Each offense included in this term must be capable of being understood with reasonable precision by the Persons regulated. If this standard is met, the Licensees will be able to conform their professional conduct accordingly, and Boards will be able to readily enforce this provision and rely upon it during disciplinary proceedings. Other terms sometimes used in statutes include unethical, immoral, improper or dishonorable conduct. Generally, courts have recognized as appropriate the use of unprofessional conduct when challenged legally. See Chastev v. Anderson, 416 N.E.2d 247 (Ill.1981); Stephens v. Penn. State Bd. of Nursing, 657 A.2d 71 (Pa. 1995).

Section 401(a)(3). Grounds, Penalties and Reinstatement.

This subsection allows the Board to take disciplinary action against a Person for violation of any portion of this Act or Board rules. While not specifically enumerated in this subsection, many activities, such as failure to report under the mandatory reporting provisions in Article VI constitutes actionable conduct.

Section 401(a)(4). Grounds, Penalties and Reinstatement.

[See also Comment to Section 401(b) regarding participation in an impairment program.] This section does not identify specific impairments to allow for broad application and the potential for expansion. It is intended to cover incapacity and impairments due to drug and alcohol abuse, mental and physical health conditions, in addition to other disabilities as defined by the Americans with Disabilities Act Amendments Act of 2008 (ADAAA). Board action must be based on the protection of the public, the goal of the practice act. The ADAAA is designed to provide opportunities to otherwise qualified individuals with disabilities. It does not mandate licensure where public protection might be compromised. Boards are encouraged to seek legal advice on this matter.

Section 401(a)(5). Grounds, Penalties and Reinstatement.

Boards must also be aware of how the definition of “Felony” may impact its action See Rothstein v. Dept. of Professional and Occupational Regulation, 397 So.2d 305 (App. Ct. Fla. 1981), where the Florida Felony definition differed from the federal definition.

Commentary

Section 401. Grounds, Penalties, and Reinstatement. (continued)**Section 401(a)(14). Grounds, Penalties, and Reinstatement.**

Veterinary Boards are encouraged to adopt specific standards of practice and codes of conduct into the rules/regulations to provide Licensees with reasonable guidance as to acceptable practice activities. Failure to adopt such standards may impede the Board from enforcement should a Licensee be accused of substandard practice. Reliance on standards adopted by an outside entity such as the professional association, without formal adoption by the Board may encourage improper delegation arguments as well as a failure to provide Licensees with the appropriate parameters of acceptable practice. This, of course, does not preclude the Board from formally adopting the standards that may already be in existence within these other associations.

Section 401(b). Grounds, Penalties and Reinstatement.

This section addresses the impaired Licensee and outlines the Board's flexibility when dealing with such Licensee through investigations and disciplinary actions.

Veterinary Boards may wish to consider the following for rules/regulations relative to the impaired Licensee to specify the contractual expectations of Licensees requesting participation in the program:

- (1) A Licensee who is physically or mentally impaired due to addiction to drugs or alcohol may qualify as impaired and have disciplinary action deferred and ultimately waived only if the Board is satisfied that such action will not endanger the public and the Licensee enters into an agreement with the Board for a treatment and monitoring plan approved by the Board, progresses satisfactorily in such treatment and monitoring program, complies with all terms of the agreement and all other applicable terms of subsection (b)
- (2) Failure to enter such agreement or to comply with the terms and make satisfactory progress in the treatment and monitoring program shall disqualify the Licensee from the provisions of this Section and the Board may activate an immediate investigation and disciplinary proceedings. Upon completion of the rehabilitation program in accordance with the agreement signed by the Board, the Licensee may apply for permission to resume practice upon such conditions as the Board determines necessary.
- (3) The Board may require a Licensee to enter into an agreement that includes, but is not limited to, the following provisions:
 - (i) Licensee agrees that the license may be suspended or revoked under Section (1);
 - (ii) Licensee will enroll in a treatment and monitoring program approved by the Board;
 - (iii) Licensee agrees that failure to satisfactorily progress in such treatment and monitoring program shall be reported to the Board by the treating professional who shall be immune from any liability for such reporting made in good faith; and
 - (iv) Licensee consents to the release of treatment and monitoring reports to the Board. The Board shall determine the format and intervals of such reports. Any personnel reporting to the Board under this section shall be immune from liability when such reports are made in good faith.

Commentary

Section 401(b). Grounds, Penalties, and Reinstatement. (continued)

- (4) The ability of an impaired Licensee to practice may be restored and charges dismissed when the Board is satisfied by the reports it has received from the approved treatment program that the Licensee can resume the practice of Veterinary Medicine or Veterinary Technology without danger to the public.
- (5) The impaired Licensee who has enrolled in an approved treatment and monitoring program and entered into an agreement with the Board in accordance with this Act may have the license suspended or revoked but enforcement of this suspension or revocation shall be stayed for the length of time the Licensee remains in the program and makes satisfactory progress, complies with the terms of the agreement, and adheres to any limitations on the practice of Veterinary Medicine or Veterinary Technology imposed by the Board to protect the public. Failure to enter into such agreement or to comply with the terms and make satisfactory progress in the treatment and monitoring program shall disqualify the Licensee from the provisions of this Section and the Board shall activate an immediate investigation and disciplinary proceedings.
- (6) Any Licensee who has reasonable knowledge that another Licensee has an active addictive disease that affects their ability to practice, is diverting a controlled substance, or is mentally or physically incompetent to carry out the duties of the license, shall report it to the Board. Any Licensee who reports pursuant to this Section in good faith and without malice shall be immune from any liability arising from such reports. Failure to provide such a report within a reasonable time from receipt of knowledge may be considered grounds for disciplinary action against the Licensee so failing to report.

The AAVSB encourages Boards to explore options for the effective monitoring of impaired Licensees. Once the Board has identified an impaired Licensee, there are many resources available to Boards that can assist in the monitoring and rehabilitation process.

It is the intention of the AAVSB that the regulatory language of “treating professional” under section (3)(iii) above shall include supervisors and others involved in the treatment and monitoring program. Readers may also refer to Section 605, Immunity, within the Act.

Section 401(c). Grounds, Penalties and Reinstatement.

A Licensee who is under investigation, or who has been charged with a violation of the Veterinary Medicine and Veterinary Technology Practice Act may agree to voluntarily surrender his or her license. When this occurs, the Board should formally enter stipulated findings and an order describing the terms and conditions of the surrender, including any agreed-upon time limits. This important step establishes statutory grounds that will support any disciplinary action and prevents a Licensee who has surrendered a license from applying for (or receiving) reinstatement within a time frame unacceptable to the Board. In the case of a Veterinarian, final adverse action by the Board also triggers a report to the AAVSB Veterinary Information Verification Agency (VIVA) to inform other Jurisdictions of the sanction.

Commentary

Section 401(c). Grounds, Penalties, and Reinstatement. (continued)

The AAVSB encourages Boards to review local law regarding disciplinary sanctions, and distinguish between revocation, suspension, and rights and conditions of reinstatement. See Flanzer v. Board of Dental Examiners, 271 Cal.Rptr. 583 (1990) (Board empowered to impose conditions of reinstatement); Jones v. Alabama State Board of Pharmacy, 624 So.2nd 613 (Ala. App.Ct. 1993) (revoked license carries no right of reinstatement); and Roy v. Medical Board of Ohio, 655 N.E.2d (Ohio App.Ct.1995) (authority to revoke a license to practice includes the authority to revoke permanently).

The AAVSB also recognizes the importance of appropriately drafted Board orders that include at least the following: findings of fact, conclusions of law, sanctions, reinstatement rights (if any) and notice of publication (newsletter, website, etc.). It is imperative that Board orders contain such specificity in order to provide enough information to the disciplined Licensee, current Board, as well as future Board members, as to the licensure status and/or eligibility for re-licensure of the individual.

Section 401(g). Grounds, Penalties and Reinstatement.

See the Introductory comment in Section 401 regarding the disclosure of disciplinary actions to the public.

Section 402. Summary Suspension.

Notwithstanding provisions of any applicable law, the Board may, without a hearing, temporarily suspend a license or Veterinary Facility registration for not more than X days if the Board finds that a Licensee or Veterinary Facility is in violation of a law or rule that the Board is empowered to enforce, and if continued practice by the Licensee or operation of the Veterinary Facility would create an imminent risk of harm to the public or an Animal. The suspension shall take effect upon written notice to the Licensee specifying the law violated. At the time it issues the suspension notice, the Board shall schedule a disciplinary hearing to be held under the Administrative Procedures Act within X days thereafter. The Licensee shall be provided with at least X days' notice effective from the date of issuance of any hearing held under this subsection.

Commentary

Section 402. Summary Suspension.

In many Jurisdictions, an Administrative Procedures Act determines the procedures that must be followed before disciplinary action can be taken. The Practice Act Model was drafted on the assumption that an Administrative Procedures Act is in effect.

Summary suspension as defined in this section describes an action that can be taken against a Licensee. Jurisdictions that permit the ownership or registration of veterinary practice by non-veterinarians are advised to develop separate language that enables them to enact the summary suspension of a Veterinary Facility registration, permit or license.

Article V. Medical Records and Confidentiality.

Commentary

Introductory Comment to Article V.

This Article is intended to establish the need for complete and accurate medical records. Incomplete or inaccurate medical records are among the most common grounds for disciplinary action by regulatory boards. This Article also addresses confidentiality requirements for Licensees, based on the professional relationship between practitioner and Client. Although “confidentiality” and “privileged communication” are related terms, there are important differences between the two concepts. “Confidentiality” is a broad term, and describes the intention that information exchanged between a Licensee and a Client is to be maintained in secrecy, and not disclosed to outside parties. “Privileged communication” is a narrower term that describes the legal relationship between Licensee and Client when a law mandates confidentiality.

Section 501. Medical Records.

- (a) Each Veterinarian who provides veterinary medical services shall maintain accurate electronic or legibly written medical records that include the identity of the Veterinarian or authorized representative who makes the entry.
- (b) Veterinary medical records are the property of the veterinary practice where they were prepared.
- (c) All records required by law to be kept by a Veterinarian shall be open to inspection by the Board or its authorized representatives during a routine inspection or investigation of a complaint, and a copy provided immediately upon request.
- (d) Veterinary medical records must be safeguarded against loss, tampering or use by unauthorized Persons, readily available, and contain sufficient information to permit any authorized veterinarian to proceed with the care and treatment of the Patient by reading the medical record. They must include, but are not limited to the following information:
 - (1) Patient identification;
 - (2) Client identification;
 - (3) A record of every encounter and Consultation regarding the Patient;
 - (4) All written records and notes, radiographs, sonographic images, video recordings, photographs or other imaging and laboratory reports;
 - (5) Any information received as the result of a Consultation, including the date, name and contact information of the consultant; or

- (6) Any authorizations, details of conversations, releases, waivers, Patient discharge instructions or other related documents.
- (e) The Client is entitled to a copy of the veterinary medical records.
- (1) Original Patient records must be retained by the veterinary practice or Veterinarian who prepared them and be readily retrievable for a period of X years following the last Patient encounter.
- (2) The Veterinarian may require that the request be in writing and may charge a reasonable fee for copying the requested veterinary medical record.
- (3) Copies of the record should be provided to the Client, designated Veterinarian or duly authorized representative within X days after receipt of a proper request, or sooner in accordance with the Patient's medical condition.
- (4) Failure to provide the medical records in a timely fashion upon proper request shall be considered unprofessional conduct.
- (f) A Patient's veterinary medical record and medical condition is confidential and may not be furnished to or discussed with any Person other than the Client or other veterinarians involved in the care or treatment of the Patient, except upon authorization of the Client or as below.
- (1) A Patient's veterinary medical records and information about the medical condition may be furnished without Client authorization under the following circumstances:
- (i) Access to the records is specifically required by law.
- (ii) In response to a court order, or subpoena and notice to the Client or the Client's legal representative.
- (iii) For statistical and scientific research, if the information is abstracted in a way as to protect the identity of the Patient and the Client.
- (iv) As part of an inspection or investigation conducted by the Board or an agent of the Board.
- (v) As part of a formal verbal or written request from a regulatory, or public health authority.
- (vi) To verify a rabies vaccination of an Animal; or (b) to investigate a threat to human or Animal health, (c) for the protection of individual Animal, human or public health and welfare.
- (vii) As a part of an Animal cruelty report or an abuse investigation by a law enforcement or duly appointed animal welfare or governmental agency.

(viii) As part of a criminal investigation by a law enforcement agency.

(ix) When the Client cannot be reached to obtain authorization to release the records to another Veterinarian in a medical emergency.

(x) In the course of a Consultation as defined in Article I section 104 (k).

(g) A Veterinarian shall not, with fraudulent intent, create a false record, make a false statement, alter or modify any medical record, document, or report concerning treatment of a Patient. When correcting a medical record, the original content should be readable, and the alteration must be clearly identified with the reason, date and author's name.

Commentary

Section 501(d)(3). Medical Records.

Encounters with the Patient include in person visits, telephone conversations or any telehealth interactions between the Veterinarian and the Client.

Section 501(e). Medical Records.

The dispensing of veterinary prescription drugs or controlled substances requires that, the records must be maintained in accordance with applicable laws.

Section 501(f)(1)(ix). Medical Records.

The Jurisdiction should determine which agencies or Persons in their Jurisdiction should be authorized to release medical records information without Client authorization.

Section 502. Confidential Information and Exceptions.

- (a) No Licensee shall disclose any information acquired from Persons consulting the Licensee in a professional capacity, except that which may be disclosed under the provisions of Section 501 (f) and the following circumstances:
- (1) In the course of formally reporting, conferring or consulting with colleagues or consultants, in which instance all recipients of such information are similarly bound to regard the information as confidential;
 - (2) With the consent of the Client;
 - (3) In case of death or disability of the Client, with the consent of a personal representative or other authorized Person;

- (4) When a communication reveals the commission of, or intended commission of a crime or harmful act or Animal abuse and such disclosure is judged necessary by the Licensee to protect any Person or Animal from a clear, imminent risk of mental or physical harm or injury, or to forestall a threat to public safety; or
 - (5) When the Person waives the confidentiality by bringing any public charges against the Licensee.
- (b) Any Person having access to Patient medical records, or anyone who participates in providing veterinary medical services or who is supervised by a Veterinarian is similarly bound to regard all information and communications as confidential in accordance with the section.

Commentary

Section 502(a)(2). Confidential Information and Exceptions.

The AAVSB encourages written consent where available or deemed appropriate by the Veterinarian.

Article VI. Mandatory Reporting.

Commentary

Introductory Comments to Article VI.

Licensees are in a unique position to know of and evaluate the conduct of other Licensees. This section establishes a Licensee's legal responsibility to report activities that may be harmful to Clients, Animals or the public, including incompetence, negligence and unethical practice.

Recently, consumer groups and others have voiced concerns that health care professionals often protect each other either through remaining silent when made aware of substandard practice, or through outright denial of this substandard practice to the detriment of the public. This perception undermines the public's confidence in professional regulation. The inclusion of mandatory reporting provisions provides assurance that professional "protection" that puts the public at risk is itself a violation of the practice act.

While it may not be mandated by law and may not fall within the authority of the Board, it is hoped that professional association, courts, and other entities will report relevant information or conduct to the Board.

Section 601. Responsibility to Report.

- (a) A Licensee or Applicant who has knowledge of any conduct by a Licensee or Applicant that may constitute grounds for disciplinary action under this Act or the rules of the Board, or of any unlicensed practice of Veterinary Medicine or Veterinary Technology under this Act, shall report the violation to the Board.
- (b) Failure of a Licensee or Applicant to report to the Board any information as required in this section 601 shall constitute grounds for discipline by the Board.

Section 602. Courts.

The administrator of any court of competent jurisdiction shall report to the Board any determination that a Licensee or Applicant is mentally ill, mentally incompetent, guilty of a Felony, guilty of a violation of any controlled substances laws, or guilty of any crime reasonably related to the practice of Veterinary Medicine or Veterinary Technology. Furthermore, the administrator shall report to the Board any appointment of a guardian to, or involuntary commitment of a Licensee or Applicant to a mental health facility pursuant to applicable law.

Commentary
<p>Section 602. Courts.</p> <p>While it is unlikely that the Board has jurisdiction over the courts, and thus may not legally enforce this section, it is hoped that courts will report relevant disciplinary actions to the Board.</p>

Section 603. Self-Reporting.

A Licensee or Applicant shall report to the Board any personal action that would require a report be filed pursuant to this Article VI.

Section 604. Deadlines, Forms.

Reports required by this Article VI must be submitted not later than X days after the occurrence of the reportable event or transaction. The Board may provide forms for the submission of reports, may require that reports be submitted on the forms provided, and may adopt rules necessary to assure prompt and accurate reporting.

Commentary
<p>Section 604. Deadlines, Forms.</p> <p>The AAVSB recommends that reports be submitted no later than 30 days after the occurrence of the reportable event.</p>

Section 605. Immunity.

Except for self-reporting a Person is immune from any liability or prosecution for submitting in good faith a report under Article VI, or for otherwise reporting, providing information, or testifying about violations or alleged violations of this Act.

Article VII. Other.

Section 701. Severability.

If any provision of this Act is declared unconstitutional or illegal, or the applicability of this Act to any Person or circumstance is held invalid by a court of competent jurisdiction, the constitutionality or legality of the remaining provisions of this Act and the application of this Act to other Persons and circumstances shall not be affected and shall remain in full force and effect without the invalid provision or application.

Section 702. Effective Date.

This Act shall be in full force and effect on [insert date].



MEMORANDUM

To: Board Administrators of the AAVSB Member Boards for Distribution
From: AAVSB Bylaws and Resolution Committee
Date: May 3, 2018
Subject: Proposed Bylaws Amendments

The following includes the recommendations from the AAVSB Bylaws and Resolution Committee on the two proposed Bylaws amendments for 2018. The proposed changes are indicated in red on the enclosed Bylaws. The page numbers refer to the full Bylaws document. Delegates will vote on the proposed amendments in September at the 2018 AAVSB Annual Meeting & Conference being held in Washington, D.C.

Proposed Amendment #1 (changes in red on the attached bylaws)	
<i>Location in Bylaws:</i>	Article VII. Board of Directors and Officers Section 2. Qualifications – Bylaws, page 6
<i>Proposed By:</i>	AAVSB Board of Directors
<i>Proposed Group’s Thoughts:</i>	The changes proposed provide consistency to the qualifications for all Directors and Article VII. Board of Directors and Officers, Section. Removal can be used if eligibility criteria changes for any Director.
<i>Recommendations:</i>	<i>The Bylaws and Resolution Committee supports the proposed amendment.</i> <i>The AAVSB Board of Directors supports the proposed amendment.</i>

Proposed Amendment #2 (changes in red on the attached bylaws)	
<i>Location in Bylaws:</i>	Article X. Committees Section 7. Finance Committee – Bylaws, page 13
<i>Proposed By:</i>	AAVSB Finance Committee
<i>Proposed Group’s Thoughts:</i>	The changes proposed would ensure historical committee knowledge since, under the current structure, a majority of the members could be new to the committee at the same time.
<i>Recommendations:</i>	<i>The Bylaws and Resolution Committee supports the proposed amendment.</i> <i>The AAVSB Board of Directors supports the proposed amendment.</i>

AMERICAN ASSOCIATION OF VETERINARY STATE BOARDS

BYLAWS

ARTICLE I. NAME.

Section 1. Name.

The name of this organization is the American Association of Veterinary State Boards.

Section 2. Location.

The principle offices of the Association shall be located in such place or places as determined from time to time by the Board of Directors.

ARTICLE II. PURPOSE.

The objective of this Association is to aid regulatory boards of veterinary medicine in the protection of the public health and welfare by:

- a. Acting as a clearinghouse for research, collection and dissemination of information and ideas among Member Boards concerning legal regulation of the veterinary profession.
- b. Encouraging and aiding collaborative efforts among Member Boards to simplify and standardize licensing and certification processes for veterinarians and veterinary technicians.
- c. Representing the opinions of the Association in those matters related to the provision of veterinary services by interacting with other veterinary organizations; legislative, judicial, regulatory or executive governmental bodies; and with other groups or associations whose areas of interest may coincide with those of the Association.
- d. Providing assistance to Member Boards in fulfilling statutory, public, and ethical obligations in legal regulation and enforcement.
- e. Communicating with and advising the International Council for Veterinary Assessment on examination matters of relevance to Member Boards.
- f. Overseeing collection and dissemination of information regarding disciplinary actions taken by Member Boards.
- g. Identifying and promoting desirable and reasonable uniformity in practice standards and expected outcomes of veterinary education.
- h. Providing veterinary medical educational programs with statistical information about examinees' performances on the licensing and certification examinations, when requested, within the legal limitations regarding confidentiality of examinees.
- i. Credentialing and overseeing the qualifying process by which foreign-trained veterinarians become eligible for licensure, including consultation with parties of interest.

