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3
4 **PUBLIC SESSION MINUTES**

5
6 **Wednesday, October 20, 2021**
7 **PUBLIC WEBEX MEETING**
8

9
10 **Members Present:** Mary Ellen Early
11 Mark Goldstein
12 Ricardo Guzman
13 Sam Kbushyan
14 Ronald Lewis
15 Michael Terry
16 Cheryl Williams
17

18 **Staff Present:** Fred Chan-You, Legal Counsel
19 Stephanie Nunez, Executive Officer
20 Christine Molina, Staff Services Manager
21

22
23 **CALL TO ORDER**
24

25 The Public Session was called to order at 10:00 a.m. by President Guzman.

26
27 Ms. Molina called roll (present: Goldstein, Guzman, Kbushyan, Lewis, Terry, Williams), and a quorum
28 was established.
29

30 Ms. Early had technical difficulties connecting to the meeting and joined at 10:05 a.m.
31

32
33 **1. PRESIDENT'S OPENING REMARKS**
34

35 President Guzman asked the Board and staff to please turn their cell phones to silent. He added
36 Board members may be accessing their laptops, phones or other devices during the meeting solely to
37 access the Board meeting materials that are in electronic format. Individuals may be joining either
38 online through WebEx or by telephone. Public comment would be allowed on each agenda items, as
39 those items are discussed by the Board during the meeting. Under the Bagley-Keene Open Meeting
40 Act, the Board may not take action on items raised by public comment that are not on the Agenda,
41 other than to decide whether to schedule that item for a future meeting. If providing comment, it
42 would be appreciated, but not required, to provide your name and organization represented, if
43 applicable, prior to speaking. In order to allow the Board sufficient time to conduct its scheduled

1 business, public comment may be limited. The Board welcomes public comment on any item on the
2 agenda and it is the Board's intent to ask for public comment prior to the Board taking action on any
3 agenda item. The moderator explained the WebEx question and answer feature will be used to
4 facilitate public comment when the Board president reaches a point in the agenda, which public
5 comment is appropriate. To make a public comment, click the Q & A icon at the bottom right corner of
6 the screen. Type, "I would like to make a comment", in the Ask field on the lower right of the screen.
7

8 Request for public comment: No public comment was received.
9

10 **2.. APPROVAL OF JUNE 30, 2021 MEETING MINUTES**

11
12
13 President Guzman asked the members if they had any additions or corrections to the June 30, 2021
14 minutes.
15

16 Dr. Lewis moved to approve the June 30, 2021 Public Session Minutes as submitted. The motion was
17 seconded by Vice President Goldstein.
18

19 Request for public comment: No public comment was received.
20

21 M/Lewis /S/Goldstein

22 In favor: Early, Goldstein, Guzman, Kbushyan, Lewis, Terry, Williams

23 MOTION PASSED
24

25 **3. 2021-2022 SUNSET REPORT REVIEW/APPROVAL**

26
27 Ms. Nunez explained there were a few reasons she included the draft and incomplete Sunset Report
28 in the agenda. The Sunset Questionnaire was revised this year and was just received mid-
29 September. The due date has been extended from December 1 to January 5. At the time of mailing
30 the agenda, she had only completed half of the report. She advised members that all but one section
31 of the report is now complete. Ms. Nunez explained the Sunset process stating this report will be
32 submitted by January 5th. Legislative staff will review and formulate questions they have in response.
33 The Board will respond to those questions and hearings before the Sunset Committee will likely be
34 held in April or May and will be attended by President Guzman, Ms. Nunez and Ms. Molina to answer
35 any additional questions or respond to any other areas of concern.
36

37 Ms. Nunez stated one of the primary reasons she included the draft report in the agenda was to
38 review the budget and enforcement data with the Board.
39

40 Ms. Nunez directed members to page 14, Table 3a Fund Condition, pointing out that revenue and
41 expenditures nearly match in FY 22/23 and project 5.8 months in reserve. She added that while this
42 is an ideal condition, expenditures will likely increase as salaries rise. She explained that she and Ms.
43 Molina have several ideas to reduce expenses in connection with attrition. Several staff members will
44 retire in the coming years and processes may be able to be modified to be able to keep the positions
45 vacant.
46

