

AUGUST
23 & 24, 2017
BOARD MEETING

Department of Consumer Affairs
2005 Evergreen Street, Hearing Room
Sacramento, CA 95815



Physical Therapy Board of California

BUSINESS, CONSUMER SERVICES, AND HOUSING AGENCY – GOVERNOR EDMUND G. BROWN JR.

THE PHYSICAL THERAPY BOARD OF CALIFORNIA

2005 Evergreen St. Suite 1350, Sacramento, California 95815

Phone: (916) 561-8200 Fax: (916) 263-2560

www.ptbc.ca.gov

PHYSICAL THERAPY BOARD OF CALIFORNIA NOTICE OF PUBLIC MEETING

August 23, 2017 9:00 a.m.

August 24, 2017 9:00 a.m.

Department of Consumer Affairs
2005 Evergreen Street, Hearing Room
Sacramento, CA 95815

Action may be taken on any agenda item.
Agenda items may be taken out of order.

Unless otherwise indicated, all agenda items
will be held in **OPEN SESSION. THE PUBLIC
IS ENCOURAGED TO ATTEND.** Please refer
to the informational notes at the end of
the agenda.

BOARD MEMBERS

Katarina Eleby, M.A., *President*

Alicia K. Rabena-Amen, PT, MPT, *Vice President*

Debra Alviso, PT, DPT, *Member*

Jesus Dominguez, PT, Ph.D., *Member*

Daniel Drummer, PT, DPT, *Member*

TJ Watkins, *Member*

Tonia McMillian, *Member*

BOARD STAFF

Jason Kaiser, *Executive Officer*

Liz Constancio, *Manager*

Elsa Ybarra, *Manager*

Sarah Conley, *Manager*

Brooke Arneson, *Associate Analyst*



Physical Therapy Board of California



Agenda – Wednesday, August 23rd

1. **Call to Order - 9:00 a.m.**
2. **Roll Call** and Establishment of Quorum
3. **Review and Approval of May 24 & 25, 2017 Meeting Minutes**
–*Brooke Arneson*
4. **President's Report** – *Katarina Eleby*
 - (A) [2017 Adopted Meeting Calendar](#)
 - (B) [2018 Proposed Meeting Calendar](#)
5. **Executive Officer's Report** – *Jason Kaiser*
 - (A) Administrative Services
 - (B) Applications
 - (C) Licensing/Continuing Competency
 - (D) Consumer Protection Services
 - (E) Animal Rehabilitation
 - (F) DCA Internal Audit
 - (G) Outreach
6. **Presentation of FSBPT Physical Therapy Licensure Compact - Leslie Adrian and Jim Heider – Discussion and Possible Board Action**
7. **Presentation of FSBPT Supervised Clinical Practice Performance Evaluation Tool – Leslie Adrian – Discussion and Possible Board Action**
8. **Closed Session**
 - (A) Pursuant to Government Code section 11126(c)(3), Deliberation on Disciplinary Actions and Decisions to be Reached in Administrative Procedure Act Proceedings
 - (B) Pursuant to Government Code section 11126(a)(1), Evaluation of Executive Officer
9. **Reconvene Open Session**

10. Discussion and Possible Board Action - Sunset Review Report –
Jason Kaiser

- (A) Discussion and Possible Board Action Regarding [AB 1706](#)
(Committee on Business and Professions) Healing Arts:
Chiropractic Practice: Occupational Therapy: Physical Therapy

11. [Legislation Report](#) – Brooke Arneson

- (A) Discussion and Possible Board Action Regarding the [2017/18
Legislative Session Summary](#)
 - i. Discussion and Possible Board Action Regarding [AB 208](#)
(Eggman) Deferred Entry of Judgment: Pretrial Diversion
 - ii. Discussion and Possible Board Action Regarding [AB 387](#)
(Thurmond) Minimum Wage: Health Professionals: Interns
 - iii. Discussion and Possible Board Action Regarding [AB 508](#)
(Santiago) Health Care Practitioners: Student Loans

12. [Rulemaking Report](#) – Brooke Arneson

- (A) Discussion and Possible Board Action Regarding the 2017
Rulemaking Update
 - i. [Examination Passing Standard/Setting Examination
Score](#)
- (B) [Discussion of Issues and Possible Board Action Regarding
Guidelines for Issuing Citations and Imposing Discipline, 6th
Edition](#)

13. Recess

Agenda – Thursday, August 24^h

14. Call to Order - 9:00 a.m.

15. [Roll Call](#) and Establishment of Quorum

**16. [Discussion and Possible Board Action for the Increase in Board
Level and Exempt Status of the Executive Officer](#) – *Ricardo
DeLaCruz***

17. Closed Session

- (A) Pursuant to Government Code section 11126(c)(3), Deliberation
on Disciplinary Actions and Decisions to be Reached in
Administrative Procedure Act Proceedings
- (B) Pursuant to Government Code section 11126(a)(1),