- j. Providing Member Boards with programs that assist them in meeting their responsibilities on licensure, registration, regulation, and enforcement regarding the practice of veterinary medicine and veterinary technology.

ARTICLE III. DEFINITIONS.

Section 1. Association.

"Association" shall mean the American Association of Veterinary State Boards (AAVSB).

Section 2. Board.

"Board" shall mean the governmental agency empowered to credential and regulate the practice of veterinary medicine in any of the States and Commonwealths of the United States, its territories, the District of Columbia, and insular possessions of the United States, individual provinces of Canada, and additional comparable entities.

Section 3. Board of Directors.

"Board of Directors" shall mean the Board of Directors of the American Association of Veterinary State Boards. For clarity, the Board of Directors is referred to as the "AAVSB Board of Directors" or the "Board of Directors."

Section 4. Member Board.

"Member Board" shall mean any Board as defined above which is duly accepted into the Association pursuant to these Bylaws. Member Boards shall pay annual Member Board dues as determined by the Board of Directors and approved by the Delegate Assembly.

Section 5. Associate Member.

"Associate Member" shall mean any individual who has previously served on a Member Board and who applies for and receives recognition from the Board of Directors. Associate Members shall pay annual Associate Member dues as determined by the Board of Directors.

Section 6. Affiliate Member.

"Affiliate Member" shall mean the current Executive Director/Executive Officer/Administrator or other individual who holds a similar title or position with a Member Board. Each Member Board shall have only one Affiliate Member for the purposes of eligibility to serve on the AAVSB Board of Directors. Upon loss of position or title as Executive Director/Executive Officer/Administrator, the Affiliate Member status shall immediately cease.

Section 7. Delegate.

"Delegate" shall mean a current member or Affiliate Member of a Member Board designated by the Member Board as its Delegate to the AAVSB Delegate Assembly.

Section 8. Alternate Delegate.

"Alternate Delegate" shall mean a current member or Affiliate Member of a Member Board designated by the Member Board as its Alternate Delegate to the AAVSB Delegate Assembly.

Section 9. Delegate Assembly.

"Delegate Assembly" shall mean the governing body that is comprised of Member Boards.

Section 10. Licensed Veterinarian.

"Licensed Veterinarian" shall mean an individual authorized by a Board to practice veterinary medicine in that jurisdiction.

Section 11. Licensed Veterinary Technician.

"Licensed Veterinary Technician" shall mean an individual authorized by a Board to practice as a veterinary technician in that jurisdiction.

Section 12. Public Member.

"Public Member" shall mean a current member of a Board who is not, nor has ever been, a Licensed Veterinarian or Licensed Veterinary Technician.

ARTICLE IV. MEMBERSHIP.

Section 1. Application.

Upon receipt of a written indication of interest in membership by a Board, the Executive Director will respond within 30 days with an application for membership.

Section 2. Admittance.

A Board, which qualifies for membership, may be admitted into the Association as a Member Board by the Board of Directors, after seeking comment and opinion from Member Boards.

Section 3. Rights and Privileges.

A Member Board that is current on its payment of membership dues and other applicable fees shall have all rights of membership, including the right to vote on all matters duly brought before the membership.

Section 4. Termination of Membership.

- a. Membership may be terminated at an Annual Delegate Assembly when so ordered by an affirmative vote of a two-thirds majority of all Member Boards, that is as if the established quorum included all Member Boards. Written notice that termination is to be considered and the cause for the action shall be sent by the Secretary of the Association to all Delegates and to the Member Boards not less than 90 days prior to the meeting. The Member Board in question shall have opportunity to be heard, with representation by counsel, before a vote is taken.
- b. Upon termination, all rights of the Member Board as provided in these Bylaws shall cease.

Section 5. Reinstatement.

Reinstatement may be granted by the Board of Directors upon appropriate reapplication and compliance with all conditions set forth by the Board of Directors.

ARTICLE V. DELEGATE ASSEMBLY.

Section 1. Delegates.

The Delegate for each Member Board shall be seated by the Secretary under policies established by the Board of Directors, including the necessity to require an appropriate credential from the Member Board.

Section 2. Alternate Delegates.

Each Member Board shall have the right to designate an Alternate Delegate to act on its behalf in the event of the absence of the Delegate and under policies established by the Board of Directors.

Section 3. Delegate Assembly Authority.

The Delegate Assembly may take such action, not in conflict with the Association Articles of Incorporation or these Bylaws, as it deems necessary, expedient or desirable to fulfill and implement the Association's stated purposes. The Delegate Assembly shall provide direction for the Association by Member Board participation, through the election of representatives, and through the resolution process.

ARTICLE VI. DELEGATE ASSEMBLY MEETINGS.

Section 1. Annual Delegate Assembly.

The Annual Delegate Assembly shall be held yearly at a time and place to be determined by the Board of Directors.

Section 2. Educational Meeting.

In addition to its Annual Delegate Assembly, the Association may hold an Educational Meeting at a time and place to be determined by the Board of Directors. No Association business shall be conducted at the Educational Meeting, unless the Board of Directors notifies Delegates, Alternate Delegates, and all Member Boards of the necessity to conduct business in accordance with the required time lines for notice of the meeting.

Section 3. Special Meeting.

Special Meetings of the Delegate Assembly may be called by the President at any time with the approval of a majority of the Board of Directors. The President must call a Special Meeting if and when the Secretary receives written request thereof from at least one-half of the Member Boards of the Association.

Section 4. Notice and Agenda.

The Secretary of the Association shall send notice and a proposed agenda for all Annual Delegate Assemblies, Educational Meetings, and Special Meetings to all Member Boards at least 60 days prior to the meeting date. The agenda for the Annual Delegate Assembly shall be presented to the Delegate Assembly at the commencement of the meeting, and, with the exception of the elections, may be revised by an affirmative vote of a majority of Member Boards present.

Section 5. Quorum and Voting.

In order to conduct business at any meeting of the Delegate Assembly, a quorum must be established consisting of the presence and seating of at least a majority of all Member Boards. Assuming the presence and seating of a majority of Member Boards as referenced above, the total number of Member Boards in attendance shall constitute the quorum. Unless otherwise required by applicable law, AAVSB Articles of Incorporation, these Bylaws, or Robert's Rules of Order, all matters brought to a vote shall require an affirmative vote of a majority of the quorum for adoption. In the absence of representation of a majority, those Member Boards in attendance shall have the authority to adjourn the meeting by a majority vote.

Section 6. Participation.

A Member Board is entitled to be represented by a single vote on each issue put to a vote before the Delegate Assembly. Member Boards shall vest the right to vote in their Delegates and Alternate Delegates. Voting by proxy is prohibited. Delegates, Alternate Delegates, all members and employees of Member Boards, Associate Members, Affiliate Members, and all members of Association committees shall have the privilege of the floor at all Delegate Assembly meetings. Only seated Delegates and seated Alternate Delegates are eligible to make and second motions and to vote on matters put forth to the Delegate Assembly.

Section 7. Parliamentary Authority.

The rules contained in the most current edition of Robert's Rules of Order Newly Revised shall govern the Association in all cases to which they are applicable and in which they are not inconsistent with these Bylaws and any special rules of order the Association may adopt.

Section 8. Records.

The Association shall keep accurate and complete minutes of all business meetings of the Delegate Assembly, and shall make these minutes available to any Member Board for any proper purposes at any reasonable time.

ARTICLE VII. BOARD OF DIRECTORS AND OFFICERS.

Section 1. Composition.

There shall be ten (10) members of the Board of Directors including four (4) Officers and six (6) Directors at Large.

The Officers shall be identified as President, President-Elect, Immediate Past President and Treasurer. The Officers and Directors at Large are collectively referred to as the Board of Directors. The Officers may, at times be collectively referred to as the Executive Committee. Notwithstanding any other provisions of these Bylaws, the Board of Directors shall be comprised of at least six Licensed Veterinarians and one Affiliate Member. The Executive Director shall serve as Secretary and as an ex-officio non-voting member of the Board of Directors.

Section 2. Qualifications.

a. Officers

To be eligible to serve as an Officer, a candidate shall when nominated and elected be currently serving on the Board of Directors, be a Delegate, Alternate Delegate, or be a member of a Member Board.

b. Directors at Large

To be eligible to serve as a Director at Large, a candidate shall when nominated be a Delegate, Alternate Delegate, member of a Member Board or have served as a member of a Member Board as of June 1st of the year preceding the election year.

~~With the exception of the Affiliate Member, If a Director ceases to meet eligibility criteria stated above, such Board of Director member shall, after completion of the current term, be eligible to serve one additional term on the Board of Directors. In the event the Affiliate Member ceases to meet eligibility criteria, there shall be an immediate vacancy filled pursuant to these Bylaws.~~

Section 3. Elections.

The Board of Directors shall be elected at the Annual Delegate Assembly of the Association by the Delegates, either from nominations submitted by the Nominating Committee,

or by nominations from the floor. Each Director shall assume office at the close of the Annual Delegate Assembly at which the member is elected and shall serve as specified in these Bylaws or until a successor is elected.

Section 4. Authority.

The Board of Directors shall manage the affairs of the Association, including the establishment of an annual budget for the Association and the transaction of all business for and on behalf of the Association as authorized under these Bylaws. The Board of Directors shall carry out the resolutions, actions, or policies as authorized by the Delegates, subject to the provisions of the Association Articles of Incorporation and Bylaws.

There may be an Executive Director employed by the Association who shall be hired by the Board of Directors and who shall work under such terms, conditions and standards as the Board of Directors shall, from time to time, establish. The Executive Director shall act as the administrative officer for the Association and shall be reviewed periodically by the Board of Directors. The Executive Director shall report to and be accountable to the Board of Directors.

Section 5. Duties of Officers.

The duties of the Officers of the Association shall be those which usually pertain to such offices.

Section 6. Terms.

For purposes of these Bylaws, the offices of Immediate Past President, President, and President-Elect shall be considered one (1) term. The terms of the Board of Directors shall be as follows:

- a. Immediate Past President. The Immediate Past President shall serve a one (1) year term automatically following the term as President. The Immediate Past President shall only vote on matters before the Board of Directors to break a tie.
- b. President. The President shall serve a one (1) year term automatically following the term as President-Elect. In the event of a vacancy, the President-Elect shall succeed to the Presidency to fill the unexpired term and may, thereafter, complete the President's term.
- c. President-Elect. A President-Elect shall be elected at the Annual Delegate Assembly to serve a one (1) year term and shall automatically succeed to the office of President and, thereafter, the office of Immediate Past President. Thus, the President-Elect office is a three (3) year commitment, one year as President-Elect, one year as President, and one year as Immediate Past President and is limited to one elected term. In the event of a vacancy, the President in consultation with the Board of Directors may appoint the office of President-Elect. In any event and under these circumstances, at the next Annual Delegate Assembly, there shall be an election for both President and President-Elect.

- d. Treasurer. A Treasurer shall be elected at the Annual Delegate Assembly to serve a term of two (2) years. In the event of a vacancy, the Treasurer position shall be appointed by the President in consultation with the Board of Directors until the next Annual Delegate Assembly at which time an election shall be held. The Treasurer shall serve no more than two (2) consecutive terms.
- e. Directors at Large. Directors at Large shall be elected at the Annual Delegate Assembly to serve two (2) year terms. In the event of a vacancy, the President in consultation with the Board of Directors shall appoint the Director at Large position until the next Annual Delegate Assembly at which time an election shall be held to fill the unexpired term. Directors at Large shall serve no more than two (2) consecutive terms.
- f. No member of the Board of Directors shall hold more than one seat on the Board of Directors at any time. Any person appointed or elected to fill an unexpired term of less than one year for Treasurer or Director at Large may be eligible for election to the same position for two additional consecutive terms after completion of the unexpired term. If the unexpired term is more than one year, the person may be eligible for one additional consecutive term.

Section 7. Compensation.

Directors shall not receive compensation for services rendered, but shall be reimbursed for reasonable expenses incurred while carrying out their responsibilities.

Section 8. Removal.

A member of the Board of Directors may be removed from office prior to the end of that member's term when, in the judgment of the Board of Directors or Delegate Assembly, the best interest of the Association would be served. Removal shall require an affirmative vote of two-thirds of the Board of Directors, or two-thirds of the total number of eligible voting Delegates, and shall be determined as if all Directors or eligible voting Delegates were present.

ARTICLE VIII. BOARD OF DIRECTORS MEETINGS.

Section 1. Regular Meetings.

The Board of Directors shall hold meetings from time to time as deemed necessary to carry out its responsibilities to the Member Boards. At a minimum, the Board of Directors shall meet in conjunction with, and at the same place as the Delegate Assembly convenes for its Annual Delegate Assembly.

Section 2. Special Meetings.

The President may convene special meetings of the Board of Directors. The President shall convene special meetings within thirty (30) days of receiving a written request for such meeting from any three members of the Board of Directors.

Section 3. Notice and Agenda.

Notice of the time, day, and place for any regular meeting of the Board of Directors shall be given at least thirty (30) days prior to the meeting. Notice and tentative agenda for special meetings shall be given as soon as practicable. Directors shall be notified either by first class mail, overnight delivery service, facsimile, electronic mail, or hand delivery.

Section 4. Participation.

Unless prohibited by law, the Board of Directors may meet in any regular or special meeting conducted through the use of any means of communication by which all persons participating in the meeting can simultaneously communicate with each other during the meeting. Participation by such means shall constitute presence in person at a meeting.

Section 5. Quorum.

In order to conduct business at any meeting of the Board of Directors, at least a majority of voting members of the Board of Directors must be in attendance. In the absence of a majority, those Directors present shall have the authority to adjourn the meeting by majority vote.

Section 6. Voting.

Members of the Board of Directors shall be the only individuals entitled to propose, debate, vote, and otherwise participate in the decisions and motions at Board of Directors meetings. The act of a majority of Directors present at a meeting at which a quorum is present shall be the act of the Board of Directors, unless an act of greater number is required by law, the Association Articles of Incorporation, or these Bylaws.

Section 7. Executive Session.

The Board of Directors may meet in executive session only for discussion and resolution of personnel matters, legal matters, matters related to Member Board membership in the Association, and matters related directly to the security of the examination programs relevant to Association business.

Section 8. Records.

The Board of Directors shall keep accurate and complete minutes of all meetings, and shall make these minutes available to any Member Board for any proper purposes at any reasonable time.

Section 9. Conflict of Interest.

“Conflict of interest,” as referred to herein, shall include, but not be limited to, any transaction by or with the Association in which a Board of Directors member has a direct or indirect personal interest, or any matter in which a Board of Directors member is unable to exercise impartial judgment or otherwise act in the best interest of the Association.

Any Board of Directors member who believes he or she may have such a conflict of interest shall so notify the Board of Directors prior to deliberation on the matter in question and the Board of Directors shall make the final determination as to whether the Board of Directors member has a conflict of interest in any matter. No member of the Board of Directors shall cast a vote, nor take part in the final deliberation in any matter in which the Board of Directors determines to be a conflict of interest. The minutes of the Board of Directors meeting shall reflect disclosure of any conflict of interest and the recusal of the interested Board of Directors member.

ARTICLE IX. REPRESENTATIVES TO THE INTERNATIONAL COUNCIL FOR VETERINARY ASSESSMENT.

Section 1. Representatives.

There shall be a minimum of four (4) AAVSB Representatives to the International Council for Veterinary Assessment (ICVA) elected at the AAVSB Annual Meeting of the Delegate Assembly either from nominations submitted by the Nominating Committee or nominations from the floor. Upon election by the AAVSB Delegates, AAVSB Representatives to the ICVA shall assume their responsibilities at the first ICVA Board of Directors meeting following the expiration of the term of the ICVA Representative whom they are replacing.

Section 2. Duties.

The Representatives shall attend all meetings of the International Council for Veterinary Assessment and shall report to the Board of Directors following each International Council for Veterinary Assessment subcommittee meeting. The Representatives shall present the consensus opinions of the Association at such meetings and shall not vote in conflict with these Bylaws.

Section 3. Election.

Delegates at the Annual Delegate Assembly shall elect the Representatives at the Annual Delegate Assembly of the Association either from nominations submitted by the Nominating Committee or by nomination from the floor. Each Representative shall assume his or her responsibilities at the close of the Annual Delegate Assembly at which elected and shall serve as specified in these Bylaws or until a successor is elected and qualified.

Section 4. Qualifications.

- a. Three Representatives must, when nominated and elected, be Licensed Veterinarians currently practicing in public or private practice and be either (i) a member of a Member Board, or (ii) have been a member of the AAVSB Board of Directors within the previous year, or (iii) have been a member of the ICVA within the previous year, or (iv) a current Associate Member.
- b. One Representative must, when nominated and elected, be a Public Member and be either (i) a member of a Member Board, or (ii) have been a member of the AAVSB Board of Directors within the previous year, or (iii) have been a member of the ICVA within the previous year, or (iv) a current Associate Member.

Section 5. Terms.

- a. The term of office shall be for a period of three (3) years.
- b. No Representative may serve more than three (3) consecutive terms.

ARTICLE X. COMMITTEES.

Section 1. Nominating Committee.

There shall be three (3) members on the Nominating Committee. Two (2) members shall be elected at the Annual Delegate Assembly of the Association by a plurality of votes, either from nominations submitted by the Nominating Committee or by nominations from the floor. A candidate for the Nominating Committee must be a Delegate or Alternate Delegate, a member of a Member Board, a current Associate Member, or the chairperson of an Association committee at the time of nomination and election. The elected members of the Nominating Committee shall have attended at least one (1) Delegate Assembly meeting prior to nomination.

The term of the elected members are two (2) years. The President shall appoint a third member of the Committee with approval from the Board of Directors whose term will be one (1) year. Nominating Committee members may not serve consecutive terms, but are eligible for reelection consistent with this Article X, Section 1. The President shall name the chair of the Committee with approval from the Board of Directors. In the event of a vacancy, the President in consultation with the Board of Directors shall appoint the Nominating Committee member until the next Annual Delegate Assembly at which time an election shall be held to fulfill the unexpired term.

The Nominating Committee shall review the qualifications of the applicants, verify sponsors and references on all applications submitted, and shall submit to the Member Boards at least thirty (30) days before the Annual Delegate Assembly, a ballot containing candidates for each position on the Board of Directors, the Nominating Committee and the International Council for Veterinary Assessment to be filled. The ballot shall contain the names of all candidates who have been found to be eligible and their applications verified as accurate by the Nomination Committee. In determining the slate of candidates for the Board of Directors, the Nominating Committee shall make every effort to ensure at least a majority of Members at Large are currently members of Member Boards. Persons serving on the Nomination Committee shall be ineligible to be on the ballot or elected to any position within the Association within their elected term.

Section 2. Registry of Approved Continuing Education (RACE) Committee.

There shall be at least five (5) members of the Registry of Approved Continuing Education (RACE) Committee. The President shall appoint with the approval of the Board of Directors and determine the tenure of all members of the RACE Committee taking into consideration the need for diverse representation, expertise and continuity. The RACE Committee shall oversee the development and implementation of the RACE program, which is intended to evaluate and approve providers and programs of continuing education in veterinary medicine.

Section 3. Program for the Assessment of Veterinary Education Equivalence (PAVE) Committee.

There shall be at least seven (7) members on the PAVE Committee. The President shall appoint with the approval from the Board of Directors and determine the tenure of all members of the PAVE Committee taking into consideration the need for diverse representation, expertise and continuity. The composition of the PAVE Committee shall be as follows:

- Four (4) members who are current members of Member Boards, Affiliate Members of AAVSB, or Associate Members,
- One (1) member recommended by the Association of American Veterinary Medical Colleges (AAVMC),
- One (1) member recommended by the American Association of Veterinary Clinicians (AAVC), and
- One (1) at-large member.

The PAVE Committee shall oversee the development and implementation of the PAVE program, which is intended to assess the educational equivalence of graduates of veterinary schools located outside the United States and not otherwise accredited by an accrediting organization.

Section 4. Veterinary Technician National Examination (VTNE) Committee.