47 Ms. Nunez next directed members to page 16 of the Sunset Report to review Table 3b Expenditures
48 by Program Component. She pointed out that DCA Pro Rata alone consumed between 17% and
49 21% of the Board's actual expenditures. She further stated the RCB also pays General
50 Fund/Statewide Pro Rata and that together these will account for about 26% of the Board's
51 expenditures. She explained the types of services provided through DCA Pro Rata and General
52 Fund/Statewide Pro Rata. As salaries increase, these figures will increase as well as funds are used
53 to pay the salaries of employees working at these state control agencies.

1 Ms. Williams asked if, based on the cost of living increases, the percentage increase was just par for
2 the course. Ms. Nunez responded yes, but the Board needs to remain conscious of the increases to
3 prevent it from impacting renewal fees.
4

5 President Guzman asked what the DCA Pro Rata was during the last Sunset Review. Ms. Nunez
6 responded 17%. She stated in fiscal years 2011-12, it was at 11% – 12% and climbed slowly until FY
7 2015-16, when it became 17%. Now it is at 19% to 21%. She added a lot of that is in connection with
8 BreEZe.
9

10 President Guzman suggested that if the number of licensees who renew each year changed it could
11 have a dramatic impact and inquired about retiring licensees. Ms. Nunez concurred with President
12 Guzman and directed members attention to Table 4a, Licensee Population. She explained that after
13 reviewing the 2007 and 2017 Workforce Studies and the data contained in the report such as Table
14 4a, she is hopeful the Board has made it through the anticipated mass retirements. While there have
15 been thousands of new licenses issued over the last four years, the number of active licensees has
16 stayed relatively the same, indicating that 25% of the workforce had retired over this same
17 period. She stated she couldn't be certain, and it is unknown if the pandemic will have an impact on
18 early projections, but it appears RCPs are near the end of the mass retirements and should start to
19 see the number of active licenses increase soon, which will have a positive impact on the fund
20 condition.
21

22 Dr. Lewis asked that we review the narratives on pages 23-27 to see if that level of detail is
23 necessary. Ms. Nunez stated she would review the questionnaire again and revise if applicable.
24

25 Ms. Nunez directed members to Table 5a Enforcement Performance Measures and drew their
26 attention to the 5th column titled, "Intake, Inv. & AG PM4 and noted that since the last quarter of FY
27 16/17 the Board has met all of its target processing times. She noted that credit for this target goes to
28 the Office of the Attorney General for zeroing in on these times and reducing them, which in turn
29 allowed the Board to meet its target. She also gave accolades to Ms. Freels for reaching all the
30 performance targets that are in the Board's control.
31

32 Ms. Nunez advised members of the two options moving forward: to either allow the Executive
33 Committee to review and approve the final report or to hold another meeting prior to Jan 5 (the due
34 date of the report) for review and approval by the Board.
35

36 Dr. Lewis made a motion for the Executive Committee to work with the Executive Officer on finalizing
37 the draft of the Sunset Report and to submit this report at a Board meeting prior to presenting it to the
38 legislature.
39

40 Mr. Chan-You agreed with this approach stating matters of substance should be discussed in front of
41 and in the Board meeting.
42

43 Ms. Molina reminded the Board that in order to have sufficient time to publish the report, the Board
44 may need to meet earlier than late December.
45

46 Discussion ensued
47 Public comment: No public comment was received
48

49 M/Lewis /S/Terry
50 In favor: Early, Goldstein, Guzman, Kbushtyan, Lewis, Terry, Williams
51 MOTION PASSED
52
53

1 **4. COARC: PROPOSED CHANGE TO ACCREDITATION STANDARD 1.01**
2 **REVERSING ASSOCIATE DEGREE PROHIBITION**
3

4 President Guzman explained he was alerted to this change by a person reaching out to him in his role
5 as Program Director at Napa Valley College. He added, the language was concerning and lacked
6 clarity, given the history of this standard. He thanked Ms. Nunez for contacting Dr. Smalling, the
7 Director of CoARC to obtain clarification.
8