Evaluation of Executive Officer

18. Consumer and Professional Associations and Intergovernmental Relations Reports

- (A) Federation of State Boards of Physical Therapy (FSBPT)
- (B) Department of Consumer Affairs (DCA) – Executive Office
- (C) California Physical Therapy Association (CPTA)

19. Board Member Training – Jason Kaiser

- (A) Council on Licensure, Enforcement and Regulation (CLEAR) – Introduction to Regulatory Governance

20. Administrative Services Report

- (A) **Budget** – Carl Nelson
- (B) Outreach – Liz Constancio

21. Application Report – Sarah Conley

22. Licensing Services Report – Sarah Conley

- (A) Continuing Competency Report

23. Consumer Protection Services Report – Elsa Ybarra

24. Probation Monitoring Report – Monny Martin

25. Public Comment on Items Not on the Agenda

Please note that the Board may not discuss or take action on any matter raised during this public comment section that is not included on this agenda, except to decide whether to place the matter on the agenda of a future meeting. [Government Code sections 11125, 11125.7(a).]

26. Agenda Items for Future Meeting –

November 15 & 16, 2017
TBD, Bay Area

27. Adjournment

Informational Notes:

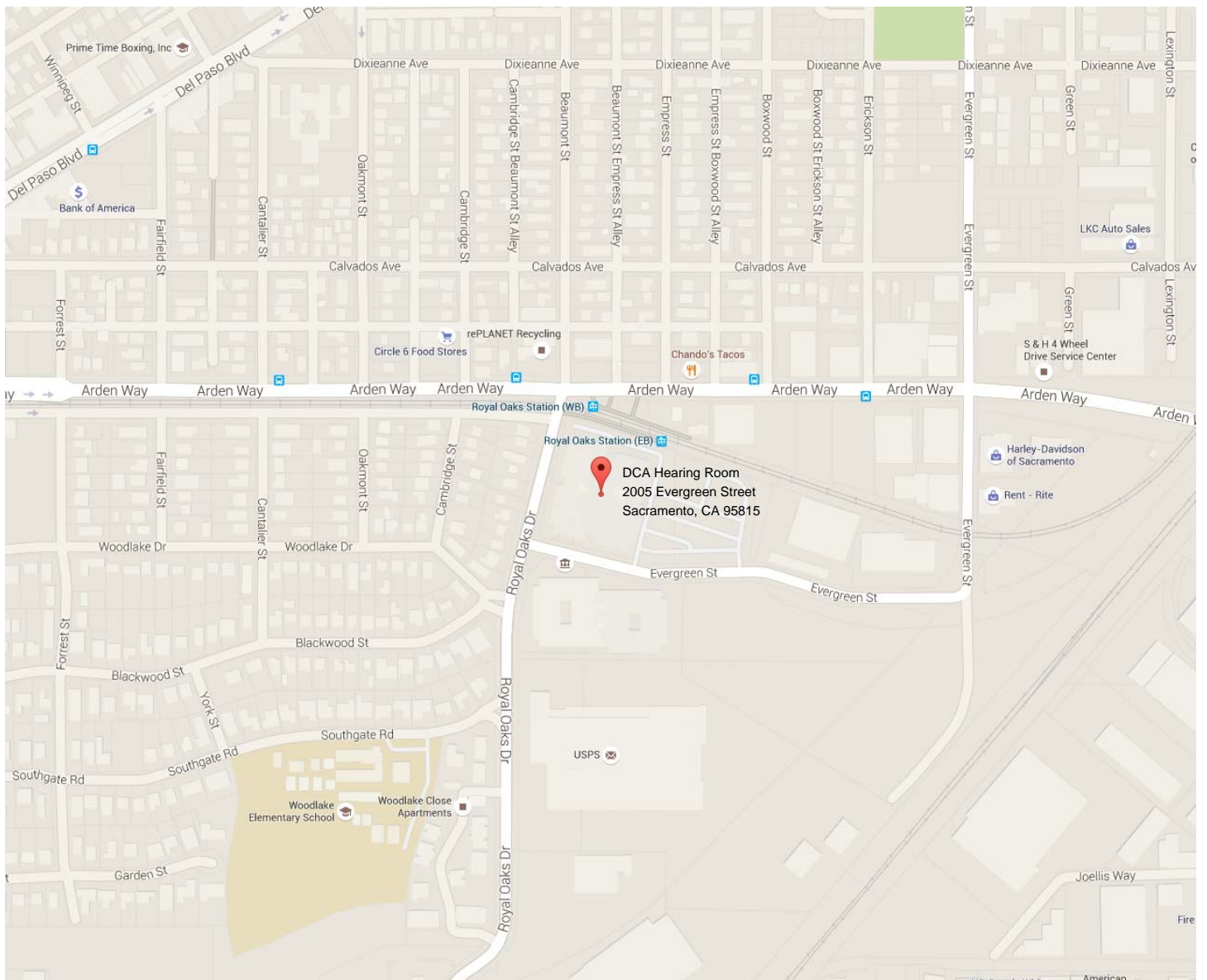
Times stated are approximate and subject to change. Agenda order is tentative and subject to change at the discretion of the Board; agenda items may be taken out of order. In accordance with the Bagley-Keene Open Meeting Act, all meetings of the Board are open to the public. Agenda discussions and report items