There shall be at least twelve (12) members on the Veterinary Technician National Examination (VTNE) Committee. The President shall appoint with the approval from the Board of Directors and determine the tenure of all members of the VTNE Committee taking into consideration the need for diverse representation, expertise and continuity. The composition of the VTNE Committee shall be as follows:

- Four (4) members at large,
- Two (2) members recommended by the Association of Veterinary Technician Educators (AVTE),
- Two (2) members recommended by the National Association for Veterinary Technicians in America (NAVTA),
- Two (2) members recommended by the the Registered Veterinary Technologists and Technicians of Canada (RVTTC), and
- Two (2) members recommended by the AVMA's Committee on Veterinary Technician Education and Activities (CVTEA).

In order to provide diversity and expertise, the members of the VTNE Committee need not be members of Member Boards or Affiliate Members of AAVSB. The VTNE Committee shall be responsible for the development and administration of the Veterinary Technician National Examination (VTNE) and other related tasks as assigned by the Board of Directors.

Section 5. Bylaws and Resolution Committee.

There shall be at least five (5) members on the Bylaws and Resolution Committee, appointed by the President with approval from the Board of Directors. The Bylaws and Resolution Committee shall propose amendments to the Bylaws when it determines that such amendment is necessary, and shall receive and consider proposed amendments to the Bylaws submitted in accordance with these Bylaws. The committee shall receive and consider all resolutions submitted in accordance with Association policies.

Section 6. Conference Committee.

There shall be at least six (6) members of the Conference Committee all appointed by the President with approval from the Board of Directors. The composition of the Conference Committee shall be as follows:

Two (2) Licensed Veterinarians from Member Boards,
Two (2) executive directors of Member Boards, and
Two (2) at-large members.

Members of the committee shall serve for a two (2) year term and can be reappointed by the Board of Directors for an additional two (2) year term. The President will appoint the committee chair with the approval from the Board of Directors. With the assistance of Association staff, the Conference Committee shall prepare a conference budget, site recommendation, a selection of conference speakers, conference agenda including program and social events, and conference evaluation for Board of Directors approval.

Section 7. Finance Committee.

There shall be ~~five (5)~~ six (6) members on the Finance Committee. The President-Elect and Treasurer shall be members of the committee, with the Treasurer as chairperson. The President, upon approval from the Board of Directors, shall appoint the ~~three~~ four (4) remaining members of the committee who shall serve one ~~three-year~~ four-year term with no right of reappointment. The Finance Committee shall advise the Board of Directors on issues related to the use of the Association's assets to assure prudence and integrity of fiscal management and responsiveness to Member Boards' needs. The Finance Committee shall recommend financial policies which provide guidelines for fiscal management, and shall review and revise financial forecast assumptions.

- a. For purposes of continuing staggered terms, the term of the new appointed position in the year of adoption shall be a three-year term. The current members of the committee in the year of adoption shall continue with their current terms. Further, the section (a) of Article X, Section 7 shall be automatically removed from these Bylaws one (1) year after the adoption of this amended Section 7, without further action from the Delegate Assembly.

Section 8. Ad-hoc Committees.

Ad-hoc committees may be established and appointed by the President as needed, with approval from the Board of Directors.

Section 9. Committee Responsibilities to the Board of Directors.

All AAVSB committees, whether referenced in these Bylaws or appointed on an ad-hoc basis shall report to and be responsive to the Board of Directors. With the exception of the Finance Committee, the President shall appoint a non-voting liaison from the Board of Directors to each committee.

Section 10. Committee Meetings.

All AAVSB committees whether referenced in these Bylaws or appointed on an ad-hoc basis may meet in-person or by designated electronic means.

ARTICLE XI. FINANCES.

Section 1. Fiscal Year.

The fiscal year of the Association shall be the calendar year.

Section 2. Books and Reports.

The Association shall keep accurate and complete books and records of accounting, available for inspection by any Member Board at the principal office of the Association for any proper purposes at any reasonable time. The Treasurer shall report on the financial condition of the Association at the Annual Delegate Assembly.

Section 3. Audit.

For each fiscal year, the Board of Directors shall appoint a licensed independent public accountant(s) to provide audited financial statements of the Association. Upon request, the Executive Director shall distribute to each Member Board a copy of the financial statements of the Association and the report of the auditor or auditors for each fiscal year.

Section 4. Contracts.

The Board of Directors may authorize any officer or officers, or Executive Director to enter into any contract or execute and deliver any instrument in the name of or on behalf of the Association.

Section 5. Checks, Drafts, or Orders.

All checks, drafts, or orders for the payment of money, notes, or other evidences of indebtedness in the name of the Association shall be signed by such officer or officers, agent or agents of the Association and in such manner as shall from time to time be authorized by the Board of Directors.

Section 6. Deposits.

All funds of the Association shall be deposited from time to time to the credit of the Association in such bank, trust company, or other depository as the Board of Directors may select.

Section 7. Limitations of Expenditures.

The Association is limited to expending its funds for only those purposes which are recited in Article II of the Bylaws of this Association.

Section 8. Insurance.

At the discretion of the Board of Directors, the Association shall carry appropriate insurance.

Section 9. Revenue.

The Board of Directors shall submit to the Delegate Assembly for approval all proposals for revenue that would affect any monetary obligation of the Member Boards.

ARTICLE XII. INDEMNIFICATION AND QUALIFICATION.

Section 1. Indemnification.

Subject to the limitations of this Article, the Association shall indemnify any person who was or is a party to or is threatened to be made a party to any threatened, pending or contemplated action, suit or proceeding, whether civil, criminal, administrative or investigative (other than an action by or in the right of the Association) by reason of the fact that such person is or was a committee member, including the Board of Directors, or Officer of the Association, against expenses, including attorneys' fees, judgments, fines, and amounts paid in settlement actually and reasonably incurred in connection with such action, suit or proceeding only if such person acted in good faith and in a manner reasonably believed to be in or not opposed to the best interest of the Association and, with respect to any criminal action or proceeding, had no reasonable cause to believe such conduct was unlawful. The termination of any action, suit or proceeding by judgment or settlement, condition or upon a plea of Nolo Contendere or its equivalent shall not, in and of itself, create a presumption that such person did not act in good faith and in a manner reasonably believed to be in or not opposed to the best interests of the Association and, with respect to any criminal action or proceeding, had reasonable cause to believe that such conduct was unlawful.

Section 2. Qualification.

Any indemnification under this Article shall be made by the Association only as authorized in the specific case upon a determination that indemnification is proper in the circumstances because such person has met the applicable standard of conduct set forth in this Article. Such determination shall be made by the Board of Directors consisting of members who are not parties

to such action, suit or proceeding or, if such quorum is not attainable, a quorum of disinterested members.

ARTICLE XIII. AMENDMENTS.

Section 1. Amendment Proposals.

These Bylaws may be amended at any Annual Delegate Assembly. Any Member Board, any committee established in these Bylaws, or the Board of Directors may propose Bylaws amendments. Proposed amendments to the Bylaws shall be in writing and received at the Association office not less than two hundred and ten (210) days prior to the Annual Delegate Assembly. Such amendments shall be forwarded to the Board of Directors within seven days after receipt in the Association office. The Executive Director shall forward proposed amendments to all Member Boards not less than one hundred and twenty (120) days prior to the date of the Annual Delegate Assembly.

Section 2. Ratification.

Proposed amendments received in accordance with this Article shall be presented at the Annual Delegate Assembly and must receive an affirmative vote of two-thirds of the Delegates present and eligible to vote in order to be adopted.

The foregoing are the Bylaws of the American Association of Veterinary State Boards as amended in Louisville, Kentucky, 1996; Nashville, Tennessee, 2002; Kansas City, Missouri, 2005; Minneapolis, Minnesota, 2009; New Orleans, Louisiana, 2011; Seattle, Washington, 2012; St. Petersburg, Florida, 2014; Milwaukee, Wisconsin, 2015; Scottsdale, Arizona, 2016; San Antonio, Texas, 2017.



MEMORANDUM

To: AAVSB Member Boards
From: AAVSB Board of Directors
Date: July 3, 2018
Subject: VCPR Definition and Telehealth Guidelines

In 2017, the AAVSB Regulatory Policy Task Force was charged with creating guidelines to proactively reflect technological advancements occurring in veterinary medicine. Challenges exist to effectively regulate the use of technology due to its evolving nature and rapid development that often outpace the development and adoption of governing laws and rules. Recently, the Task Force completed its work on the *AAVSB Recommended Guidelines for the Appropriate Use of Telehealth Technologies in the Practice of Veterinary Medicine*.

During the 2018 AAVSB Annual Meeting & Conference, Delegates will be asked to vote on the AAVSB Practice Act Model (PAM) to acknowledge the document as a tool that can be used by the AAVSB Member Boards when considering regulation updates or rules. In the PAM, the Regulatory Policy Task Force made significant revisions to the definition of the Veterinary-Client-Patient Relationship (VCPR). Due to the importance of the changes and the supporting recommendations for language that can be promulgated in rules, including reference to the *AAVSB Recommended Guidelines for the Appropriate Use of Telehealth Technologies in the Practice of Veterinary Medicine* in the related commentary in the PAM, Delegates are being asked to vote separately for the VCPR definition.

Below is the original definition of the VCPR in the PAM.

Veterinarian-Client-Patient Relationship (VCPR) exists when the Veterinarian has assumed responsibility for making medical judgments regarding the health of the Animal(s) and the need for medical treatment.

Below is the proposed definition.

Veterinarian-Client-Patient Relationship (VCPR) exists when:

- 1) Both the Veterinarian and Client agree for the Veterinarian to assume responsibility for making medical judgments regarding the health of the Animal(s); and
- 2) The Veterinarian has sufficient knowledge of the Animal(s) to initiate at least a general or preliminary diagnosis of the medical condition of the Animal(s); and
- 3) The practicing Veterinarian is readily available for follow-up in case of adverse reactions or failure of the regimen of therapy.

A confirmative vote for the VCPR definition would support the direction of the language revisions and in no way create an expectation that individual jurisdictions would adopt the language. The AAVSB PAM, including its definitions, is a tool that reflects the most current thinking on professional regulation, has a national perspective, and was developed by the AAVSB consistent with its public protection mission. The AAVSB Board of Directors asks that each Member Board discuss the changes to the VCPR definition prior to the Annual Meeting & Conference and equip your Delegate to discuss and vote.

The AAVSB Board of Directors is very grateful to current members of the AAVSB Regulatory Policy Task Force who spent significant time creating the Telehealth Guidelines and updating the PAM. The current members of the Task Force are:

Lila Miller, DVM (New York) - Chair

Timothy Graham, DVM (Wyoming Board)

Cathy Kirkpatrick (Oklahoma Executive Director)

Joseph May, DVM (Virginia)

Marla McGeorge, DVM, JD (Oregon)

Chris Rohlfig (Missouri Board)

Theresa Stir Esq. (Ohio Executive Director)

Cara Tharp (Arkansas Executive Director)

James Unwin, DVM (Nebraska Board)

Debbie Whitten, BS, LVT (Alabama)

Julia Wilson, DVM (Minnesota Executive Director)

Kenichiro Yagi, BS, RVT, VTS (ECC, SAIM) (NAVTA)

Leslie Knachel (Virginia Executive Director) – AAVSB Board of Directors Liaison

The discussion and voting on VCPR definition and the PAM will take place at the **2018 AAVSB Annual Meeting & Conference being held September 13 – 15, 2018 in Washington, DC.**

AAVSB RECOMMENDED GUIDELINES FOR THE APPROPRIATE USE OF TELEHEALTH TECHNOLOGIES IN THE PRACTICE OF VETERINARY MEDICINE

Introduction

When telehealth is used within the confines of state and provincial regulations, it provides valuable tools to augment the delivery and availability of high quality veterinary care. According to the Center for Connected Health Policy, “Telehealth encompasses a broad variety of technologies and tactics to deliver virtual medical, health, and education services. Telehealth is not a specific service, but a collection of means to enhance care and education delivery.”¹ Advancements in communication and information technology provide opportunities for new approaches to the delivery of veterinary medicine.

The American Association of Veterinary State Boards (AAVSB) charged the AAVSB Regulatory Policy Task Force to draft proactive guidelines that provide an appropriate balance between enabling access to veterinary care while ensuring patient safety. This document provides guidance to AAVSB Member Boards for regulating the use of telehealth technologies in the practice of veterinary medicine. Key components of the document include: definitions, veterinarian-client-patient relationship (VCPR), licensure, evaluation and treatment of the patient, continuity of care, medical records, emergency services, prescribing medication, and telemedicine service requirements.

Veterinary medical boards face complex regulatory challenges and patient and public safety concerns in adapting regulations and standards historically intended for the hands-on provision of veterinary medical care to new delivery models involving telehealth technologies. Challenges include determining when a VCPR is established, assuring confidentiality and privacy of client and patient data, guaranteeing creation and maintenance of appropriate medical records, proper diagnosis and treatment of the patient, and limiting the prescribing and dispensing of certain medications.

These guidelines should be used in conjunction with the AAVSB Practice Act Model and in no way be construed to alter the scope of practice of any veterinarian or veterinary technician or authorize the delivery of veterinary medical services in a setting or in a manner that is not otherwise authorized by law. In fact, these guidelines support a consistent standard of care and scope of practice. Veterinarians and veterinary technicians must review and understand the laws, regulations, and policies of each jurisdiction where they practice.

The veterinarian must employ sound professional judgment to determine whether using telehealth is suitable each time veterinary services are provided and only furnish medical advice or treatment via telemedicine when it is medically appropriate. A veterinarian using telemedicine

¹ The Center for Connected Health Policy (www.cchpca.org)

must take appropriate steps to establish the VCPR, obtain informed consent from the client, and conduct all necessary patient evaluations consistent with currently acceptable standards of care. Some patient presentations are appropriate for the utilization of telemedicine as a component of, or in lieu of, hands-on medical care, while others are not.

Definitions

When used in these guidelines, these words and phrases shall be capitalized and are defined as follows:

- **Animal** means any member of the animal kingdom other than humans, whether living or dead.
- **Client** means a Person who has entered into an agreement with a Veterinarian for the purposes of obtaining veterinary medical services in-person or by any means of communication.
- **Consultation** means when a Veterinarian receives advice or assistance in-person, or by any method of communication, from another veterinarian or other Person whose expertise, in the opinion of the Veterinarian, would benefit a Patient. Under any circumstance, the responsibility for the welfare of the Patient remains with the Veterinarian receiving Consultation.
- **Informed Consent** means the Veterinarian has informed the Client or the Client's authorized representative, in a manner understood by the Client or representative, of the diagnostic and treatment options, risk assessment, and prognosis, and the Client has consented to the recommended treatment.
- **General Advice** means any advice provided by a Veterinarian or Veterinary Technician via any method of communication within or outside of an established VCPR that is given in general terms and is not specific to an individual Animal, group of Animals, diagnosis, or treatment.
- **Jurisdiction** means any commonwealth, state, or territory, including the District of Columbia, of the United States of America, or any province of Canada.
- **Patient** means any Animal or group of Animals receiving veterinary care from a Veterinarian or Veterinary Technician.
- **Person** means any individual, firm, partnership, association, joint venture, cooperative, corporation, governmental body, or any other group, legal entity or combination acting in concert; and whether or not acting as a principal, trustee, fiduciary, receiver, or as any kind of legal or personal representative, or as the successor in interest, assignee, agent, factor, servant, employee, director, officer, or any other representative of such Person.
- **Telehealth** is the overarching term that encompasses all uses of technology geared to remotely deliver health information or education. Telehealth encompasses a broad variety of technologies and tactics to deliver virtual medical, health, and education services. Telehealth is not a specific service, but a collection of tools which allow Veterinarians to enhance care and education delivery. Telehealth encompasses both Telemedicine and General Advice.
- **Telemedicine** is the remote delivery of healthcare services, such as health assessments or consultations, over the telecommunications infrastructure. It allows Veterinarians to evaluate, diagnose and treat patients without the need for an in-person visit.

- **Teletriage** means emergency Animal care, including Animal poison control services, for immediate, potentially life-threatening Animal health situations (e.g., poison exposure mitigation, Animal CPR instructions, other critical lifesaving treatment or advice).
- **Veterinarian** means an individual who is duly licensed to practice Veterinary Medicine under the Jurisdiction’s practice act. When not capitalized, means an individual who is duly licensed to practice Veterinary Medicine in another Jurisdiction.
- **Veterinarian-Client-Patient Relationship (VCPR)** exists when:
 - 1) Both the Veterinarian² and Client agree for the Veterinarian to assume responsibility for making medical judgments regarding the health of the Animal(s); and
 - 2) The Veterinarian has sufficient knowledge³ of the Animal(s) to initiate at least a general or preliminary diagnosis of the medical condition of the Animal(s); and
 - 3) The practicing Veterinarian is readily available for follow-up in case of adverse reactions or failure of the regimen of therapy.
- **Veterinary Technician** means an individual who is duly licensed to practice Veterinary Technology under the Jurisdiction’s practice act.

² AAVSB recommends that each jurisdiction promulgate appropriate regulations clarifying who may be included within the scope of a single VCPR such as a Veterinarian or another Veterinarian within the same practice group with access to medical records, or a veterinarian with whom he/she is consulting.

³ AAVSB recommends that each jurisdiction promulgate appropriate regulations defining how to establish sufficient knowledge, including the following:

- A. A recent examination of the Animal or group of Animals, either physically or by the use of instrumentation and diagnostic equipment through which images and medical records may be transmitted electronically; or
- B. Through medically appropriate and timely visits to the premises at which the Animal or group of Animals are kept.

Guidelines for the Appropriate Use of Telehealth Technologies in Veterinary Medical Practice

Licensure

A Veterinarian or Veterinary Technician must be licensed by, or under the authority of, the Board of Veterinary Medicine in the Jurisdiction where the VCPR is established (location of Patient at time of VCPR establishment)⁴.

Any veterinarian who is licensed in another Jurisdiction, or any Person whose expertise, in the opinion of the Veterinarian with an established VCPR, would benefit an Animal, and who is consulting with the Veterinarian, is exempt from licensure in this Jurisdiction, provided such service is limited to such Consultation.

Evaluation and Treatment of the Patient(s)

The Veterinarian must employ sound professional judgment to determine whether using Telehealth is suitable each time veterinary services are provided and only furnish medical advice or treatment via Telemedicine when it is medically appropriate. A Veterinarian using Telemedicine must take appropriate steps to establish the VCPR, obtain Informed Consent from the Client, and conduct all necessary Patient evaluations consistent with currently acceptable standards of care. Some Patient presentations are appropriate for the utilization of Telemedicine as a component of, or in lieu of, hands-on medical care, while others are not.

The Veterinarian must take appropriate precautions to safe guard the confidentiality of a Client's or Patient's records. Such includes ensuring that technology and physical settings used as part of Telemedicine services are compliant with Jurisdictional or federal requirements.

The Veterinarian must ensure that the Client is aware of the Veterinarian's identity, location and Jurisdiction's license number and licensure status. Evidence documenting Informed Consent for the use of Telemedicine must be obtained and maintained in the medical record.

Continuity of Care/Medical Records

Veterinarians must maintain appropriate medical records⁵ that contain sufficient information for continued care and are compliant with Jurisdictional requirements. Documentation of the Telemedicine encounter should be readily available upon request by the Client.

Emergency Services

Teletriage may be performed by a Veterinarian or Veterinary Technician without establishing a VCPR or obtaining Informed Consent to provide emergency, potentially life-saving Telemedicine services.

⁴ Arguments can also be made that identify the location of practice under these circumstances as occurring in both Jurisdictions; that is where the Patient is located and where the Veterinarian is located.

⁵ See the AAVSB Practice Act Model Article V for suggested language.

Prescribing Medications

Prescribing medications in-person or via Telemedicine requires a VCPR and is at the professional discretion of the Veterinarian. The indication, appropriateness, and safety considerations for each prescription issued in association with Telemedicine services must be evaluated by the Veterinarian in accordance with all Jurisdictional and federal laws⁶ and standards of care.

Telemedicine Service Requirements

A provider of Telemedicine services must ensure that the Client is aware of the Veterinarian's identity, location and Jurisdiction's license number and licensure status, and should provide to Clients a clear mechanism to:

1. Access, supplement and amend Client-provided contact information and health information about the Patient; and
2. Register complaints with the appropriate Board of Veterinary Medicine or other regulatory body.

⁶ The Federal definition of the VCPR must be followed when issuing prescriptions in accordance with the Veterinary Feed Directive (VFD) and Animal Medicinal Drug Use Clarification Act (AMDUCA) of 1994.