9 President Guzman stated that CoARC is proposing to amend its Accreditation Standard 1.01
10 reversing the provision that required all new respiratory care education programs to be at the
11 baccalaureate degree level. CoARC is proposing to again allow new programs that only offer an
12 Associate Degree. He added, while it is not noted in the attached documents, the catalyst for this
13 change is CoARC's response to information they have received that there are staffing shortages and
14 registration reductions in education programs with only 10% at capacity. The time to complete the
15 online survey has passed, but there is an opportunity to provide oral testimony on December 10. He
16 asked members to consider whether the Board should provide testimony at CoARC's December 10
17 meeting.
18

19 Mr. Terry stated he sent this to Loma Linda University and they provided some feedback and will
20 provide verbal feedback as well.
21

22 Public comments:

23 Krystal Craddock stated she does not want this change and inquired what can be done by the Board
24 to get support behind this. Ms. Nunez responded the feedback she is getting is that people are very
25 concerned about this being a step backward. For a couple of decades now, the momentum has been
26 towards a bachelor's degree as a minimum education requirement. The Board has not heard of any
27 shortages. This new standard says a new education program can be created at the associate level
28 whereas before new programs had to be at a bachelor's degree level, but it did not eliminate the
29 associate degree level existing programs. It does not make sense to create a new associate level
30 degree program and expect it to fill up if those programs are not currently at capacity. The agenda
31 item was brought before the Board to get feedback and comments to see how the Board felt and if it
32 wanted to send someone to the hearing to weigh-in in support or opposition to the change.
33

34 President Guzman added it will be difficult to get CoARC to change their policy when they represent
35 all 50 states, but he believes it is important for the Board to voice its opposition to it.
36

37 Mr. Terry agreed it is important to come out in opposition to this change as he too believes this is a
38 step backward.
39

40 Vice President Goldstein inquired whether the discussion indicated any geographic area within the
41 country that was requesting this step back. Ms. Nunez responded no but did confirm no comments
42 had received from California.
43

44 Krystal Craddock stated according to the CoARC report in 2020, the current program seats are not
45 being filled. The capacity is over 10,000 with just over 6,000 seats occupied. She added the
46 Sacramento area has four major health systems and two of them were not taking any students during
47 COVID. This will be an issue across the nation if more programs will be opening and something that
48 needs to be called to the attention of CoARC.
49

50 Wayne Walls, CSRC President, thanked the Board for its efforts and work for the profession in
51 California. He stated at the direction of the CSRC Board of Directors he drafted a letter to Tom
52 Smalling, Executive Director of CoARC concerning this matter which he read to the Board stating
53 California has an overabundance of associate degree granting programs. National enrollment is down

1 27% and only 10% of programs are at capacity. Many of the California programs are suffering
2 enrollment issues. There have been concerns that this amendment, if approved, may prompt a
3 number of schools to enter the art education business. This will further dilute the recruitment efforts of
4 existing programs. Why at this junction is CoARC proposing this amendment? In addition, once
5 COVID-19 began, clinical sites blocked all student clinical experiences. Every RT program has
6 scrambled to craft workarounds to provide their students sufficient clinical experiences to not only
7 complete the program but be able to pass NBRC examinations at the RRT credential level as required
8 here in California. He added it is important for the public to know that CSRC is taking affirmative
9 steps and is concerned about this matter. He personally has responded to CoARC's call for public
10 comment as well as several of his colleagues in the respiratory profession.

11
12 Mr. Terry volunteered to provide testimony at the December 10th CoARC hearing.

13
14 Dr. Lewis made a motion for Board Members Hernandez and Terry to attend the December 10 virtual
15 hearing and provide testimony, expressing opposition to CoARC's proposed amendment.

16
17 Dr. Lewis inquired if the Board has influence over the number of programs being developed and are
18 these organizations speaking in opposition as not to dilute the educational experience. President
19 Guzman responded the Board's mandate is to protect the consumer and does not have the authority
20 to prevent any program from starting. That is why CoARC exists. All the Board can do is monitor the
21 programs if there are any concerns from the consumer.

22
23 **Public Comments:**

24 Mary Adorno spoke, on behalf of the students in the State of California, concerning the workforce
25 shortage issues. She stated she is a legislative specialist in the legislative arena for 30 years. Every
26 clinical field has a certificate, certification programs, and associate programs. She requested that the
27 associate level not be eliminated and have some level of RT to work with the employers providing
28 safe, quality care. She added she is in full support of advancing the respiratory therapist role
29 however, just like the nurses, she believes scope areas need to be determined as what is acceptable
30 for the associate degree level. Associate degree level RTs have been working for many years. It is
31 not the right approach to advance the skill set to a baccalaureate level and leave out the associate
32 level. She added it is not within the best interests of the workforce development, the State of
33 California or the universities and junior colleges. She believes the Board needs to delineate which
34 scope can and have been handled by the current RTs with no quality of care issues and where there
35 are disciplinary areas because they did not have enough training. Those skill set areas should be the
36 ones reserved for baccalaureate. Eliminating the lower classifications is not the best manner to
37 advance the profession.

38
39 Samantha Scott-Marquina, Interim Director at UCSF, stated UCSF is the second largest employer in
40 San Francisco and employees over 225 RCPs. Ms. Scott-Marquina highlighted the importance of
41 moving the profession towards having a baccalaureate degree as the minimum requirement in terms
42 of what is expected of the RCPS at UCSF. The entire healthcare industry is now faced with a staffing
43 shortage which highlights the importance of RCPs practicing at the top of scope. There are nursing
44 and provider shortages relying on the RCPs to come to the table with advanced critical thinking and
45 critical reasoning. She did a survey within her team and identified a knowledge gap, especially with
46 new hires and new graduates (1-3 years in the field). There are knowledge gaps or many different
47 types of care at all levels, so she wanted to make sure RCPs are prepared for what is expected of
48 them when they enter the field. She added please let her know if there is anything she can do to
49 support this initiative.

50
51 M/Lewis /S/Goldstein

52 In favor: Early, Goldstein, Guzman, Kbushtyan, Lewis, Terry, Williams

53 MOTION PASSED

1
2
3 **5. PRESENTATION: INCORPORATION OF A BACCALAUREATE DEGREE REQUIREMENT IN**
4 **THE RESPIRATORY CARE PRACTICE ACT**
5

6 President Guzman stated this item will be tabled until the next meeting as the Professional
7 Qualifications Committee Chair was unable to attend this meeting due to serving on jury duty.
8
9

10 **6. LEGISLATION OF INTEREST**
11

12 Ms. Molina directed Board members to the meeting materials which included updates for bills for
13 which the Board previously adopted positions. She highlighted a few specific bills, including AB 1273
14 which was mentioned in the item summary.
15

16 **AB 29 (Cooper) - Board Position: Watch**

17 Title: State bodies: meetings

18 Status: This bill was held in the Assembly Appropriations Committee.
19

20 **AB 54 (Kiley) - Board Position: Watch**

21 Title: COVID-19 emergency order violation: license revocation

22 Status: This bill failed passage in committee.
23

24 **AB 107 (Salas) - Board Position: Watch**

25 Title: Licensure: veterans and military spouses

26 Status: Signed by the Governor 10/8/21 (Chapter 693, Statutes of 2021).

27 This bill would require most boards and bureaus within the Department of Consumer Affairs (DCA) to
28 issue temporary licenses to military spouses meeting specified criteria beginning July 1, 2023.

29 Temporary licenses would be required to be issued within 30 days of receiving an application if the
30 results of a criminal background check do not show grounds for denial. DCA would also be required to
31 submit an annual report to the Legislature on licensure of military members, veterans, and spouses.

32 Ms. Molina added AB107 does not directly impact the RCB since the Board falls under an exemption
33 due to the Board's existing expedited licensure process for military members and their spouses.