VETERINARY MEDICAL BOARD

REVIEW OF THE VETERINARY TECHNICIAN NATIONAL EXAMINATION



OFFICE OF PROFESSIONAL EXAMINATION SERVICES



VETERINARY MEDICAL BOARD

REVIEW OF THE VETERINARY TECHNICIAN NATIONAL EXAMINATION

This report was prepared and written by the
Office of Professional Examination Services
California Department of Consumer Affairs

May 2018

Heidi Lincer, Ph.D., Chief

Kamilah Holloway, M.A., Research Program Specialist II



EXECUTIVE SUMMARY

Licensing boards and bureaus within the California Department of Consumer Affairs (DCA) are required to ensure that examination programs used in the California licensure process comply with psychometric and legal standards. The Veterinary Medical Board (Board) requested that DCA's Office of Professional Examination Services (OPES) complete a comprehensive review of the American Association of Veterinary State Boards (AAVSB) Veterinary Technician National Examination (VTNE) program. The purpose of the review was to evaluate the suitability of the VTNE for continued use in California.

OPES received and reviewed documents provided by the AAVSB. Follow-up email and phone communications were conducted to clarify the procedures and practices used to validate and develop the VTNE. The documents were evaluated to determine whether the following VTNE examination program components met professional guidelines and technical standards: (a) occupational analysis, (b) examination development, (c) passing scores, (d) examination administration, (e) examination scoring and performance, (f) information available to candidates, and (g) examination security. OPES found that the procedures used to establish and support the validity and defensibility of the components listed above meet professional guidelines and technical standards outlined in the *Standards for Educational and Psychological Testing* (2014) (*Standards*) and in California Business and Professions Code section 139.

In December 2017, OPES convened a panel of California-registered veterinary technicians (RVTs) to serve as subject matter experts (SMEs). The SMEs were selected by the Board based on their geographic location, experience, and practice specialty. The SMEs were asked to review the examination content outline for the VTNE based on the AAVSB August 2017 Report of the 2017 Job Analysis of Veterinary Technicians (AAVSB 2017 OA). The SMEs were also asked to compare the VTNE examination outline with the examination outline for the California RVT examination based on the 2016 Occupational Analysis of the California Registered Veterinary Technician Profession performed by OPES (2016 California RVT OA).

The SMEs performed an evaluation of the task and knowledge statements in the 2017 national job analysis of veterinary technicians (VTs) and the 2016 California RVT OA. They concluded that the content measured by the VTNE assesses the general knowledge required for entry-level VT practice in California.

The SMEs were also asked to link the job task and knowledge statements taken from the 2017 national job analysis with the task and knowledge statements that make up the 2016 examination outline for the California RVT profession. This linkage was performed to identify whether there were areas of California RVT practice not measured by the VTNE.

The results of the linkage study indicate that there are areas of California RVT practice not measured by the VTNE. The SMEs provided input to OPES to revise the examination outline for the California RVT examination to address these content areas.

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CHAPTER 1. INTRODUCTION

PURPOSE OF THE COMPREHENSIVE REVIEW

Licensing boards and bureaus within the California Department of Consumer Affairs (DCA) are required to ensure that examination programs used in the California licensure process comply with psychometric and legal standards. The public must be reasonably confident that an individual passing a licensing examination has the requisite knowledge and skills to competently and safely practice in the corresponding profession.

The Veterinary Medical Board (Board) requested that DCA's Office of Professional Examination Services (OPES) complete a comprehensive review of the American Association of Veterinary State Boards (AAVSB) Veterinary Technician National Examination (VTNE) program. The first purpose of the OPES review was to evaluate the suitability of the VTNE for continued use in California. The second purpose of the review was to determine whether the VTNE meets the professional guidelines and technical standards outlined in the *Standards for Educational and Psychological Testing* (2014) (*Standards*¹) and in California Business and Professions (B&P) Code section 139. In addition to the review, OPES was asked to identify whether there are areas of California-registered veterinary technician (RVT) practice not measured by the VTNE.

OPES, in collaboration with the Board, requested documentation from the AAVSB to determine whether the following VTNE examination program components met professional guidelines and technical standards outlined in the *Standards* and in B&P Code section 139: (a) occupational analysis,² (b) examination development, (c) passing scores,³ (d) examination administration, (e) examination scoring and performance, (f) information available to candidates, and (g) examination security procedures.

AAVSB, in consultation with PSI Services LLC (PSI), conducted the occupational analysis (OA) of the veterinary technician (VT) profession for the VTNE. The AAVSB August 2017 Report of the 2017 Job Analysis of Veterinary Technicians (AAVSB 2017 OA) is used in this review.

After completing the 2017 national job analysis, PSI presented the results to the VTNE Committee, who approved the test specifications and relative weighting of the VTNE content areas. The VTNE is administered at PSI test sites.

¹ *Standards* references information taken from: American Educational Research Association, American Psychological Association, and National Council on Measurement in Education. *Standards for Educational and Psychological Testing* (2014). Washington, DC: American Educational Research Association.

² An occupational analysis is also known as a job analysis, practice analysis, or task analysis.

³ A passing score is also known as a pass point or cut score.

CALIFORNIA LAW AND POLICY

Section 139 (a) of the California B&P Code states:

The Legislature finds and declares that occupational analyses and examination validation studies are fundamental components of licensure programs.

It further requires that DCA develop a policy to address the minimum requirements for psychometrically sound examination validation, examination development, and occupational analyses, including standards for the review of state and national examinations.

DCA policy, OPES 12-01, specifies the *Standards* as the most relevant technical and professional standards to be followed to ensure that examinations used for licensure in California are psychometrically sound, job-related, and legally defensible.

FORMAT OF THE REPORT

The chapters of this report provide the relevant standards related to critical psychometric aspects of the VTNE and describe the findings that OPES identified during its review.

CHAPTER 2. OCCUPATIONAL ANALYSIS

STANDARDS

The most relevant standard relating to occupational analyses for licensing examinations is:

Standard 11.13

The content domain to be covered by a credentialing test should be defined clearly and justified in terms of the importance of the content for credential-worthy performance in an occupation or profession. A rationale and evidence should be provided to support the claim that the knowledge or skills being assessed are required for credential-worthy performance in that occupation and are consistent with the purpose for which the credentialing program was instituted. (pp. 181-182)

The comment following Standard 11.13 is also informative:

Comment: Typically, some form of job or practice analysis provides the primary basis for defining the content domain. If the same examination is used in the credentialing of people employed in a variety of settings and specialties, a number of different job settings may need to be analyzed. Although the job analysis techniques may be similar to those used in employment testing, the emphasis for credentialing is limited appropriately to knowledge and skills necessary for effective practice. . . .

In tests used for licensure, knowledge and skills that may be important to success but are not directly related to the purpose of licensure (e.g., protecting the public) should not be included. (p. 182)

California B&P Code section 139 requires that each California licensure board, bureau, commission, and program report annually on the frequency of its occupational analysis and the validation and development of its examinations. DCA Licensure Examination Validation Policy OPES 12-01 states:

Generally, an occupational analysis and examination outline should be updated every five years to be considered current; however, many factors are taken into consideration when determining the need for a shorter interval. For instance, an occupational analysis and examination outline must be updated whenever there are significant changes in a profession's job tasks and/or demands, scope of practice, equipment, technology, required knowledge, skills and abilities, or laws and regulations governing the profession. (p. 4)

FINDINGS

AAVSB commissioned PSI to conduct the OA for the VTNE. The results of the study are documented in the AAVSB 2017 OA.

Occupational Analysis – Methodology and Time Frame

The purpose of the OA was to “provide a detailed study of the job activities of the veterinary technician in an effort to provide a sound basis for the continuing development of the Veterinary Technician National Examination (VTNE)” (AAVSB 2017 OA, p. 1). The methodology used to conduct the OA study was a web-based survey. The survey was developed under the guidance of PSI with the assistance of AAVSB staff, the VTNE Committee, and a Job Analysis Task Force (Task Force) consisting of 11 subject matter experts (SMEs). The Task Force included five VTs, a Doctor of Veterinary Medicine, and other relevant stakeholders. The OA survey was administered to entry-level VTs throughout North America (all 50 states and 6 Canadian provinces).

Finding 1. The occupational analysis study was conducted within a current and legally defensible time frame. The study began in 2016 and was completed in 2017.

Occupational Analysis – Development of Survey Instrument and Sampling Plan

PSI consultants facilitated the survey development, beginning with a review of the previous job analysis that had been conducted in 2012-2013. PSI asked the VTNE Committee and the Task Force to work together on the project, which was conducted in two phases. In the first phase, SMEs reviewed and updated the current VTNE examination outline. “In the second phase, a survey was conducted to identify the absolute and relative salience of each domain, task, and knowledge area to the overall work of the entry-level veterinary technician” (AAVSB 2017 OA, p. 1).

During a two-day face-to-face meeting, the VTNE Committee and the Task Force were charged with reviewing and modifying the draft master task list and reviewing the practice domains, resulting in the development of a draft survey. “This document went through several reviews and revisions including an online review by an additional independent group of subject matter expert veterinary technicians, and eventually led to the development of a final job analysis survey” (AAVSB 2017 OA, p. 2). The Task Force also adopted a unified practitioner definition for the purposes of the survey.

Survey participants were asked to rate each domain, task, and knowledge base on three scales: (1) frequency, (2) importance, and (3) potential harm that could result if a VT was not competent with respect to the domain, task, or knowledge base. The draft survey was pilot tested and consisted of 9 practice domains, 70 tasks, and 49 knowledge areas. The survey also included demographic information and a rating of the level of supervision that the task required.

Finding 2. The methodology used by PSI to develop the survey instrument meets professional guidelines and technical standards.

Sampling Plan

The sampling plan for the study included VTs close to the entry level of practice from all 50 states and from 6 Canadian provinces. AAVSB contacted each of the 40 AAVSB member boards and requested a list of licensees in their jurisdiction. PSI sent survey invitations to each of the licensees compiled by AAVSB. PSI and AAVSB sent additional email invitations on behalf of AAVSB directly to individuals whose jurisdictions did not provide data to AAVSB.

In response to these efforts, a total of 5,776 surveys were returned as complete and usable, resulting in a response rate of 14.92%. Survey respondents from the United States made up a majority of the sample, with respondents from California and Canada appropriately represented.⁴

Finding 3. The intent of the sampling plan was reasonable and meets professional standards. Practicing RVTs in California comprised a sufficient proportion of the final respondent sample.

Occupational Analysis – Survey Results

After administering the survey, PSI collected the data and analyzed the survey results. During a second web-based meeting, the VTNE Committee and the Task Force reconvened to review the survey results. The key findings indicated that the tasks and knowledge represent a complete description of the specific elements of the job of entry-level VTs. In addition, all tasks and knowledge areas were rated above the recommended threshold for inclusion in the new version of the VTNE examination outline (AAVSB 2017 OA, p. 3).

Finding 4. The respondents consisted of practicing VTs from throughout the United States and Canada. A satisfactory percentage of the respondents reported that they had been practicing five years or less, and the majority reported working 40 hours or more as a VT. Of the total respondents, the majority categorized their primary work setting as general veterinary hospital / clinic, with the next most frequent category as referral / emergency / specialty veterinary hospital / clinic.⁵

⁴ Survey demographics from the AAVSB Veterinary Technician Job Analysis 2017.

⁵ Ibid.

Finding 5. OPES facilitated a focus group of SMEs to review the findings of the AAVSB 2017 OA. The focus group reviewed the tasks and knowledge statements included in the survey and the results of the survey, and they compared the results with those of the 2016 California RVT OA. The group concluded that the results from AAVSB 2017 OA were consistent with RVT practice in California.

Occupational Analysis – Development of Test Specifications

PSI calculated the examination weights for each domain directly from the survey data. The domain weights were based on the frequency, importance, and potential for harm ratings. Decision rules were utilized to determine which tasks and knowledge areas to include in the examination outline. The decision rules for task importance incorporated regional subgroup analysis ratings to ensure that tasks included in the examination outline were rated important by all geographic regions. “The structure of the new delineation of practice continues the current structure. Data supported the nine domains in the new delineation which continues the current VTNE test specifications. All domains remained the same but some tasks were added to each domain” (AAVSB 2017 OA, p. 3). The VTNE Committee reviewed the survey results and recommended the new test specifications to the AAVSB Board of Directors.

Finding 6. The linkage between the critical tasks required by entry-level RVTs and the major content areas of the VTNE demonstrates a sufficient level of validity, thereby meeting professional guidelines and technical standards.

CONCLUSIONS

Given the findings, the occupational analysis conducted by AAVSB meets professional guidelines and technical standards. Additionally, the development of the test specifications for the VTNE is based on the results of the OA and meets professional guidelines and technical standards.

CHAPTER 3. EXAMINATION DEVELOPMENT

STANDARDS

Examination development includes many steps within an examination program, from the development of an examination content outline to scoring and analyzing items after the administration of an examination. Several specific activities involved in the examination development process are evaluated in this section. The activities include item writing, linking items to the examination content outline, developing examination forms, and scoring criteria.

The most relevant standards related to licensing examination development are:

Standard 4.7

The procedures used to develop, review, and try out items and to select items from the item pool should be documented. (p. 87)

Standard 4.12

Test developers should document the extent to which the content domain of a test represents the domain defined in the test specifications. (p. 89)

FINDINGS

Item development for the VTNE is performed by PSI with the assistance of the VTNE Committee. The VTNE Committee members and member tenure are determined by the AAVSB President and approved by the Board of Directors, “taking into consideration the need for diverse representation, expertise and continuity” (AAVSB Bylaws, 2017, p. 12). In addition to the VTNE Committee, the AAVSB selects a diverse and representative group of RVT subject matter experts (SMEs).

A psychometrician from PSI trains the item writers. When items are reviewed remotely, SMEs gain access through a link and use an individual login ID and password. Newly written items are subject to an editorial review by PSI. The items are then reviewed by the VTNE Committee and a representative group of SMEs. The SMEs evaluate the items for relevance, clarity, and conformance to the examination specifications. The accuracy of the items is documented by references. Approved items are available for use as unscored pretest items (AAVSB, email communication, 2018).

Finding 7. The criteria used to select SMEs for item and examination development are consistent with professional guidelines and technical standards.

Finding 8. SMEs and VTNE Committee members participating in item and examination development are required to sign confidentiality agreements and are

instructed about examination security, which is consistent with professional guidelines and technical standards.

Examination Development – Linkage to Examination Content Outline

Linkage of items to the examination content outline is performed by providing item writers with specific item writing assignments. The VTNE Committee perform a second review to ensure that items conform to the examination content outline. Verification of the item-content area linkage is performed as a routine part of the item review process for every item. All items go through multiple reviews.

Finding 9. Assignment of an item to a content area is reviewed by a committee as a routine part of the item review process. The steps taken to link the examination items to the appropriate content area are consistent with professional guidelines and technical standards.

Examination Development – Item Field Testing and Calibration

All scored test items have first been field tested as part of the regular examination administrations. The VTNE examination forms consist of 170 four-option multiple-choice items, with 150 scored and 20 pretest (unscored) items.

After pretesting, all items are analyzed using classical item analysis. Based on this analysis, PSI determines whether items can be used as scorable items or returned to the VTNE Committee for review and revision and additional pretest. Items are retired based on SME judgment and AAVSB request.

Finding 10. The procedures used to develop, review, and pretest items, as well as to select and retire items from the item pool, meet professional guidelines and technical standards.

Examination Development – Examination Forms

PSI test developers and psychometricians select successfully pretested items for the scored portion of the VTNE. Items are selected for examination forms in accordance with the examination specifications. Forms are constructed to be comparable in terms of content and difficulty, and each form is reviewed by the VTNE Committee. Items are replaced as needed, and comparability is confirmed through pre-equating.

PSI uses classical item analysis to calculate descriptive statistics for each examination item, in addition to overall examination performance. Each scored item of the examination is evaluated to ensure that it performs with appropriate statistical characteristics. Examination forms are evaluated for reliability and decision consistency.

Finding 11. The criteria applied to create new examination forms meet professional guidelines and technical standards.

CONCLUSIONS

Given the findings, the examination development procedures conducted by PSI meet professional guidelines and technical standards.

CHAPTER 4. PASSING SCORES

STANDARDS

The passing score of an examination is the score that represents the level of performance that divides those candidates for licensure who are minimally competent from those who are not competent.

The standards most relevant to licensing examination passing scores, cut points, or cut scores are:

Standard 5.21

When proposed score interpretations involve one or more cut scores, the rationale and procedures used for establishing cut scores should be documented clearly. (p. 107)

Standard 11.16

The level of performance required for passing a credentialing test should depend on the knowledge and skills necessary for credential-worthy performance in the occupation or profession and should not be adjusted to control the number or proportion of persons passing the test. (p. 182)

The supporting commentary on passing or cut scores in Chapter 5 of the *Standards*, “Scores, Scales, Norms, Score Linking, and Cut Scores,” states that the standard-setting process used should be clearly documented and defensible. The qualifications and the process of selection of the judges involved should be part of the documentation. A sufficiently large and representative group of judges should be involved, and care must be taken to ensure that judges understand the process and procedures they are to follow. (p.101)

In addition, the supporting commentary in Chapter 11 of the *Standards*, “Workplace Testing and Credentialing,” states that the focus of tests used in credentialing is on “the standards of competence needed for effective performance (e.g., in licensure this refers to safe and effective performance in practice)” (p. 175). It further states, “Standards must be high enough to ensure that the public, employers, and government agencies are well served, but not so high as to be unreasonably limiting” (p. 176).

FINDINGS

Passing Scores – Process, Use of Subject Matter Experts, and Methodology

The process of establishing passing scores for licensure exams relies upon the expertise and judgment of SMEs.

AAVSB uses the probability-based modified Angoff method of standard setting as the basis for establishing the passing score for the VTNE. PSI's Chief Psychometrician and a test development specialist facilitated the most recent standard setting workshop. The participants included 10 SMEs: 7 current members of the VTNE Committee, 2 former members of the VTNE who participated in the Job Analysis Task Force, and 1 additional SME. "The committee members and SME who participated were veterinary technician practitioners and educators, veterinarian practitioners and educators in veterinary technology programs, including AAVSB member board members and representatives from the allied organizations" (AAVSB email communication, 2018).

In the workshop, the SMEs were asked to identify the attributes of the minimally competent practitioner (MCP) by using a discussion and brainstorming process. The SMEs were also asked to review the content outline and identify potentially problematic tasks for the MCP. Once the definition of the MCP was developed, the SMEs were asked, "Out of 100 MCP examinees, how many will correctly answer the item?" Ratings lower than 25% and higher than 95% were discouraged. The SMEs were asked to first provide their rating for an item; they were then provided with the item statistics or the correct key to the item. The SMEs could adjust their ratings and were encouraged to discuss their ratings when necessary.

PSI psychometricians calculated the results of the passing score study and presented the findings during a webinar call with the VTNE Committee members. The VTNE Committee members discussed the results, and PSI provided statistical information. The final passing score was unanimously agreed upon, with a final recommendation presented to the AAVSB Board of Directors.

Finding 12. The number of SMEs (10) used in the passing score studies meets professional guidelines and technical standards.

Finding 13. The VTNE incorporates the minimum competency standards that the MCP should have as objective criteria by which candidate performance can be evaluated. This practice meets professional guidelines and technical standards.

Finding 14. The training of the SMEs and the application of the probability-based modified Angoff method is consistent with professional guidelines and technical standards.

CONCLUSIONS

Given the findings, the passing score studies conducted by PSI demonstrate a sufficient degree of validity, thereby meeting professional guidelines and technical standards.

CHAPTER 5. EXAMINATION ADMINISTRATION

STANDARDS

The standards most relevant to licensing examination administration are:

Standard 6.1

Test administrators should follow carefully the standardized procedures for administration and scoring specified by the test developer and any instructions from the test user. (p. 114)

Standard 6.2

When formal procedures have been established for requesting and receiving accommodations, test takers should be informed of these procedures in advance of testing. (p. 115)

Standard 6.6

Reasonable efforts should be made to assure the integrity of test scores by eliminating opportunities for test takers to attain scores by fraudulent or deceptive means. (p. 116)

Standard 8.2

Test takers should be provided in advance with as much information about the test, the testing process, the intended test use, test scoring criteria, testing policy, availability of accommodations, and confidentiality protection as is consistent with obtaining valid responses and making appropriate interpretations of test scores. (p. 134)

FINDINGS

The VTNE is administered three times a year via computer at over 300 PSI testing centers throughout the United States and Canada. A French translation is also available. Examination administration is accompanied by scripted instructions and protocols to ensure standardized administration of the tests. AAVSB provides a wide variety of information concerning the VTNE to candidates and prospective candidates through its website at www.aavsb.org/vtne/.