34 There is another provision in the bill that requires annual reporting to the legislature on licensure of
35 military members, veterans and spouses and staff will ensure compliance with this reporting
36 requirement.
37

38 **AB 562 (Low) - Board Position: Watch**

39 Title: Frontline COVID-19 Provider Mental Health Resiliency Act of 2021; health care providers;
40 mental health services

41 Status: Placed on suspense file 8/16/21. May become a 2-year bill.

42 This bill would require the Department of Consumer Affairs, in coordination with the relevant healing
43 arts boards, to provide mental health services to licensed health care providers who have provided
44 care to COVID-19 patients. Relevant healing arts boards would have to notify their licensees and
45 solicit applications for access to the program. Ms. Molina added, as this was the first year of a two-
46 year legislative cycle, several bills were held or failed passage. This included AB 562, the bill
47 discussed by the board at its 6/30 meeting. This bill posed an astronomical fiscal impact to those
48 healthcare boards subject to the bill's provisions although the author did acknowledge this hurdle and
49 agreed to work to alleviate some of the anticipated fiscal impact. Staff will continue to monitor AB 562
50 and all the other identified bills held this year for potential movement once the legislature reconvenes
51 in early 2022.
52
53

1 **AB 619 (Calderon) - Board Position: Support**

2 Title: Lung health

3 Status: Signed by the Governor 9/30/21 (Chapter 412, Statutes of 2021).

4 This bill requires the Department of Public Health (CDPH) to develop a plan with recommendations
5 and guidelines for counties to use in case of a significant air quality event caused by wildfires or other
6 sources. Requires a county, in advance of its next emergency plan update, to create a task force to
7 use their air quality plan developed by CDPH to develop a county-specific plan that addresses the
8 recommendations and guidelines developed by CDPH.

9
10 **AB 646 (Low) - Board Position: Watch**

11 Title: DCA: boards: expunged convictions

12 Status: This is a 2-year bill and dead for 2021.

13
14 **AB 927 (Medina) - Board Position: Support**

15 Title: Public postsecondary education: community colleges: statewide baccalaureate degree pilot program

16 Status: Signed by the Governor 10/6/21 (Chapter 565, Statutes of 2021).

17 This bill would extend the operation of the statewide baccalaureate degree pilot program indefinitely. The
18 bill would remove the requirements that the program consist of a maximum of 15 community college district
19 programs and for a student to commence a program by the end of the 2022–23 academic year. The bill
20 would require a community college district seeking approval to offer a baccalaureate degree program to
21 provide evidence of unmet workforce needs to the Chancellor of the California Community Colleges, as
22 provided. The bill would require, as part of the application and review process, the chancellor to ensure that
23 a community college district is provided with 2 timelines in which to apply for a baccalaureate degree
24 program and receive a response, as specified, that only 15 baccalaureate degree programs are approved
25 during each application period allowing for a total of 30 baccalaureate degree programs per academic year,
26 and that a minimum of 30 working days is taken to validate the submitted information and assess the
27 workforce value of the proposed baccalaureate degree program, as specified. The bill would require the
28 chancellor to consult with and seek feedback from the Chancellor of the California State University and the
29 President of the University of California on proposed baccalaureate degree programs, as specified. The bill
30 would require a community college district to continue to offer an associate degree program in the same
31 academic subject for which a baccalaureate degree program has been approved, unless the community
32 college district has received approval from the chancellor to eliminate the associate degree program, as
33 specified.

34
35 **AB 1105 (Rodriguez) - Board Position: Watch**

36 Title: Hospital workers: COVID-19 testing

37 Status: Placed on Suspense File on 7/15/21. May become a 2-year bill.

38
39 **SB 102 (Melendez) - Board Position: Watch**

40 Title: COVID-19 emergency order violation: license revocation

41 Status: This bill failed passage in committee.

42 Ms. Molina explained, at the time the Legislative Report was prepared, there were 2 bills that had
43 been enrolled and presented to the Governor but had not yet been acted upon. Those bills, AB 107
44 and AB 927 have both since been signed by the Governor.

45
46 **AB 1273 (Rodriguez) - Board Position to be Ratified: Oppose Unless Amended**

47 Title: Interagency Advisory Committee on Apprenticeship: The Director of Consumer Affairs and the
48 State Public Health Officer: earn and learn training.

49 Status: Signed by the Governor 10/4/21 (Chapter 477, Statutes of 2021).

50
51 Ms. Molina stated, the Board is being asked to ratify the Opposed Unless Amended position for AB
52 1273 as approved by the Executive Committee after the June 30th meeting.

53

1 AB 1273 directly conflicts with respiratory care practitioner education requirements as established
2 within Business and Professions Code (B&PC) section 3740. Among other provisions, AB 1273
3 prohibits the Department of Consumer Affairs and its programs from preventing applicants for
4 licensure from earning credits or experience through an "earn and learn" program.
5

6 CoARC, the national accrediting body, accredits respiratory care educational programs at the
7 Associate, Baccalaureate, and Master's Degree levels in the United States. B&PC section 3740(a)
8 states, "Except as otherwise provided in this chapter, all applicants for licensure under this chapter
9 shall have completed an education program for respiratory care that is accredited by the Commission
10 on Accreditation for Respiratory Care or its successor and been awarded a minimum of an associate
11 degree from an institution or university accredited by a regional accreditation agency or association
12 recognized by the United States Department of Education."

13 Pursuant to CoARC's Standards, students are prohibited from being compensated for clinical training,
14 creating what the RCB believes to be a direct conflict with our education statute.
15

16 Following the approval of the Oppose Unless Amended position by the Executive Committee,
17 Stephanie began actively working with Jennifer Tannehill of Aaron Read and Associates and
18 legislative advocate for CSRC to share the Boards concerns as well as the impact AB 1273 could
19 potentially have on the respiratory care profession as a whole. Following several meetings and
20 discussions with legislative staff as well as other interested parties, the author's office consulted with
21 the legislative counsel and responded that since the Board's role is tacit acceptance of educational
22 programs that are approved by CoARC, it would not be subject to the requirements of this bill since it
23 does not actively approve or deny CoARC, and this bill would not be directly applicable to them: they
24 are an out of state (Texas) entity that California cannot regulate."
25

26 While there is implied approval for CoARC in section 3740, staff as well as Board's legal counsel,
27 remain concerned with the legislative counsel's interpretation, at least in how the law will be
28 applied. Since CoARC has expressed no intention in changing its standards, there is potential the
29 Board could be challenged, and the issue will unfold in litigation and/or the Board being required to
30 accredit its own education programs. Both scenarios will be extremely costly for the board. Under the
31 scenario where the Board is required to accredit programs, there becomes an issue with reciprocity.
32 Anyone licensed in another state would likely not be permitted to come to work in California and
33 anyone licensed without CoARC approval will not be permitted to go to another state to practice. This
34 cripples reciprocity which has been long sought after by the Legislature.
35

36 Despite the Board's opposition, AB 1273 was signed by the Governor on October 4, 2021. At this
37 juncture we will operate under the opinion of legislative counsel and hope a challenge to the
38 requirement never surfaces.
39

40 Dr. Lewis moved to support the Board's position of the ratification of AB 1273. Mr. Kbushyan
41 seconded the motion.
42

43 Ms. Williams inquired what the Board's previous position or thoughts were on this bill. Ms. Molina
44 responded, there were expressed concerns related to the Executive Committee with the request to
45 take the position in accordance with the legislative policy. The author's office tried to provide the
46 Board with some information to ease the concerns stating that, according to legislative council, they
47 did not believe this would impact the Board. However, concerns remain that there is a direct conflict.
48 If the issue surfaces, at this point, the Board will have to decide the approach to take. The Board
49 does have the legislative council's opinion in writing to use should it be necessary. There is concern
50 with potential litigation and putting the matter in the hands of someone else to make that decision on
51 the Board's behalf.
52

53 Fred Chan-You, legal counsel, concurred with Ms. Molina's statement.

1
2 Vice President Goldstein inquired what the implications would be if the motion was not passed. Mr.
3 Chan-You stated the bill has already passed so there really are none. This motion is to reassert the
4 Board's concerns about the potential problems this law may cause the Board. Ms. Molina stated, by
5 ratifying, it shows there is a consensus among the Board that there was concern with this statutory
6 language. President Guzman inquired if there is a difference between saying concerned and
7 opposed. Mr. Chan-You stated, yes opposed means the Board is taking a position against the bill as
8 opposed to expressing concerns, meaning the Board is not necessarily opposing but see there are
9 problems with it. Since the bill was signed into law there is really no effect to oppose it as the bill now
10 has political authority behind it and is applicable throughout the State of California.