Examination Administration – Test Centers

All test centers where the VTNE is administered are run by Test Center Administrators (TCAs) who must complete a comprehensive training program. TCAs are trained by a site Lead TCA and receive a copy of the TCA Manual. Refresher training is completed by either the test site Lead or by a traveling Lead TCA trainer. Biannual training for all TCA staff is also mandatory.

The TCA Manual includes detailed procedures for arriving at the test center, greeting examination candidates, checking in candidates, walking candidates into the testing room, monitoring candidates during testing, checking out candidates, and shutting down the testing site after testing.

Finding 15. PSI provides candidates access to test centers across the United States and Canada with trained proctors and controlled testing conditions.

Examination Administration – Candidate Registration

AAVSB has a detailed registration process that can be found on its website at www.aavsb.org/vtne-overview. Through this website, candidates can easily navigate through the examination registration process. Candidates can verify eligibility to take the test, apply online, check the status of their application, and schedule their test date during the dates when the examination administration is available. The *VTNE Candidate Information Handbook*, which can be found on the AAVSB website, also provides detailed information on registration and examination administration.

Finding 16. The AAVSB registration process is straightforward. The information available to candidates is detailed and thorough, clearly stating AAVSB and PSI policies where necessary. The candidate registration process appears to meet professional guidelines and technical standards.

Examination Administration – Accommodations and Arrangements

Candidates must submit requests for accommodations to AAVSB before the selected examination registration window closes. Candidates must select a box indicating that they are requesting accommodations on their online registration form. The AAVSB Board of Directors reviews and approves any necessary accommodations under the Americans with Disabilities Act. Candidates requesting accommodations must complete the *Veterinary Technician National Examination Application for Special Accommodations* and mail it directly to AAVSB. The online application and the application for special accommodations are matched and processed together by AAVSB.

Finding 17. The examination accommodations procedure appears to meet professional guidelines and technical standards.

Examination Administration – Examination Security

PSI, through its internal examination administration and security protocols, provides a robust framework of test site and examination security policies and procedures (Test Center Operations Exam Administration Manual, 2016). In addition, the AAVSB VTNE *Candidate Information Handbook* describes what constitutes improper acts and unethical conduct on the part of candidates and the consequences of such actions.

Finding 18. The examination security protocols pertaining to examination administration appear to meet professional guidelines and technical standards.

CONCLUSIONS

Given the findings, the examination administration protocols put in place by AAVSB and PSI appear to meet professional guidelines and technical standards.

CHAPTER 6. EXAMINATION SCORING AND PERFORMANCE

STANDARDS

The most relevant standards relating to the scoring and performance of licensing examinations are:

Standard 2.3

For each total score, subscore, or combination of scores that is to be interpreted, estimates of relevant indices of reliability/precision should be reported. (p. 43)

Standard 4.10

When a test developer evaluates the psychometric properties of items, the model used for that purpose (e.g., classical test theory, item response theory, or another model) should be documented. The sample used for estimating item properties should be described and should be of adequate size and diversity for the procedure. The process by which items are screened and the data used for screening, such as item difficulty, item discrimination, or differential item functioning (DIF) for major examinee groups, should also be documented. When model-based methods (e.g., IRT) are used to estimate item parameters in test development, the item response model, estimation procedures, and evidence of model fit should be documented. (pp. 88-89)

FINDINGS

Examination Performance – Scoring of the VTNE

The VTNE consists of multiple-choice items that are scored as either correct or incorrect. Candidate performance is scored by computer, and raw scores are converted to scaled scores. “After equating procedures are completed, raw scores are mathematically converted to scaled scores that can range from 200 to 800 with a passing scaled score of 425. Scaled scores are equivalent for all administrations so that the same standard is maintained from administration to administration. All jurisdictions accept a scaled passing score of 425” (AAVSB, *Candidate Information Handbook*, 2017, p. 14).

The passing score for the base examination form established by the AAVSB standard setting study is used to statistically pre-equate all future examination forms until the next standard setting study is conducted.

Finding 19. Scoring of the VTNE adheres to professional guidelines and technical standards.

Finding 20. Descriptive test statistics are calculated (e.g., mean, standard deviation, standard error of measurement, test reliability, and decision consistency reliability about the cut score). The resulting statistics indicate adequate performance for licensure examinations.

Finding 21. The procedure used to ensure examination forms are equated (equivalent) is appropriate based on the examination item types, examination form length, and candidate sample sizes.

CONCLUSIONS

The steps taken by PSI to score the VTNE provide a fair and objective evaluation of candidate performance. The steps taken by PSI to evaluate examination performance are valid and legally defensible, meeting professional guidelines and technical standards.

CHAPTER 7. INFORMATION AVAILABLE TO CANDIDATES

STANDARDS

The most relevant standards relating to the information communicated to licensing examination candidates by a test developer are:

Standard 6.5

Test takers should be provided appropriate instructions, practice, and other support necessary to reduce construct-irrelevant variance. (p. 116)

Standard 8.1

Information about test content and purposes that is available to any test taker prior to testing should be available to all test takers. Shared information should be available free of charge and in accessible formats. (p. 133)

Standard 8.2

Test takers should be provided in advance with as much information about the test, the testing process, the intended test use, test scoring criteria, testing policy, availability of accommodations, and confidentiality protection as is consistent with obtaining valid responses and making appropriate interpretations of test scores. (p. 134)

FINDINGS

The AAVSB website at www.aavsb.org/vtne-overview is a rich source of information regarding the policies and procedures of the VTNE. Candidates must set up a “myAAVSB account” to access their personal information through the website. Candidates can find material on all necessary steps related to the examination process by selecting from the following links:

- Verify Your Eligibility
- Submit Your Online Application
- Check Your Application Status
- Schedule Your Exam
- Study for the VTNE
- Withdraw Your Application
- Get Your Score Report
- Retake the VTNE
- Get Your Credential

In the “Study for the VTNE” link, AAVSB offers practice tests for purchase that are designed to assess candidates’ strengths and weaknesses in each of the nine domain

areas of the VTNE. Candidates who take the practice test are provided with diagnostic information by practice domain to assist in planning and preparing for the actual VTNE (AAVSB website, 2017).

In addition, AAVSB provides a customer service phone number and a helpful email form that candidates can use to submit questions.

Finding 22. The AAVSB website provides extensive information to candidates regarding all aspects of the examination and testing process.

CONCLUSIONS

Given the findings, the information provided to candidates about the VTNE program is comprehensive and meets professional guidelines.

CHAPTER 8. EXAMINATION SECURITY

STANDARDS

The most relevant standards relating to the examination security of licensing examinations are:

Standard 6.6

Reasonable efforts should be made to ensure the integrity of test scores by eliminating opportunities for test takers to attain scores by fraudulent or deceptive means. (p. 116)

Standard 6.7

Test users have the responsibility of protecting the security of test materials at all times. (p. 117)

FINDINGS

PSI provides a robust framework of test site and examination security policies and procedures through its internal examination administration and security protocols. In addition, the AAVSB website explains what constitutes improper and unethical conduct on the part of candidates and the consequences of such actions.

Finding 23. The Test Center Operations Exam Administration Manual addresses the following areas regarding security:

- Candidate identification verification procedures
- Test center proctoring policy
- Secure test center configuration and monitoring
- Maintaining security of test content
- Prevention policies enforced at test centers

Finding 24. PSI requires candidates to provide current and valid government-issued identification to sit for the examination. The identification must match registration forms and include a photograph and signature. Before testing, candidates must provide a digital thumbprint. Candidates must verify their thumbprint when entering and exiting the testing room. Candidates are prohibited from bringing any personal belongings into the testing rooms and TCAs verify that their pockets are empty. Candidates are videotaped during the entire testing process. TCAs monitor the video cameras and physically monitor the testing room every 5-7 minutes.

CONCLUSIONS

Given the findings, the policies and procedures outlined in the Test Center Operations Exam Administration Manual and the TCA Training Instructions meet professional guidelines and technical standards.

CHAPTER 9. COMPARISON OF THE VTNE AND THE CALIFORNIA RVT EXAMINATION OUTLINE

UTILIZATION OF EXPERTS

OPES convened a meeting on December 19-20, 2017 to critically evaluate the task and knowledge statements from the AAVSB 2017 OA and compare them with the task and knowledge statements of the 2016 California RVT OA. The Board, with direction from OPES, recruited 10 RVT SMEs to participate in the meeting. The SMEs completed security agreements and personal data forms documenting demographic information. The forms are on file with OPES.

The SMEs represented both northern and southern California. Four of the SMEs had been licensed for 0-5 years, three for 6-10 years, two for 11-20 years, and one for more than 20 years. All SMEs worked as RVTs in various settings.

An orientation provided by OPES stated the purpose of the meeting, the role of the SMEs, and the project background leading to the meeting. Once the SMEs understood the purpose of the meeting, they independently reviewed the task and knowledge statements from the AAVSB 2017 OA and compared this content with the task and knowledge statements contained in the 2016 California RVT OA. This review was conducted to identify the extent to which the content of the task and knowledge statements used as the basis for the VTNE reflected general RVT practice in California.

After the SMEs completed this review, OPES asked the SMEs to identify the tasks and knowledge in the 2016 California RVT OA that were most relevant to California-specific VT practice. The SMEs then evaluated the extent to which the content of the VTNE related to the California-specific tasks and knowledge measured by the existing (2012) examination outline for the California RVT examination.

The content categories for the VTNE and the content areas for the 2016 California RVT OA examination outline are provided in Tables 1 and 2.

TABLE 1 – CONTENT CATEGORIES OF THE VTNE

Practice Domains	Percentage of Examination
Domain 1. Pharmacy and Pharmacology	12%
Domain 2. Surgical Nursing	11%
Domain 3. Dentistry	8%
Domain 4. Laboratory Procedures	12%
Domain 5. Animal Care and Nursing	20%
Domain 6. Diagnostic Imaging	7%
Domain 7. Anesthesia	15%
Domain 8. Emergency Medicine / Critical Care	8%
Domain 9. Pain Management Analgesia	7%
Total	100%

TABLE 2 – CONTENT AREAS OF THE CALIFORNIA RVT EXAMINATION OUTLINE

Content Area	Content Area Description	Percent Weight
1. Patient Examination	This content area addresses the candidate's ability to obtain patient signalment and history (e.g., husbandry, medications, clinical signs) and discuss the patient with the owner; observe patient (e.g., demeanor, behavior, condition) and examine patient (e.g., oral, vitals, skin) to establish/update patient status.	14%
2. Emergency and Critical Care	This content area addresses the candidates' ability to triage patients; initiate emergency treatment (e.g., oxygen therapy, hemorrhage control, intravenous fluids, monitor vitals, CPR) in order to stabilize patient; perform applicable diagnostics; calculate and administer medications as directed.	10%
3. Diagnostic Imaging	This content area addresses the candidate's ability to prepare and position patient for diagnostic imaging (e.g., radiography, ultrasonography) in a safe manner to maximize the quality of results; maintain images, imaging equipment, and personal protective equipment (PPE).	6%
4. Laboratory and Diagnostic Procedures	This content area addresses the candidate's ability to collect, prepare, and determine diagnostic samples (e.g., cytology, urinalysis, microbiology, hematology, parasitology) for veterinarian review; obtain electrocardiogram and blood pressure.	8%
5. Anesthesia and Surgical Assistance	This content area addresses the candidate's ability to prepare patient (e.g., position, shave, scrub) and surgical area(s) for anesthetic procedures (e.g., dosage calculation, surgical equipment, aseptic environment, emergency supplies); administer and induce anesthetics/sedation/medication; monitor patient through all phases of anesthesia; maintain surgical suite and equipment. This section also addresses the candidate's ability to assist with surgical procedures (e.g., scrub-in, suture) in adherence with sterility protocol; provide post-operative care (e.g., bandage, extubate) to optimize recovery.	19%
6. Animal Dentistry	This content area addresses the candidate's ability to perform dental care (e.g., charting, radiography, prophylaxis, extractions, dosage calculations/administration); maintain dental instruments and equipment.	6%

Content Area	Content Area Description	Percent Weight
7. Animal Nursing	This content area addresses the candidate's ability to restrain and prepare patient for diagnostics (e.g., ocular, orthopedic, blood pressure) and therapeutic procedures (e.g., fluid and blood products, bandages, medication, medical grooming); observe patient behavior and/or recognize physical abnormalities; administer euthanasia, dispose of biohazardous and infectious materials in adherence with State, local, and federal regulations; place permanent identification products.	22%
8. Pharmacology	This content area addresses the candidate's ability to calculate dosages; administer medications, fluids, and vaccines by various routes; store and maintain medication and controlled substances; prepare medication for dispensing; assess patient for adverse reaction to medication.	8%
9. Owner / Agent Communication	This content area addresses the candidate's ability to educate owner/agents regarding patient care (e.g., dental, grooming, vaccines, preventive care, medications) and husbandry (e.g., nutrition, reproduction, environmental condition, behavior and training) for various species and breeds; conditions and abnormalities that require management or urgent care; common contagious and zoonotic diseases.	7%
Total		100%

FINDINGS

Finding 25. The SMEs evaluated the VTNE content outline against the California-specific tasks and knowledge in the 2016 California RVT OA and against the existing California RVT examination outline. The SMEs concluded that the VTNE does not assess all California-specific laws, regulations, and practice related to RVT practice.

CONCLUSIONS

Given the findings, the content of the VTNE, which is based on the AAVSB 2017 OA, is consistent with general areas of entry-level California RVT practice. The VTNE does not measure entry-level practice related to California-specific laws, rules, regulations, and practice. The SMEs recommended that a California supplemental examination continue to be required for entry-level licensure in California, in addition to the VTNE.

To address California-specific areas of RVT practice not measured by the VTNE, the SMEs provided input to OPES to revise the California RVT examination outline. The SMEs evaluated the California-specific tasks and knowledge in the proposed California RVT examination outline, reviewed the content areas and weights in the existing California RVT examination outline, and confirmed the tasks and knowledge to be included in the final California RVT examination outline.

The 2012 California RVT examination outline consists of content areas and associated codes, regulations, and safety guide references. The 2018 California RVT examination outline includes tasks and associated knowledge statements that provide a more complete description of the examination content. The new California RVT examination outline better meets the requirement that the content domains of a credentialing test should be defined thoroughly and explicitly (*Standards*, Standard 11.2, p. 178).

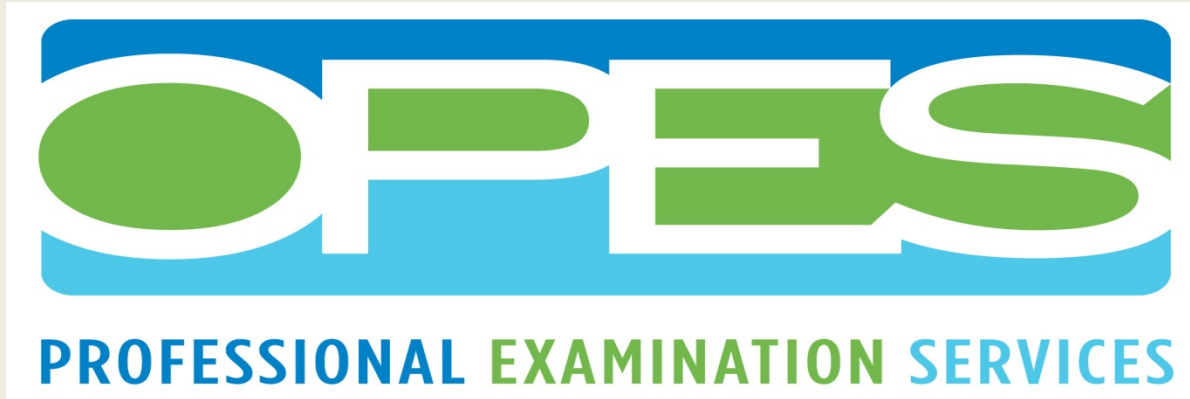
CHAPTER 10. CONCLUSIONS

COMPREHENSIVE REVIEW OF THE AAVSB VTNE PROGRAM

OPES completed a comprehensive analysis and evaluation of the documents provided by AAVSB. The procedures used to establish and support the validity and defensibility of the VTNE (e.g., occupational analysis, examination development, passing scores, and examination security) were found to meet professional guidelines and technical standards outlined in the *Standards* and in Business and Professions Code section 139.

Given the findings regarding the VTNE, OPES supports the Veterinary Medical Board's continued use of the VTNE for licensure in California. In addition, OPES recommends a supplemental examination to measure California-specific laws, regulations, and practice.

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The Veterinary Law Examination and the California State Board Exam: Comparison Study

Kamilah Holloway, M.A.



Comparison Study Presentation Agenda

1. California Veterinarian Licensure Program Protocol
2. Occupational Analysis
3. The California State Board Veterinarian Examination Content Outline
4. VLE/CBS Comparison Study Process
5. Comparison Study Outcomes
 - a. Options/OPES recommendation

OPES Mission

“OPES protects the interests of consumers by supporting the Department of Consumer Affairs and its regulatory entities in their commitment to establish and maintain licensure examination programs that are fair, valid, and legally defensible.”

Veterinarians: Examination Protocol

CCR 2014 and BPC 4848:

- Must pass North American Veterinary Licensing Exam (NAVLE)
- California State Board Examination (CSB)
- Veterinary Law Examination (VLE)

Office of Professional Examination Services – What is our role?

- OPES is in contract with VMB to develop the CSB
- The content of the CSB was determined by conducting an Occupational Analysis of the Professions wherein the following are delineated:
 - Critical job Tasks
 - Critical Knowledge needed to perform the Tasks
 - Required upon entry

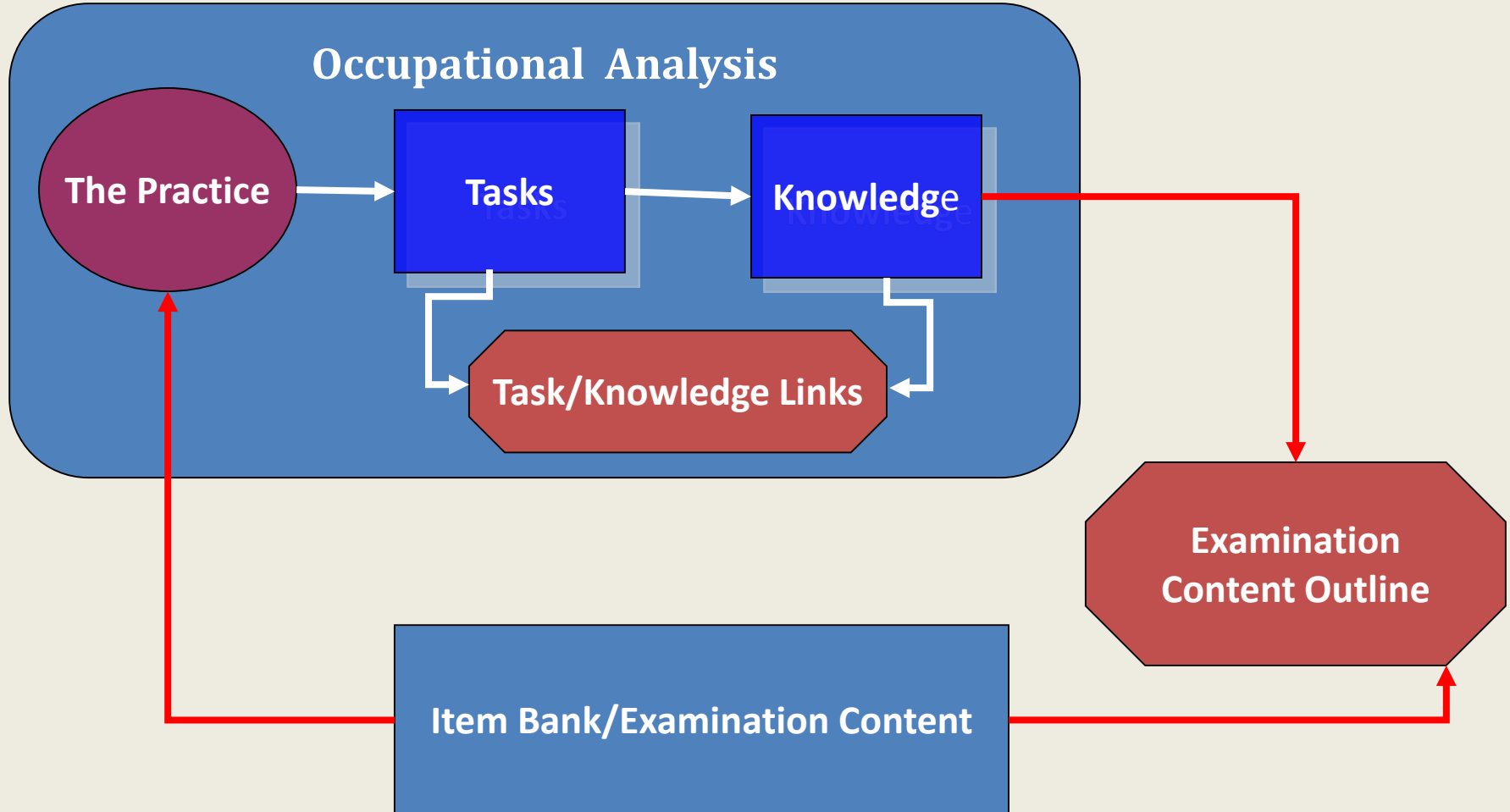
Why are Occupational Analyses Critical in Examination Development?