11
12 Ms. Molina stated, ideally the Board would have liked to be exempted but legislative council stated it
13 did not apply to this Board.

14
15 Ms. Williams stated it does apply which leaves the Board in a gray area. Ms. Molina responded the
16 Board has litigation concerns because CoARC is not accepting of an earn and learn program and
17 there cannot be compensation for clinical, a program may not be accepted as an accrediting body and
18 the responsibility could fall back on the Board to have to accredit the programs.

19
20 Ms. Nunez added, the intent does not line up with the legislative council's interpretation. The concern
21 is eventually someone will say that CoARC needs to change or the Board needs to accredit its own
22 programs.

23
24 President Guzman inquired if this bill requires the Board to make changes. Ms. Nunez responded not
25 at this point but there is a possibility it will be challenged in the future when the bill is implemented.
26 She added there is nothing the Board can do about it at this point. The bill is signed and already in
27 effect. The Board's legislative policy is to allow the Executive Committee to take a position in
28 between meetings. If this policy is not supported, it may need to be reexamined and the Board may
29 need to start having emergency meetings when something like this arises.

30
31 President Guzman questioned if the Board had resources if it is challenged. Ms. Nunez responded,
32 no, the Board would be limited but would move forward.

33
34 **Public Comment**

35 Wayne Walls, CSRC President, stated the CSRC is in opposition of this legislation primarily for the
36 issues stated at this meeting. However, one very pressing point that has not been answered by
37 Rodriguez's office (the author of this legislation) is where the cost will come from to pay the students
38 for the earn and learn programs. The hospitals are not going to pay student to do a clinical rotation
39 and the schools would have to raise tuition rates to pay the students for that compensation. The
40 concern is it defeats the whole purpose as it would shift that burden onto the student. Because the
41 cost would be incorporated into their student loans and they would be paying themselves to
42 essentially go to school. No one has been able to satisfactorily answer where the funds will come
43 from for this legislation.

44
45 Dr. Lisa Schmidt, program Director for a radiography program and who serve on the board of directors
46 for the JRCERT Joint Review Committee on Education and Radiologic Technology stated they stand
47 in opposition. As members of the medical imaging community, they drafted a letter submitted to
48 Governor Newsom for AB 1273. Despite the letter, the bill passed. There are many unanswered
49 questions and safety concerns towards following those standards, AB 1273 would not allow them to
50 follow those standards and for programs to remain accredited under the JRCERT because the
51 JRCERT does not recognize earn and learn. At this time, they are not sure of the next steps to follow
52 and do not know who will pay for the students. It raises a question of equity towards the student as

1 well. She added they are hoping there are steps to take and a working collaboration from other
2 members of the allied health community such as CoARC and the Respiratory Care Board.

3
4 Traci Lang spoke on behalf of the Joint Review Committee on Education and Radiology regarding the
5 implications of AB 1273. She stated they agree with Mr. Walls concerning compensation for these
6 students and where those funds will come from. This goes against the standards for an accredited
7 program in radiography and radiation therapy, magnetic resonance and medical symmetry. They also
8 consider it to be a step backwards in the profession as it does not appear to meet the minimum
9 qualifications for the requirement for an associate degree for national certification and registration, nor
10 does it appear to be the baccalaureate degree for our medical dosimetry programs. She added they
11 also remain concerned and will continue to watch over the next two years as this legislation comes to
12 fruition.

13
14 Ms. Nunez stated one of the statements from the conference calls was from a woman who has been
15 working in education for Kaiser Permanente for decades. She said they tried a pilot to pay students
16 while they were going through clinical practice. Her overall find was that when you add the incentive
17 of pay, it changes the dynamic of the education for both the advanced students as well as those
18 struggling. President Guzman agreed stating it would certainly complicate the clinical relationship.