- Both legislation and professional testing standards require that examinations are job-related
 - Content domain of the licensing examination “should be defined clearly and justified in terms of the importance of the content for credential-worthy performance” (*Standard 14.14*)
- Occupational analysis:
 - Establishes job-relatedness of examinations
 - Forms the basis for legal defensibility of an examination

Occupational Analysis Process

1. Perform background research
2. Conduct interviews with Subject Matter Experts (SMEs)
3. Identify, review, and finalize Task and Knowledge statements with SMEs
4. Develop occupational analysis survey
5. Analyze data collected from survey
6. Review survey results with SMEs
7. Create Examination Content Outline

Occupational Analysis and Examination Development Process Diagram



Veterinarians: CSB Examination Content Outline



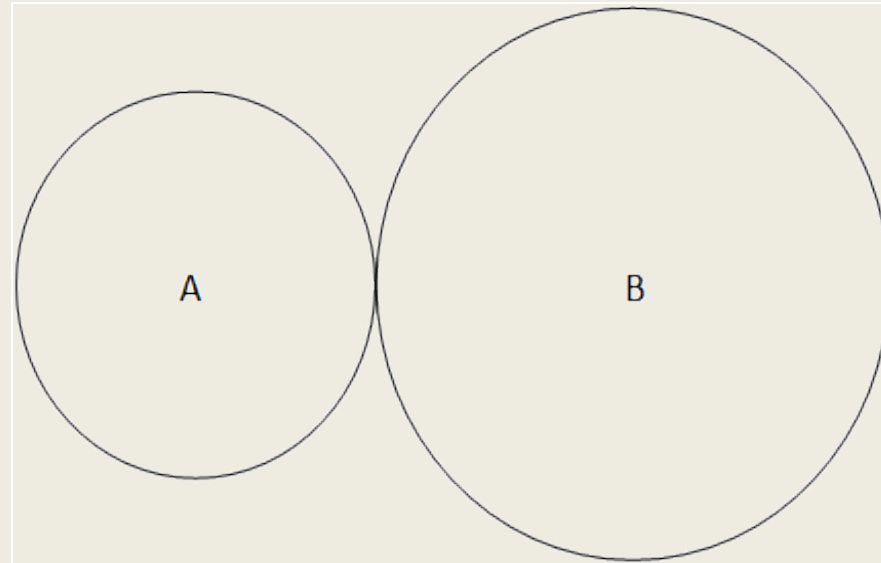
<u>Content Domain</u>	<u>Weight</u>
I. History	12%
II. Examination of Patient and Environment	21%
III. Assessment	6%
IV. Diagnostic Plan	2%
V. Diagnostic Procedures	16%
VI. Treatment Plan	12%
VII. Treatment	12%
VIII. Preventative Care	5%
IX. Professional Responsibilities	14%

Veterinarians: CSB Examination Content Outline

IX. PROFESSIONAL RESPONSIBILITIES (14%) –

Fulfill California and federal laws and regulations, upholding standards of veterinary practice, reportable diseases, animal movement and disaster response.

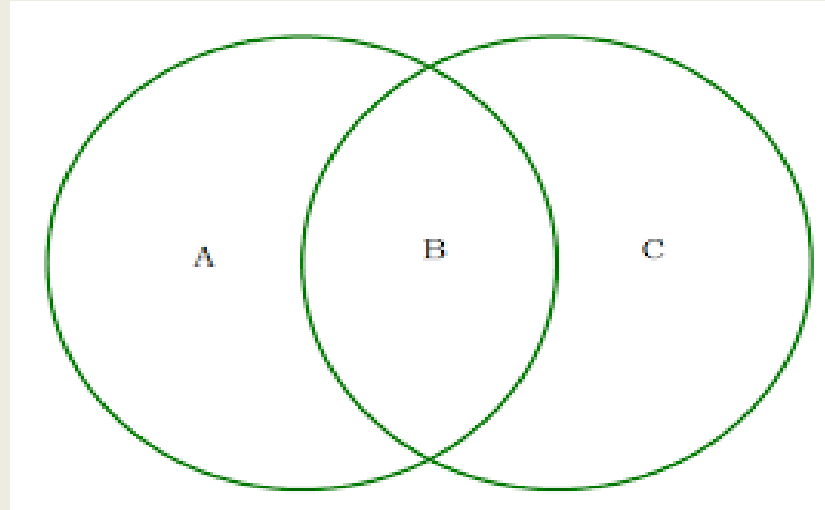
Examination Coverage



A = VLE

B = CSB Examination

Examination Coverage



A = VLE

B = Overlapping Concepts

C = CSB Examination

Veterinarians: Law Examination Review



Comparison Study

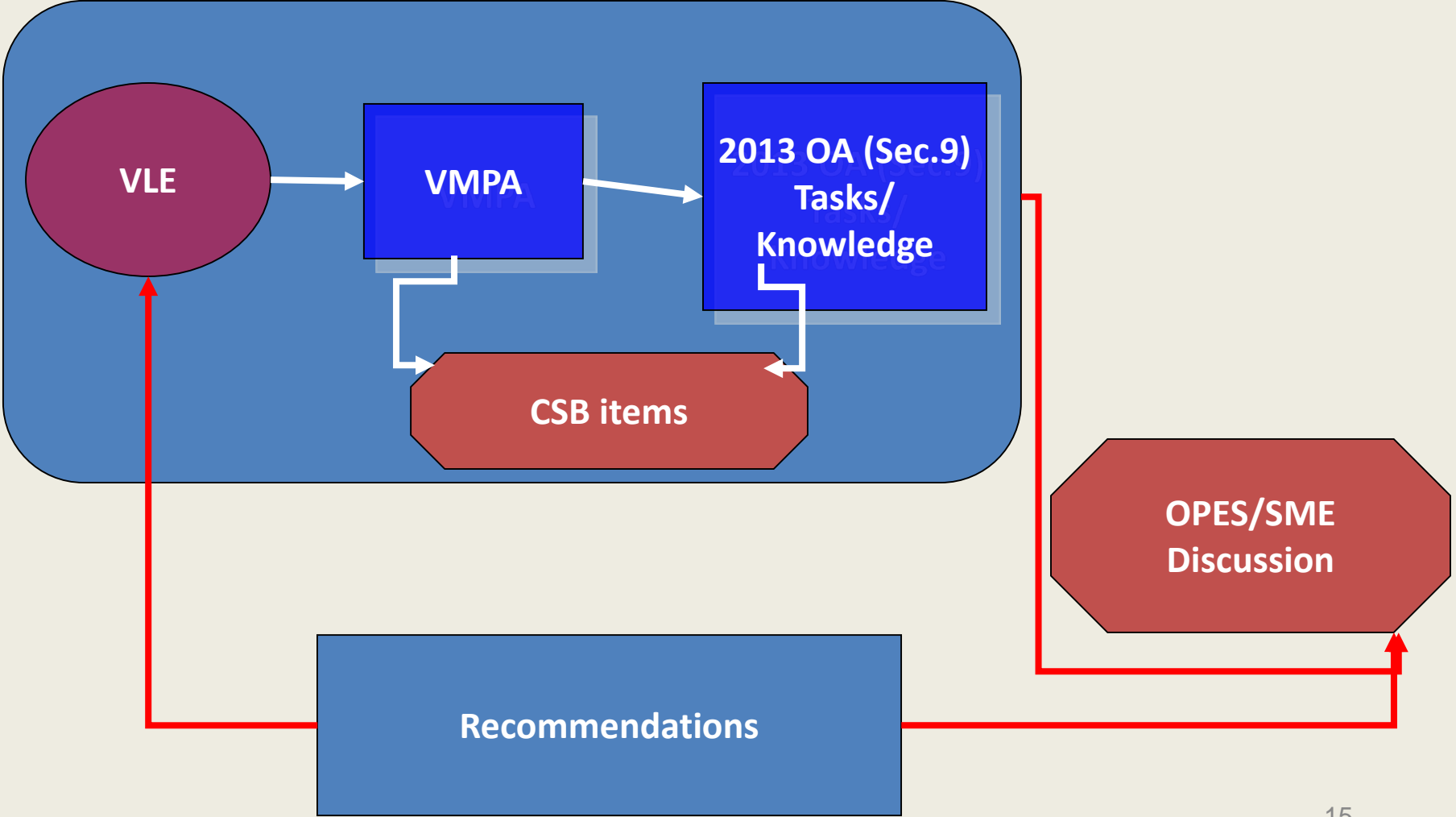
To determine overlap between the VLE and the CSB examination:

- The SMEs reviewed the VLE items.
- The SMEs reviewed the 2016 California Veterinary Medicine Practice Act (VMMPA) and established the link between VLE items and VMMPA laws and regulations.

Veterinarians: Law Examination Review (cont'd)

- The SMEs reviewed the Professional Responsibilities content area of the CSB examination content outline.

Comparison Study Process Diagram:



Comparison Study

Discussion

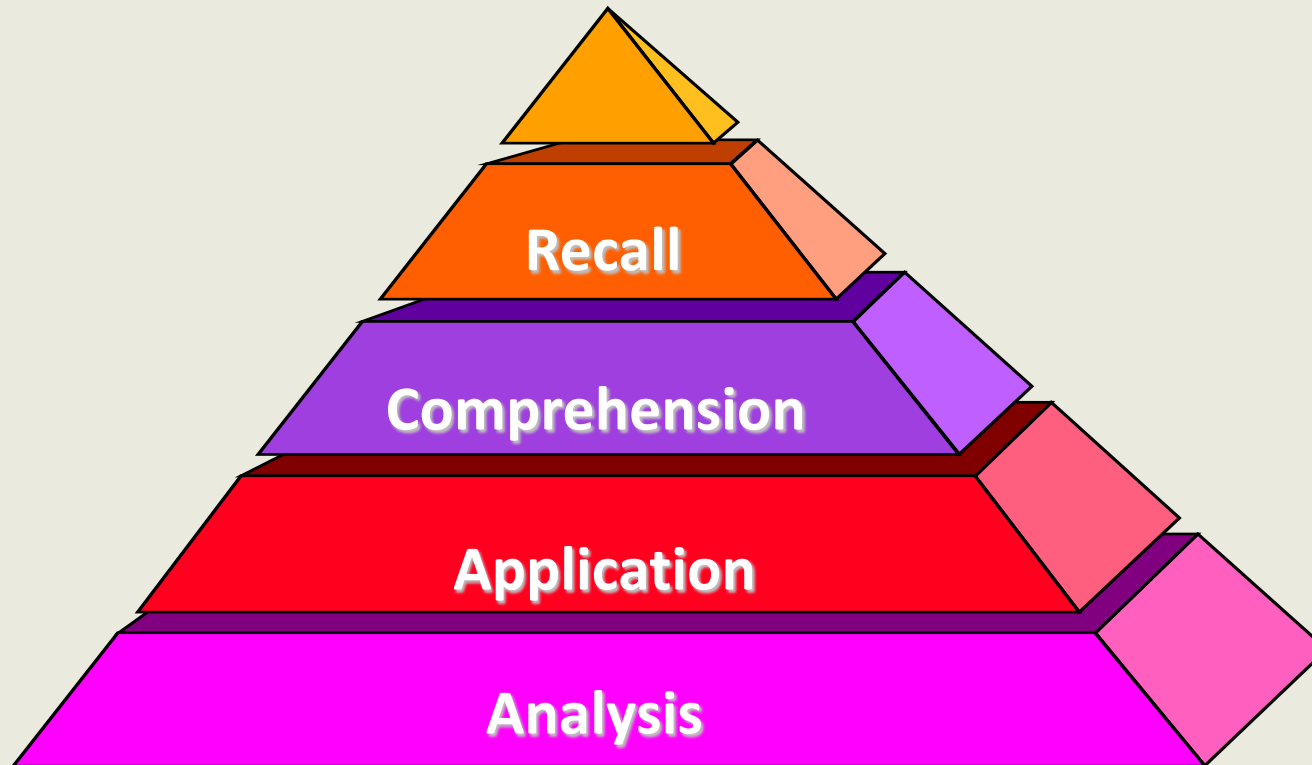
- Are the questions on the CSB examination and VLE assessing identical knowledge concepts?
- Is the weight of the Professional Responsibilities section of the CSB adequate to cover what the VLE assesses?
- Current weight 14% of the 100 item CSB examination, meaning there are 14 questions
- The VLE is 32 questions but many of those questions were determined to address duplicate codes

VLE vs CSB

Examination Question Level

- VLE:
 - Examinees are presented with recall/definition based questions
- CSB:
 - Examinees are presented with mainstream scenarios that require action
 - Qualified Examinees “comprehend” the knowledge concept enough to “apply” and/or “perform an analysis of information given in the scenario
 - Qualified test takers can then select the required action out of provided options

Examination Items: Levels of Processing Pyramid



Comparison Study- Final Steps

- OPES and SMEs worked together to create and finalize a table documenting examination overlap
- OPES and SMEs worked together to finalize options and recommendations to the Board
- OPES prepared a memo for the Board (12/2016) explaining the outcome of the study and providing options for examination protocol moving forward

Veterinarians: Law Examination Review



Examination Item Development

- In addition to the steps taken to determine overlap between the VLE and the CSB examination:
 - OPES worked with the SMEs to write new VLE items and to create two new VLE forms in accordance with the identified OA and VMPPA linkage.

Comparison Study Outcome: Options

1. Continue to administer the current form of the VLE.
2. Continue to administer the VLE using new examination forms yearly to eliminate overexposure of examination materials.

Comparison Study Outcome: Options (Cont'd):

3. Initiate regulatory changes to discontinue administration of the VLE for all candidates for licensure who have completed the national exam, the CSB examination, and a Board-approved veterinary training program.

Comparison Study Outcome: Options (Cont'd):

Option 3 (continued):

- a) Only successful completion of the national examination and CSB examination would be required to obtain veterinarian licensure.
- b) The VLE would continue to be administered to candidates applying for licensure through reciprocity.
- c) The VLE will contain new examination items created yearly for administration to reciprocity-based candidates to prevent overexposure of examination materials.

Veterinary Medical Board

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MEMORANDUM

DATE	August 2018
TO	Veterinary Medical Board
FROM	Ethan Mathes. Operations Manager
SUBJECT	Administrative/Budget Report

Expenditure Report and Fund Condition Status

The most current Expenditure Report (through May) is attached.

Budget Activities

Budget Change Proposal(s): The Department of Finance approved the Veterinary Medical Board's (Board) mid-year augmentation request to increase the Board's Attorney General appropriation from \$560,000 to \$932,000 to reflect ongoing higher expenditures for this line item.

In order to implement Senate Bill [1480](#) (mandating 20% yearly veterinary premises inspections), the Board will request additional spending authority in the Fall of 2018 for additional staff and premises inspectors via a Legislative Budget Change Proposal.

FI\$Cal: The State's new FI\$Cal system continues to be a challenge to quickly and effectively monitor the Board's expenditures and revenues. Staff will continue to work with the Department's Budget Office to provide timely and accurate information and realign Expenditure Reports in the Fall to better align with actual cost areas where expenditures are drawn.

MAXIMUS Program Cost

At its May 2018 meeting, the Board requested information on Diversion Program costs to the Board to consider whether participant costs should be increased.

The Board currently contracts through MAXIMUS Health Services to run its Diversion Program (along with seven other Department Boards). The contract terms with MAXIMUS run from January 1, 2015 through December 31, 2019. The Board encumbers the cost for six program participants per year; however, any unspent encumbered funds are returned to the Board at the end of each Fiscal Year. Diversion Program Managers and Department contract staff are currently working on a formal Request for Proposal for a new diversion program contract once the current contract expires.

In accordance with 16 CCR Section [2070](#), participants in the Diversion Program pay a flat \$2,000 fee, to be paid to the Board through MAXIMUS in a lump sum or installments. Participants are required to be in the Program for a minimum of three years and are not considered having completed the Diversion Program until all Board fees have been paid. Participants also pay their own cost for mandatory drug testing and health support groups.

MAXIMUS invoices the Board per Participant, per month; per the contract, current per participant fees invoiced to the Board are \$369.50 per month.

MAXIMUS Contract Cost (1/1/2015 – 12/31/2019)					
	2015	2016	2017	2018	2019
Board Cost per Participant per Month	\$338	\$348	\$358	\$369	\$380
Board Cost per Participant per Year	\$4,056	\$4,176	\$4,296	\$4,428	\$4,560
Participant Cost per Participant per Year*	\$667	\$667	\$667	\$667	\$667
<i>*assumes the minimum three year participation in Program</i>					

MAXIMUS has been the Board's Diversion Program contractor since July 2003. In that time, it has seen 33 total participants of which 11 have successfully completed the Program (with four currently in the Program).

VETERINARY MEDICAL BOARD - 0777
BUDGET REPORT
FY 2017-18 EXPENDITURE PROJECTION
May-2018

OBJECT DESCRIPTION	FY 2016-17		FY 2017-18				
	ACTUAL EXPENDITURES	PRIOR YEAR EXPENDITURES	BUDGET ACT	CURRENT YEAR EXPENDITURES	PERCENT SPENT	PROJECTIONS TO YEAR END	UNENCUMBERED BALANCE
	(MONTH 13)	5/31/2017	2017/18	5/31/2018			
PERSONNEL SERVICES							
Salary & Wages (Staff)	1,019,574	935,727	1,076,000	936,109	87%	1,027,210	48,790
Statutory Exempt (EO)	94,812	86,838	82,000	68,983	84%	68,983	13,017
Temp Help Reg (Seasonals)	25,472	19,943	0	32,097	N/A	35,015	(35,015)
Temp Help (Exam Proctors)	0		33,000			0	0
Board Member Per Diem	7,700		14,000	9,700	69%	10,582	3,418
Committee Members (DEC)	4,600		11,000			0	11,000
Overtime	426	129	0	14,081	N/A	15,361	(15,361)
Staff Benefits	666,328	608,001	665,000	615,711	93%	671,685	(6,685)
TOTALS, PERSONNEL SVC	1,818,912	1,650,638	1,881,000	1,676,681	89%	1,828,835	19,165
OPERATING EXPENSE AND EQUIPMENT							
General Expense	34,243	31,707	26,000	19,519	75%	21,293	4,707
Fingerprint Reports	512	512	6,000			0	6,000
Minor Equipment	124	124				0	0
Printing	26,881	26,831	18,000	39,088	217%	42,641	(24,641)
Communication	1,336	1,230	18,000	1,680	9%	1,833	16,167
Postage	23,402	19,549	26,000	26,000	100%	26,000	0
Insurance	20	20	0	6,280	N/A	6,851	(6,851)
Travel In State	72,636	63,228	148,000	32,541	22%	35,499	112,501
Training	68	68	17,000		N/A	0	17,000
Facilities Operations	117,554	117,135	102,000	109,887	108%	119,877	(17,877)
C & P Services - Interdept.	0			84	N/A	84	(84)
C & P Services - External	257,713	243,812	138,000	178,821	130%	195,077	(57,077)
DEPARTMENTAL SERVICES (PRO RATA):							
Office of Information Services	488,657	461,087	506,000	463,833	92%	506,000	0
Admin/Exec	261,981	231,000	301,000	275,917	92%	301,000	0
IA w/ OPES	70,832	75,210				0	0
DO I- Spec Ops (Internal)	6,439	6,413	7,000	6,417	92%	7,000	0
Communications Division	50,079	46,750	9,000	8,250	92%	9,000	0
Program Policy Review Division	1,308	1,837	47,000	43,083	92%	47,000	0
INTERAGENCY SERVICES:							
Consolidated Data Center	26	23	50,000	7,365	15%	8,035	41,965
DP Maintenance & Supply	0		8,000				8,000
Information Technology	3,369	3,369	5,000	4,044	81%	5,000	0
EXAM EXPENSES:							
Exam Supplies	0		1,000			0	1,000
Exam Site Rental	0		5,000			0	5,000
C/P Svcs-External Expert Examiners	40,686	40,686	31,000	272,054	878%	296,786	(265,786)
C/P Svcs-External Subject Matter	36,688	34,688				0	0
ENFORCEMENT:							
Attorney General	657,122	555,132	932,000	833,263	89%	909,014	22,986
Office Admin. Hearings	151,691	142,646	154,000	113,215	74%	135,858	18,142
Court Reporters	9,363	8,523				0	0
Evidence/Witness Fees	162,244	128,405	163,000			0	163,000
DOI - Investigations	825,796	807,587	522,000	478,500	92%	522,000	0
Major Equipment	0		10,000	6,899	69%	6,899	3,101
TOTALS, OE&E	3,300,770	3,047,572	3,253,000	2,926,740	90%	3,202,748	50,252
TOTAL EXPENSE	5,119,682	4,698,210	5,134,000	4,603,421	90%	5,031,583	69,417
Sched. Reimb. - External/Private							
Sched. Reimb. - Fingerprints	(5,640)		(11,000)			(11,000)	
Sched. Reimb. - Other		(4,465)	(15,000)	(4,465)		(15,000)	
Unsched. Reimb. - Other	(197,407)	(168,767)		(193,306)			
NET APPROPRIATION	4,916,635	4,524,978	5,108,000	4,405,650	86%	5,005,583	69,417
SURPLUS/(DEFICIT):							1.4%

**Veterinary Medical Board
Summary of Expenditures - 2017/2018**

Line Item	Appropriation	Summary of Expenses
Personal Services:		
Salary & Wages (Staff)	1,076,000	Board staff salaries
Statutory Exempt (EO)	82,000	Executive Officer salary
Temp Help Reg (Seasonals)	0	Wages for temporary help such as a permanent-intermittent employees, students, seasonal employees, etc.
Temp Help Reg (Exam Proctors)	33,000	Examination Proctors
Board Member Per Diem	14,000	Board members' per-diem
Committee Members (DEC)	11,000	Committee members' per-diem
Overtime		Staff Overtime
Staff Benefits	665,000	OASDI, Dental, health, retirement, life, vision, Medicare
Total Personal Services	1,881,000	
Operating Expenses & Equipment:		
General Expense	26,000	Office supplies, freight
Fingerprint Reports	6,000	Fingerprint expenses – reimbursed by candidate
Minor Equipment		Equipment less than \$5K per unit
Printing	18,000	Printed forms, office copier, copying service
Communication	18,000	Phones, cellular phones
Postage	26,000	Stamps, DCA and EDD facility mailed postage
Insurance		Insurance coverage for department owned vehicles.
Travel In-State	148,000	Board, Committee, and Staff Air, car, bus, taxi, incidentals, service fees
Travel Out-of-State		Same as above - out-of-State
Training	17,000	Registration fees, subscriptions
Facilities Operations	102,000	Rent, storage, security
Utilities		Electricity, Natural Gas (P.G. & E.), water, sewer, and regular waste removal service.
C&P Services Interdept.		Services provided by other state agencies or Interagency Agreement within the Department of Consumer Affairs.
C&P Services External	138,000	Outside DCA contracts - incl. MAXIMUS and Credit Card processing
Departmental Services		
OIS Prorata	506,000	DCA Svcs: Info systems (incl. BreZEz)
Admin/Exec	301,000	Pro-rata assessments to support DCA Administrative Services (HR, Accounting, Budgets, etc.), Legal, Publications
Interagency Services		Services provided to one board by another board within the Department
IA w/OPES		Services provided by OPES to Board to develop examinations
DOI-Pro Rata Internal	7,000	Services provided by Division of Investigation Pro Rata
Communications	9,000	Services provided by DCA Public Affairs
Program Policy Review Division Pro Rata	47,000	Pro-rata Consumer and Community Empowerment Division
Interagency Services		
Consolidated Data Centers	50,000	CAS/Teale Data Center
DP Maintenance & Supply	8,000	Data processing supplies and maintenance
Information Technology	5,000	State services pro-rata (DGS, DOF, etc)
Exam Expenses		
Exam supplies	1,000	Examination materials, supplies not covered by contract
Exam site rental	5,000	Facility rental charge for vet exams administration
C/P Svcs-External Expert Examiners	31,000	Wages for services provided by expert examiners in the oral/ written examination process
C/P Svcs-External Subject Matter		Services provided by subject matter experts in the oral/written examination process, VET and RVT
Enforcement		
Attorney General	932,000	Office of the Attorney General/DAG legal services
Office of Admin Hearings	154,000	Office of Administrative Hearings, Admin. Law Judge and court reporter services
Court Reporters		
Evidence/Witness Fees	163,000	Expert Witness and In-house Consultants enforcement case review
DOI - Investigations	522,000	DCA Division of Investigation services
Major Equipment	10,000	Equipment more than \$5k per unit
Vehicle Operations	3,000	Leasing & maintenance of State vehicle (CPEI BCP)
Total OE&E	3,253,000	
Total Personal Services (above)	1,881,000	
Totals, Expenditures	5,134,000	
Sched. Reimb. - External		Reimbursements for OIS Public Sales
Sched. Reimb. - Fingerprints	(11,000)	Reimbursements for assessment of fingerprint processing fees
Sched. Reimb. - Other	(15,000)	Reimbursements from private individuals, firms, institutions or corporations
Unscheduled Reimbursment		Investigative Cost Recovery
Net Appropriation	5,108,000	

**0777 - Veterinary Medical Board
Analysis of Fund Condition**

Prepared 7/10/18

Updated 2018-19 Budget Act with FM 11 PY Projections
With Fee Increase - Effective March 1, 2018

	PY 2017-18	CY 2018-19	BY 2019-20	BY+1 2020-21
BEGINNING BALANCE	\$ 1,822	\$ 1,375	\$ 2,188	\$ 2,853
Prior Year Adjustment	\$ -	\$ -		
Adjusted Beginning Balance	\$ 1,822	\$ 1,375	\$ 2,188	\$ 2,853
REVENUES AND TRANSFERS				
Revenues:				
4129200 Other regulatory fees	\$ 87	\$ 88	\$ 88	\$ 88
4129400 Other regulatory licenses and permits	\$ 1,150	\$ 1,483	\$ 1,483	\$ 1,483
4127400 Renewal fees	\$ 3,646	\$ 4,460	\$ 4,460	\$ 4,460
4121200 Delinquent fees	\$ 16	\$ 23	\$ 23	\$ 23
4140000 Sales of documents	\$ -	\$ -	\$ -	\$ -
4143500 Miscellaneous services to the public	\$ 1	\$ 1	\$ 1	\$ 1
4163000 Income from surplus money investments	\$ 18	\$ 20	\$ 9	\$ 10
4171400 Escheat of unclaimed checks and warrants	\$ 3	\$ -	\$ -	\$ -
Totals, Revenues	\$ 4,921	\$ 6,075	\$ 6,064	\$ 6,065
Totals, Revenues and Transfers	\$ 4,921	\$ 6,075	\$ 6,064	\$ 6,065
Totals, Resources	\$ 6,743	\$ 7,450	\$ 8,252	\$ 8,918
EXPENDITURES				
Disbursements:				
1111 Program Expenditures (S/O)	\$ 5,006	\$ 4,908	\$ 5,006	\$ 5,106
8880 Financial Information System for California (S/O)	\$ 6	\$ -	\$ -	\$ -
9990 Statewide Pro Rata	\$ 356	\$ 317	\$ 356	\$ 356
9892 Supplemental Pension Payments	\$ -	\$ 37	\$ 37	\$ 37
Total Disbursements	\$ 5,368	\$ 5,262	\$ 5,399	\$ 5,499
FUND BALANCE				
Reserve for economic uncertainties	\$ 1,375	\$ 2,188	\$ 2,853	\$ 3,419
Months in Reserve	3.1	4.9	6.2	7.3

**AGENDA ITEM 12.B:
ENFORCEMENT REPORT**

Hand-Carried Item

Veterinary Medical Board

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MEMORANDUM

DATE	August 2018
TO	Veterinary Medical Board
FROM	Ethan Mathes. Operations Manager
SUBJECT	Licensing/Examination Report

Applications

Applications Received			
<i>as of July 2018</i>			
	<i>Jan. 2016 - Dec. 2016</i>	<i>Jan. 2017 - Dec. 2017</i>	<i>Jan. 2018 - Dec. 2018*</i>
Veterinarian	671	903	657
University Veterinarian	-	-	79
Veterinary Technician	927	876	512
Veterinary Premises	290	315	155
Veterinary Asst. Cont. Sub. Permit	1,507	3,052	1,122
<i>*partial year data</i>			

Examinations

CALIFORNIA STATE BOARD EXAMINATION					
<i>May – Oct. 2017</i>		<i>Nov. 2017 – Apr. 2018</i>		<i>May – Oct. 2018*</i>	
<i>Candidates</i>	<i>Pass Pct.</i>	<i>Candidates</i>	<i>Pass Pct.</i>	<i>Candidates</i>	<i>Pass Pct.</i>
<i>217</i>	<i>84%</i>	<i>334</i>	<i>84%</i>	<i>151</i>	<i>71%</i>
<i>*partial year data</i>					

NORTH AMERICAN VETERINARY LICENSING EXAMINATION					
<i>Mar./Apr. 2017</i>		<i>Nov./Dec. 2017</i>		<i>Mar./Apr. 2018</i>	
<i>Candidates</i>	<i>Pass Pct.</i>	<i>Candidates</i>	<i>Pass Pct.</i>	<i>Candidates</i>	<i>Pass Pct.</i>
<i>87</i>	<i>68%</i>	<i>412</i>	<i>85%</i>	<i>97</i>	<i>60%</i>

CALIFORNIA VETERINARY TECHNICIAN EXAMINATION					
Jan. – Jun. 2017		Jul. – Dec. 2017		Jan. – Jun. 2018	
Candidates	Pass Pct.	Candidates	Pass Pct.	Candidates	Pass Pct.
251	88%	297	78%	312	98%
<i>*partial year data</i>					

VETERINARY TECHNICIAN NATIONAL EXAMINATION					
Jul./Aug. 2017		Nov./Dec. 2017		Mar./Apr. 2018	
Candidates	Pass Pct.	Candidates	Pass Pct.	Candidates	Pass Pct.
460	57%	363	53%	262	67%

Licensing

Licensees	
<i>as of July 2018</i>	
Veterinarian Licenses ^{*/**}	14,850/12,616
Veterinarian Licenses – California ^{**}	11,765
University Veterinarian ^{*/**}	41/41
Veterinarian – Internship ^{**}	22
Veterinarian – Reciprocity ^{**}	46
Registered Veterinary Technician Licenses ^{*/**}	9,011/6,795
Registered Veterinary Technician Licenses – California ^{**}	6,763
Premise Permits ^{*/**}	4,050/3,598
Premise Permits – Exempt ^{**}	156
Veterinary Asst. Cont. Sub. Permit ^{*/**}	4,398/4,022
<i>*includes delinquent, inactive, and clear licensees; **clear licensees</i>	

Licenses Issued			
<i>as of July 2018</i>			
	Jan. 2016 - Dec. 2016	Jan. 2017 - Dec. 2017	Jan. 2018 - Dec. 2018*
Veterinarian	630	737	479
University Veterinarian	-	-	40
Reciprocity	47	78	27
Intern	27	24	15
Registered Veterinary Technician	518	671	367
Premises	312	289	122
Veterinary Asst. Cont. Sub. Permit	314	3,281	808
<i>*partial year data</i>			

Examination Development and Workshops

Examination Development Workshops: Workshops include Item Writing, Item Review, Examination Construction, and Pass Score Setting. Staff recruits and contracts with licensees to serve as Workshop Subject Matter Experts (SME); approximately 6-8 SMEs participate in each Workshop.

For each yearly series of Workshops, the Board acquires two new examination forms for the State veterinary and veterinary technician examinations.

The following are scheduled Workshops for 2018:

Veterinarian Examination Workshops	
May 30-31, 2018	Exam Item Writing
June 27-28, 2018	Exam Item Review
July 11-13, 2018	Exam Construction
August 8-9, 2018	Exam Passing Score
October 22-26, 2018	Occupational Analysis SME Interviews
November 29-30, 2018	Occupational Analysis
Registered Veterinary Technician Examination Workshops	
July 25-26, 2018	Exam Item Writing
August 22-23, 2018	Exam Item Review
September 26-28, 2018	Exam Construction/Passing Score

Veterinary Technician Occupational Analysis: The Department's Office of Professional Examination Services (OPES) completed its Occupational Analysis (OA) of the California Registered Veterinary Technician Profession and is available on the Board's website.

In addition, the AAVSB-VTNE Job Analysis and Veterinary Technician National Examination studies were completed in September 2017 and May 2018 respectively. The [Review of the Veterinary Technician National Examination](#) is on the Board's website; Heidi Lincer from OPES will present the report findings to the Board at its August meeting.

The new California RVT Examination outline (based on the occupational analysis and comparison study report) is being finalized and will be published on the Board's website once complete. The examination outline will be used commencing with the January 2019 administration of the California RVT Examination.

Veterinary Occupational Analysis: The last veterinary OA was completed in December 2013. OPES will initiate a new veterinary OA in Fiscal Year 2018-2019 with workshops beginning in October 2018; The veterinary OA is scheduled for completion in December 2019.

Veterinary Law Examination: Board staff and OPES is developing a means to administer the Veterinary Law Examination electronically rather than by mail; however, Business and Professions Code (BPC) § [4848](#) (a)(2)(C) mandates the examination be administered by mail. Senate Bill [1491](#) (Hill, 2018), if enacted, removes this mandate and allows for electronic administration.

Diversion Program

The next Diversion Evaluation Committee (DEC) meeting is scheduled for October 2018.

The DEC meets every February, June, and October. There are currently four participants in the Diversion Program.

BreEZe

Update [July 2018] – Staff continues preliminary work initiating retroactive fingerprinting pursuant to California Code of Regulations § [2010.05](#) for licensees who do not have electronic fingerprint records on file. Staff is determining the number of affected licensees to notify those individuals of their requirement to obtain fingerprints at time of license renewal.

Outreach

Website: Staff is transitioning the Board's website to the newest State template which will significantly improve the web interface and make the end user experience more modern and streamlined. A full review of the existing website content is underway and sections for the Board's Inspection and Enforcement programs will be added. Implementation of the newly designed website will launch sometime in Fall of 2018.

Personnel

There are no personnel updates.

Pass Fail Rates By School

Between Jan 1, 2018 12:00 AM and Jun 30, 2018 11:59 PM

License Type: 4602

Exam Code: RVT

School Name	Pass Count - 1st Attempt	Pass Rate - 1st Attempt	Fail Count - 1st Attempt	Fail Rate - 1st Attempt	Total Exam Count - 1st Attempt	Pass Count - Retake	Pass Rate - Retake	Fail Count - Retake	Fail Rate - Retake	Total Exam Count - Retake	Pass Count - TOTAL	Pass Rate - TOTAL	Fail Count - TOTAL	Fail Rate - TOTAL	Total Exam Count - TOTAL
ALT RTE - Bakersfield College	1	100.0%	0	0.0%	1	0		0		0	1	100.0%	0	0.0%	1
ALT RTE - Banfield	4	100.0%	0	0.0%	4	3	100.0%	0	0.0%	3	7	100.0%	0	0.0%	7
ALT RTE - Heritage	9	100.0%	0	0.0%	9	1	100.0%	0	0.0%	1	10	100.0%	0	0.0%	10
ALT RTE - Modesto JC	2	100.0%	0	0.0%	2	1	100.0%	0	0.0%	1	3	100.0%	0	0.0%	3
ALT RTE - Platt College	9	90.0%	1	10.0%	10	3	75.0%	1	25.0%	4	12	85.7%	2	14.3%	14
ALT RTE - Santa Rosa JC	8	100.0%	0	0.0%	8	0		0		0	8	100.0%	0	0.0%	8
ALT RTE - Vet Allied Staff	34	94.4%	2	5.6%	36	6	85.7%	1	14.3%	7	40	93.0%	3	7.0%	43
B.S. Degree- Section 2068	1	100.0%	0	0.0%	1	0		0		0	1	100.0%	0	0.0%	1
Cal Poly State University	14	100.0%	0	0.0%	14	3	100.0%	0	0.0%	3	17	100.0%	0	0.0%	17
Carrington College - Citrus Heights	15	93.8%	1	6.3%	16	1	100.0%	0	0.0%	1	16	94.1%	1	5.9%	17
Carrington College - Pleasant Hill	8	100.0%	0	0.0%	8	2	100.0%	0	0.0%	2	10	100.0%	0	0.0%	10
Carrington College - Pomona	16	94.1%	1	5.9%	17	4	100.0%	0	0.0%	4	20	95.2%	1	4.8%	21
Carrington College - Sacramento	8	100.0%	0	0.0%	8	1	50.0%	1	50.0%	2	9	90.0%	1	10.0%	10
Carrington College - San Jose	5	100.0%	0	0.0%	5	1	100.0%	0	0.0%	1	6	100.0%	0	0.0%	6
Carrington College - San Leandro	7	100.0%	0	0.0%	7	2	100.0%	0	0.0%	2	9	100.0%	0	0.0%	9
Carrington College - Stockton	4	80.0%	1	20.0%	5	0		0		0	4	80.0%	1	20.0%	5
Central Coast College	1	100.0%	0	0.0%	1	0		0		0	1	100.0%	0	0.0%	1
Consumes River College	4	100.0%	0	0.0%	4	1	100.0%	0	0.0%	1	5	100.0%	0	0.0%	5
Foothill College	11	100.0%	0	0.0%	11	0		0		0	11	100.0%	0	0.0%	11
Mt. San Antonio College	15	93.8%	1	6.3%	16	1	100.0%	0	0.0%	1	16	94.1%	1	5.9%	17
Out-of-State AVMA Approved School	22	100.0%	0	0.0%	22	2	100.0%	0	0.0%	2	24	100.0%	0	0.0%	24
Pierce College	11	91.7%	1	8.3%	12	0		0		0	11	91.7%	1	8.3%	12
Pima Medical Inst. - Chula Vista	21	100.0%	0	0.0%	21	4	100.0%	0	0.0%	4	25	100.0%	0	0.0%	25
Platt College - Alhambra	12	100.0%	0	0.0%	12	4	100.0%	0	0.0%	4	16	100.0%	0	0.0%	16
Platt College - Ontario	3	100.0%	0	0.0%	3	0		0		0	3	100.0%	0	0.0%	3
Platt College - Riverside	3	100.0%	0	0.0%	3	0		0		0	3	100.0%	0	0.0%	3
San Diego Mesa College	6	85.7%	1	14.3%	7	0		0		0	6	85.7%	1	14.3%	7
San Joaquin Valley College, Fresno	8	100.0%	0	0.0%	8	3	100.0%	0	0.0%	3	11	100.0%	0	0.0%	11
School Not Listed	1	100.0%	0	0.0%	1	2	100.0%	0	0.0%	2	3	100.0%	0	0.0%	3
Section 2068.5 - Alternate Route	17	100.0%	0	0.0%	17	4	100.0%	0	0.0%	4	21	100.0%	0	0.0%	21
Section 2068.6 - Out-of-State RVT	3	100.0%	0	0.0%	3	0		0		0	3	100.0%	0	0.0%	3
Stanbridge University Veterinary Technology Program, Irvine, CA	13	100.0%	0	0.0%	13	1	100.0%	0	0.0%	1	14	100.0%	0	0.0%	14
University of California at Davis	2	100.0%	0	0.0%	2	0		0		0	2	100.0%	0	0.0%	2
University of Wisconsin at Madison	1	100.0%	0	0.0%	1	0		0		0	1	100.0%	0	0.0%	1
Western Career College - Stockton	0		0		0	1	100.0%	0	0.0%	1	1	100.0%	0	0.0%	1
Yuba College	4	100.0%	0	0.0%	4	1	100.0%	0	0.0%	1	5	100.0%	0	0.0%	5
4602 Total		303		9		312	52		3		55	355		12	367
4602 Average			97.9%		2.1%			96.3%		3.7%			97.6%		2.4%
Overall - Total		658		66		724	83		15		98	741		81	822
Overall - Average			86.0%		14.0%			83.5%		16.5%			84.4%		15.6%

Inspection Program Report - August 2018

Annual Training

The annual inspector training session was held July 31 – August 3; this is our intense four-day training for new Inspectors and two-day training for returning Inspectors. This year's training included a presentation from Enforcement staff regarding the discipline process and the Inspectors' role in that process. We reproduced the Self-Evaluation Checklist to provide each practice a copy at the time of inspection. Staff anticipates Inspector performance evaluations to take place this fiscal year as the budget permits.