19
20 M/Lewis /S/Kbushyan

21 In favor: Early, Goldstein, Guzman, Kbushyan, Lewis, Terry, Williams

22 MOTION PASSED

23

24

25

7. ELECTION OF OFFICERS FOR 2022

26

Vice President

27

28
29 President Guzman opened the floor for nominations for Respiratory Care Board Vice President.

30

31 A motion to nominate Mr. Goldstein for Vice President was made by President Guzman and seconded
32 by Dr. Lewis. Mr. Goldstein accepted the nomination.

33

34 Mr. Guzman asked if there were any other nominations for Vice President. None were received.

35

36 Request for member comment: No member comment was received.

37

38 Request for public comment: No public comment was received.

39

40 M/Guzman /S/Lewis

41 In favor: Goldstein, Guzman, Kbushyan, Lewis, Terry, Williams

42 Ms. Early was unable to vote due to technical difficulties

43 MOTION PASSED

44

President

45

46
47 President Guzman opened the floor for nominations for Respiratory Care Board President.

48

49 A motion to nominate Mr. Guzman for President was made by Mr. Kbushyan and seconded by Dr.
50 Lewis.

51

52 President Guzman asked if there were any other nominations for President.

53

1 Request for member comment: No member comment was received.

2

3 Request for public comment: No public comment was received.

4

5 M/Terry /S/Lewis

6 In favor: Early, Goldstein, Guzman, Kbushyan, Lewis, Terry, Williams

7 MOTION PASSED

8

9

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8. FUTURE BOARD MEETING DATES AND LOGISTICS

11

12 Ms. Nunez asked Mr. Chan-You, Legal Counsel, what the options are for holding meetings in
13 2022. Will there be legislation after January 31 allowing meetings to be held via WebEx as
14 the Board has for the past year.

15

16 Mr. Chan-You responded after January 31, 2022, all the provisions in this law will no longer be in
17 effect. He added, his understanding is they are still trying to work on a more permanent bill and more
18 information may be available at the next meeting. Ms. Nunez stated this item will be put on the next
19 agenda when more information will hopefully be available.

20

21 President Guzman stated having a meeting with multiple locations would be problematic right now.
22 Ms. Nunez agreed, the two options should be to plan a WebEx meeting (if possible) or meet in
23 person.

24

25 The following public meetings were scheduled:

26

27 November 23, 2021 @ 9:30 A.M. (WebEx)

28 April 8, 2022 (Sacramento or WebEx)

29 June 9, 2022 (Southern CA or WebEx)

30 October 27 & 28, 2022 – Strategic Planning & Board Meeting (Sacramento or WebEx)

31

32 Dr. Lewis moved to accept the dates as discussed and listed.

33

34 Request for member comment: No member comment was received.

35

36 Request for public comment:

37 Wayne Walls, on behalf of the CSRC invited the Respiratory Care Board to join the event at
38 Pechanga in Temecula for the June 9, 2022 meeting stating the CSRC could possibly facilitate a
39 space for the Board to meet, at their expense, after clearing it with the CSRC's Programming
40 Committee.

41

42 M/Lewis /S/Terry

43 In favor: Early, Goldstein, Guzman, Kbushyan, Lewis, Terry, Williams

44 MOTION PASSED

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10. FUTURE AGENDA ITEMS

48

49 President Guzman stated the Board is unable to take action on any items not listed on the agenda.
50 The only action the Board may take is to decide whether to place an item on a future agenda. He
51 asked if anyone would like to make a public comment on anything that is not on the agenda.

52

53 President Guzman inquired if the Members had any specific items they wanted on that agenda.

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Ms. Nunez stated Item #5 (the presentation on the Incorporation of a Baccalaureate Degree Requirement in the Respiratory Care Practice Act) would be moved to the April meeting.

Request for public comment: No public comment was received.

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11. CLOSED SESSION

The Board convened into Closed Session, as authorized by Government Code Section 11126c, subdivision (3) at 12:21 p.m. and reconvened into Public Session at 12:51 p.m.

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ADJOURNMENT

The Public Session Meeting was adjourned by President Guzman at 12:52 p.m.

RICARDO GUZMAN
President

STEPHANIE A. NUNEZ
Executive Officer