Ride-alongs

Ride-alongs for staff and any interested board members have resumed.

Outreach

Staff is scheduled to participate in local VMA chapter meetings in 2019. As requests are received, staff makes every effort to attend along with the local area Inspector. Staff is working on finalizing the Inspection FAQ's for the website and continues to work with Admin staff to finalize the Inspection and Premises sections for the new Board website this fall.

Staffing

Three new inspectors were recruited for areas needed as a result, we have 15 inspectors for this fiscal year. Our Program Technician II position remains vacant unfortunately, recent recruitment efforts were unsuccessful. It is likely that this position will be reposted and recruitment will continue.

Statistics (as of 6/30/18)

Unfortunately, due to budget constraints, we were once again unable to meet our 20% inspection goal this year. I'm hopeful a request to appropriate much needed funds for the Inspection program will be approved to reach our goal in FY 18-19.

- Routine Inspections Assigned: 474
- Routine Inspection Performed: 440
- Complaint/Probation Related Inspections Performed: 23
- Complaint/Probation Related Inspections Pending: 32
- Document Review Status: reviewing compliance documents from June 2017 inspections
- Compliance Rate: approximately 35% after initial inspection
- Expenditures: Approximately \$137,000



Veterinary Medical Board Action Planning Session *for 2015-2019*

Updated August 7, 2018

Goal Areas

1. Enforcement *(5 objectives, 17 action items)*

2. Licensing, Examinations & Permitting *(5 objectives, 20 action items)*

3. Legislation & Regulations *(4 objectives, 16 action items)*

4. Customer Service & Administration *(6 objectives, 22 action items)*

5. Outreach *(4 objectives, 12 action items)*

6. Hospital Inspection Program *(5 objectives, 19 action items)*

Total Objectives: 29

Total Action Items: 106

Goal #1: Enforcement

The goal of the Board is to safeguard consumers and the health and safety of their animals by preventing of the unlicensed, illegal, incompetent and unprofessional practice of veterinary medicine.

1.1 Maximize recourse against unlicensed persons to protect animal patients.

Start: TBD

End: TBD

Success Measure: Decrease unlicensed activity cases.		Responsibility
1.1.1	Implement new citation and fine regulations for unlicensed practice cases. Complete – Effective Oct 2016	Enforcement Analyst
1.1.2	Ongoing – Publishing arrests and citations for UL both on website and through social media outlets	Executive Officer, Board Members, Program Analyst
1.1.3		Enforcement Manager
1.1.4	Ongoing - Continue to work with local law enforcement SPCAs, Animal Control, Department of Public Health, DEA, CDFA, FDA, CHRB	Executive Officer, Enforcement Manager, Program Analyst

1.2 Expedite all disciplinary case actions through proactive management of the Division of Investigation and Attorney General services to reduce the average disciplinary case time frames.

Start: Q1 2015

End: Ongoing

Success Measure: Decrease average disciplinary timeframes by 15%.		Responsibility
1.2.1		Enforcement Manager
1.2.2	Ongoing- Meetings have been on an as needed basis and are handled telephonically and in-person. Typically, meetings are scheduled to address individual case specifics. However, procedural meetings have been conducted with the DOI Chief. Quarterly meetings were re-instated effective July 2018.	Enforcement Manager

1.3 Improve and measure the quality of subject matter expert services, reports and testimony to encourage fair resolution of all cases.

Start: Q3 2015

End: Ongoing

Success Measure: Favorable case outcomes.		Responsibility
1.3.1	Create an expert witness report template. Complete - Disseminated to Experts.	Enforcement Manager
1.3.2	Ongoing - Conducting training 2x's per year; expert witness training has been suspended since early 2017 due to a lack of resources. Currently researching other available options.	Enforcement Manager
1.3.3		Enforcement Manager

1.3.4	Partner with SOLID to develop a rating system of the expert witness skill level and evaluate witnesses annually. Pending	Enforcement Manager, SOLID
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1.4 Create a Review Committee for complaints to increase objectivity of the complaint investigation process.

Start: Q2 2015

End: Ongoing

Success Measure: Increase objectivity of the complaint investigation process.		Responsibility
1.4.1	Implement multiple consultant reviews prior to initiating action. Complete - Existing procedures require in-house and external expert review.	Enforcement Manager and VMB Consultants
1.4.2	Create a review template for the Board MDC members who conduct audits. Complete – Template for MDC Member Review	Board Members, Executive Officer
1.4.3	Conduct Board MDC member audit of closed complaints. Ongoing	Board Members

1.5 Increase and support probation monitoring and quarterly contact with probationers for compliance with disciplinary orders.

Start: Q1 2015

End: Ongoing

Success Measure: Probationer compliance with specified terms and conditions.		Responsibility
1.5.1	Conduct in-person interviews with probationers to review disciplinary terms. Complete and ongoing - Existing procedures	Probation Monitor
1.5.2	Update all probation forms related to compliance orders, supervision/ practice monitoring, continuing education, clinical examination, etc. Complete	Probation Monitor
1.5.3	Contract with new laboratory for biological fluid testing (contract ends in December 2015). Complete – First Source Lab; effective 05/2016	Executive Officer, Enforcement Manager, Contract Analyst

1.5.4	Develop and promote web-based training for probation supervisors. <i>In process - developing a PowerPoint to post on web</i>	Probation Monitor
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Goal #2: Licensing, Examinations & Permitting

The goal of the Board is to make certain that only qualified individuals are issued a license to practice as veterinarians or Registered Veterinary Technicians (RVTs), and that those holding a Veterinary Assistant Controlled Substance Permit have not engaged in the unlawful consumption or sale of controlled substances.

2.1 Complete a cost-benefit analysis of the RVT exam to determine reasonable and equitable fees.

Start: Q3 2016

End: Q3 2017

Success Measure: Justify costs of the RVT examination.		Responsibility
2.1.1	Review all aspects of the RVT exam costs. <i>Complete - Fee Audit Report; 07/2017</i>	Administrative Manager, Program Analyst, Examination Contractors
2.1.2	Determine appropriate fees and develop the appropriate course of action. <i>Complete - Fee Schedule Regulation Package; 03/05/2018</i>	Administrative Manager
2.1.3	Report findings to the Board. <i>Complete – 07/2017</i>	Executive Officer, Administrative Manager

2.2 Monitor and approve the education and training offered by RVTs alternative route programs to measure quality and consistency.

Start: Q1 2015

End: Ongoing

Success Measure: Approval of RVT alternate route programs.		Responsibility
2.2.1	Determine and develop regulations for RVT alternate route programs. <i>Complete</i>	Administrative Manager, Program Analyst, Multi-Disciplinary Committee (MDC)

2.2.2	Submit proposed regulations to the Board for approval. Complete	
2.2.3	Finalize rulemaking. In Process – In review prior to notice with OAL	Program Analyst
2.2.4	Implement RVT alternate route program approval. In Process	Administrative Manager, Program Analyst
2.2.5	Initiate outreach to inform and educate stakeholders. Pending	Administrative Manager, Program Analyst

2.3 Resolve faculty licensure issue to enforce the minimum standards for licensing applicable to all practice settings.

Start: Q1 2015

End: Q4 2017

Success Measure: All practice settings require a California veterinary license.		Responsibility
2.3.1	Continue to work with Board members and stakeholders to develop parameters of licensure. Complete	Executive Officer, MDC, Board Members
2.3.2	Examine grandfathering issues related to existing personnel at universities. Complete	Executive Officer, MDC, Board Members
2.3.3	Develop and implement legislation to remove exempt setting. Complete – 01/2017	Executive Officer, Legal, Board Members
2.3.4	Communicate to stakeholders any changes made and implement university licensure. Complete – 02/2018	Administrative Manager, Program Analyst

2.4 Implement a continuing education audit program for licensees and providers in order to verify compliance.

Start: Q2 2015

End: Ongoing

Success Measure: Conduct continuing education audits of licensees.		Responsibility
2.4.1	Research and develop internal continuing education audit guidelines. In Process	Administrative Manager, Administrative Staff
2.4.2	Create continuing education audit process. Pending	Administrative Manager, Administrative Staff
2.4.3	Implement the continuing education audits. Pending	Administrative Manager, Administrative Staff
2.4.4	Report continuing education audits findings to the Board regularly. Pending	Administrative Manager

2.5 Coordinate with the Department of Consumer Affairs on creating and monitoring performance measures for licensing cycle times to expedite eligibility and renewals.

Start: Q1 2015

End: Ongoing

Success Measure: Licensing performance measures are created and implemented.		Responsibility
2.5.1	Provide requested licensing data that documents current benchmarks to DCA and BreZze team. Complete – 09/2015	Administrative Manager, Program Analyst
2.5.2	Review and update internal procedures for licensing to streamline licensing process. In Process	Administrative Manager, Administrative Staff

2.5.4	Continuously monitor cycle times and report findings to the Board. Pending	Administrative Manager, Administrative Staff

Goal #3: Legislation & Regulations

The goal of the Board is to monitor and uphold the law and participate in the regulatory and legislative processes.

3.1 Take a Board position on issuing temporary licenses for out-of-state veterinarians during disasters in order to provide adequate veterinary care.

Start: Q2 May 2015

End: Q4 October 2015

Success Measure: Influence appropriate legislation regarding disaster recovery plans.		Responsibility
3.1.1	Review other states disaster recovery plans for veterinary care. Complete	Executive Officer, Program Analyst
3.1.2	Communicate Board position to bill author and stakeholders. Complete – Effective 01/2016	Executive Officer, Board Members

3.2 Create statutory authority for veterinarians to compound drugs for animal medicine, within Food and Drug Administration guidelines, to enforce minimum standards.

Start: Q1 2016

End: Q1 2017

Success Measure: Implement statutory authority.		Responsibility
3.2.1	Draft new laws authorizing veterinarians to compound drugs within existing federal limits. Complete	Executive Officer, Legal Counsel

3.2.2	Find an author to carry legislation authorizing veterinarians to compound drugs. Complete – Effective 01/2017	
3.2.3	Develop regulations further defining parameters under which veterinarians may compound drugs. In Process – Board approved language, pending regulatory package review process	Executive Officer, Board Members, Legal Counsel, Program Analyst
3.2.4	Communicate limitations on compounding drugs and proposed laws to licensing population. Pending	Executive Officer, Board Members, Program Analyst

3.3 Create public and private animal shelter regulations to address minimum standards for shelter medicine.

Start: Q4 Oct 2015

End: Q4 2017

Success Measure: Adopted minimum standards for shelter medicine.		Responsibility
3.3.1	Hold stakeholder meetings to obtain feedback regarding minimum standards for shelter medicine. Complete	MDC, Program Analyst, Executive Officer
3.3.2	Create minimum standards specific to shelter medicine. In Process	MDC
3.3.3	Develop regulations for minimum standards for shelter medicine. In Process	Program Analyst, Executive Officer
3.3.4	Submit proposed regulations to the Board for approval. Pending	Executive Officer, Program Analyst
3.3.5	Finalize rulemaking. Pending	Program Analyst

3.4 Develop regulation language for large animal practice to establish minimum standards.

Start: Q4 Oct 2015

End: Q4 2017

Success Measure: Adopted minimum standards for large animal practice.		Responsibility
3.4.1	Hold stakeholder meetings to obtain feedback regarding minimum standards for large animal practice. Complete	MDC, Program Analyst, Executive Officer
3.4.2	Create minimum standards specific to large animal practice. Complete – 02/2018	MDC
3.4.3	Develop regulations for minimum standards for large animal practice. In Process	Executive Officer, Program Analyst
3.4.4	Submit proposed regulations to Board for approval. In Process	Executive Officer, Program Analyst
3.4.5	Finalize rulemaking. Pending	Program Analyst

Goal 4: Customer Service & Administration

The goal of the Board is to confirm that consumers, licensees, schools and all other stakeholders receive service in a prompt, courteous, accurate and cost-effective manner.

4.1 Review and refine desk manuals and new employee orientation to reduce staff onboarding time.

Start: Q1 2015

End: Ongoing

Success Measure: Implement new employee orientation and updated desk manuals .		Responsibility
4.1.1	Review existing desk manuals and identify areas needing improvement. Complete and In Process	Program Managers, Staff
4.1.2	Update desk manuals (including lessons learned from BreEZe OCM). Complete and In Process	Program Managers, Staff

4.1.4	Conduct training within two weeks of new employee's start date. Complete	Program Managers
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4.2 Update frequently asked questions (FAQs) on the Web site to address consumer and licensee questions in order to improve customer service.

Start: Q3 2015

End: Ongoing

Success Measure: A reduced number of phone calls the Board receives.		Responsibility
4.2.1	Review existing FAQ's and obtain feedback from VMB staff regarding consumer and licensee questions. In Process	Program Analyst, All Staff
4.2.2	Update FAQ's on Web site. In process	Program Analyst
4.2.3	Communicate via social media when there are new changes to the FAQ's. In process	Program Analyst
4.2.4	Continuously review and update FAQ's to ensure the information is current. Ongoing	Program Analyst

4.3 Streamline the email inquiry submission processes to improve timeliness and efficiency.

Start: Q1 2016

End: Ongoing

Success Measure: Reduce response times and improve accuracy of email responses.		Responsibility
4.3.1	Develop a Web site drop down menu for questions. Complete – 01/2018	Program Analyst
4.3.2	Collaborate with Office of Information Security Internet team to develop a Web site drop down menu and an email tree. Complete	Program Analyst

4.6 Complete, deliver and testify to the 2015-2016 supplemental sunset review report.

Start: Q1 2015

End: Q2 2016

Success Measure: Timely submission of 2015 2016 sunset review report.		Responsibility
4.6.1	Gather data to respond to supplemental Sunset Review report questions. Complete	Program Managers, Executive Officer
4.6.2	Draft a supplemental Sunset Review report. Complete	Executive Officer, Board Members, Program Managers
4.6.3	Present the supplemental report to the Board and obtain approval. Complete	Executive Officer
4.6.4	Submit the supplemental Sunset Review report to the legislature and testify to the information therein. Complete	Executive Officer

Goal #5: Outreach

The goal of the Board is to educate consumers and licensees so that they are able to make informed decisions regarding the purchase and provision of veterinary medical services.

5.1 Encourage submission of email addresses for all licensees for efficient and timely communication.

Start: Q1 2016

End: Ongoing

Success Measure: Comprehensive compilation of email addresses.		Responsibility
5.1.1	Provide a means by which licensees can provide information. Complete – 01/2016	Administrative Manager

5.1.2	Communicate to licensees the value of providing email addresses. Ongoing	Program Analyst
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5.2 Develop and circulate newsletter (at least twice per year) to provide updates on regulatory matters and topics of interest.

Start: Q3 2015

End: Ongoing

Success Measure: Publish newsletter two times per year.		Responsibility
5.2.1		All staff, Board Members
5.2.2	Work with DCA legal and PDE to publish the newsletter.	Program Analyst, DCA, PDE
5.2.3		Program Analyst

5.3 Provide outreach presentations to local associations, consumer groups and schools to inform and educate stakeholders.

Start: Q1 2015

End: Q1 2016, Ongoing

Success Measure: Increase outreach presentations statewide.		Responsibility
5.3.1		Executive Officer, Program Manager, Program Analyst
5.3.2	Identify stakeholder groups. Complete - CVMA/VMAs	Executive Officer

5.3.4	Deliver and conduct presentations. Complete and Ongoing	Executive Officer, Program Manager, Program Analyst

5.4 Strengthen social media outlets and information posted on Web site to provide convenient, timely and accessible information.

Start: Q1 2015

End: Q4 2015, Ongoing

Success Measure: Increased number of followers, positive feedback from stakeholders and up to date information.		Responsibility
5.4.1	Identify current and relevant topics. Complete and Ongoing	Executive Officer, Board Members, Program Manager, Program Analyst
5.4.2	Seek input from Board members and associations regarding topics of interest. Complete and Ongoing	Executive Officer, Program Analyst
5.4.3	Partner with veterinary organizations to boost social media presence and increase awareness. Complete and Ongoing	Program Analyst

Goal #6 Hospital Inspection Program

The goal of the Board is to proactively educate veterinarians regarding the minimum standards requirements as provided by the California Veterinary Medicine Practice Act.

6.1 Improve Board member post-inspection feedback to address training issues relevant to hospital inspection processes.

Start: Q1 2015

End: Q3 2015, Ongoing

Success Measure: Board members are provided regular feedback regarding post inspection feedback.		Responsibility
6.1.1	Review current post-inspection survey and update as necessary. Complete	Program Coordinator
6.1.2	Gather and analyze data from completed surveys received. Complete and ongoing	Program Coordinator
6.1.3		Program Coordinator
6.1.4	Report findings to the Board on a regular basis. Ongoing – Standing Board Report	Executive Officer
6.1.5	Provide additional training as needed. Ongoing	VMB Consultants, Program Coordinator

6.2 Inspect new hospitals within one year of registration to validate that compliance is achieved.

Start: Q3 2016

End: Q3 2017 and Ongoing

Success Measure: All newly registered hospitals are inspected within one year of being issued a premise permit.		Responsibility
6.2.1	Increase the number of hospital inspectors. Complete	Program Coordinator

6.2.2	Disseminate hospital checklist in a timely manner (with wall certificate). Complete	Program Coordinator
6.2.3	Create assessment criteria for compliance of minimum standards at newly registered hospitals. Complete	Program Coordinator

6.3 Increase number of training sessions of hospital inspectors to twice a year to encourage ongoing consistency and timely application of minimum standards.

Start: Q3 2015

End: Q4 2016 and Ongoing

Success Measure: Consistent application of enforcement of all minimum standards.		Responsibility
6.3.1		Program Coordinator
6.3.2	Complete – DEA/DOJ/Depart Public Health/ Radiologic Health Branch/Pharmacy Board	Program Coordinator
6.3.3	Create a training assessment for inspectors. Complete and ongoing	Program Coordinator

6.4 Develop and publicize workshops and other educational tools to educate stakeholders on minimum standards.

Start: Q2 2016

End: Q4 2016 and Ongoing

Success Measure: Conduct minimum standards presentations statewide.		Responsibility
6.4.1	Define minimum standards topics for outreach presentations. Complete – Controlled Substances, Drug Storage, Medical Records, Surgery Suite Standards, VACSP, Marijuana for Pets, Drugs and Biologics	Executive Officer, Program Coordinator

6.4.2	Identify stakeholder groups. Complete - VMAs	
6.4.3	Create and develop presentations. Complete and Ongoing	Executive Officer, Program Coordinator
6.4.4	Deliver and conduct presentations. Complete and Ongoing	Executive Officer, Program Coordinator

6.5 Distribute hospital inspection checklist with initial premise permits and encourage self-evaluation on minimum standards.

Start: Q1 2016

End: Ongoing

Success Measure: All initial premise permit holders will receive hospital inspection checklist.		Responsibility
6.5.1	Reproduce the hospital inspection checklist (at least 1,000/year). Complete	Program Coordinator
6.5.2	Distribute hospital inspection checklists with initial premise permits. Complete and Ongoing	Licensing Staff, Program Coordinator
6.5.3	Distribute hospital inspection checklists to hospitals at time of inspection. Complete and Ongoing	Inspectors
6.5.4	Utilize social media to encourage self-evaluation of minimum standards. Pending	Program Analyst

The benefit is a review of operations by an internal (non-adversarial) audit office, so needed changes can be implemented before negative consequences from non-compliance affect the organization and the public, or in some cases, negative consequences are addressed timely.

The Veterinary Medical Board has not been audited since 2004 and is next in line for an audit. Due to the lengthy timespan since the last audit, waiting until the Sunset process commences may prove challenging. If substantive issues are raised, it may take significant staff time to address them. Overlapping the Sunset process with an audit will hinder both projects.

To remedy this, DCA Internal Audits has agreed to conduct their audit this calendar year. This will allow staff to address any potential issues prior to Sunset – documenting the audit completion as an accomplishment in the Board's report to the Legislature.