are subject to action being taken on them during the meeting by the Board at its discretion. The Board provides the public the opportunity at the meetings to address each agenda item during the Board's discussion or consideration of the item. Total time allocated for public comment on particular issues may be limited.

**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 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 any matter not included in this agenda, except to decide to place the matter on the agenda of a future meeting. (Government Code sections 11125, 11125.7(a)).*

The Board plans to webcast this meeting on its website at www.ptbc.ca.gov. Webcast availability cannot, however, be guaranteed due to limited resources. The meeting will not be cancelled if webcast is not available. If you wish to participate or to have a guaranteed opportunity to observe, please plan to attend at a physical location. Adjournment, if it is the only item that occurs after a closed session, may not be webcast.

The meeting is accessible to the physically disabled. A person who needs disability-related accommodation or modification in order to participate in the meeting may make a request by contacting Brooke Arneson at (916) 561-8260, e-mail: brooke.arneson@dca.ca.gov, or send a written request to the Physical Therapy Board of California, 2005 Evergreen Street, Suite 1350, Sacramento, CA 95815. Providing your request at least five (5) business days before the meeting will help to ensure availability of the requested accommodations. TDD Line: (916) 322-1700.



Roll Call

DCA Hearing Room, Sacramento, CA

August 23, 2017

	Present	Absent
Katarina Eleby, President		
Alicia Rabena Amen, PT, MPT, Vice-President		
Debra J. Alviso, PT, DPT		
Jesus Dominguez, PT, Ph.D.		
Daniel Drummer, PT, DPT		
Tonia McMillian		
TJ Watkins		

August 24, 2017

	Present	Absent
Katarina Eleby, President		
Alicia Rabena-Amen, PT, MPT, Vice-President		
Debra J. Alviso, PT, DPT		
Jesus Dominguez, PT, Ph.D.		
Daniel Drummer, PT, DPT		
Tonia McMillian		
TJ Watkins		

Agenda Item 2 – Roll Call



Physical Therapy Board of California

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Board Members

President

Katarina Eleby

Vice-President

Alicia Rabena-Amen, PT, MPT

Members

Debra Alviso, PT, DPT

Jesus Dominguez, PT, PhD

Daniel Drummer, PT, DPT

Tonia McMillian

TJ Watkins

Physical Therapy Board of California

DRAFT Meeting Minutes

May 24, 2017 9:00 a.m.

May 25, 2017 9:00 a.m.

Department of Consumer Affairs

2005 Evergreen St.

Sacramento, CA 95815

Board Staff

Jason Kaiser, Executive Officer

Liz Constancio, Manager

Elsa Ybarra, Manager

Sarah Conley, Manager

Brooke Arneson, Associate

Analyst

For the sake of clarity, agenda items discussed during the meeting follow their original order on the agenda in these minutes; however, some agenda items may have been taken out of order during the meeting.

Wednesday, May 24th

1. Call to Order - 9:00 a.m.

The Physical Therapy Board of California (Board) meeting was called to order by Vice President Rabena-Amen at 9:07 a.m. on May 24, 2017. The Board recessed at 8:00 p.m. and reconvened at 9:00 a.m. on May 25, 2017.

2. Roll Call and Establishment of Quorum

All members were present except Katarina Eleby and a quorum was established. Also present at the meeting were Tara Welch, Legal Counsel; Jason Kaiser, Executive Officer; Brooke Arneson, Monny Martin, Sarah Conley and Elsa Ybarra, Board staff.

3. Special Order of Business - 9:05 a.m.

(A) Petition for Termination of Probation – Bonnie Yen, PT

(B) Petition for Termination of Probation – Vivian Eisenstadt, PT

After submission of the matters, the Board will convene in CLOSED SESSION to deliberate on the petitions pursuant to Government Code section 11126(c)(3).

4. Closed Session

(A) Pursuant to Government Code section 11126(c)(3), Deliberation on Disciplinary Actions and Decisions to be Reached in Administrative Procedure Act Proceedings

(B) Pursuant to Government Code section 11126(a)(1), Evaluation of Executive Officer

29 **5. Reconvene Open Session**

30 The Board didn't reconvene into open session since they remained in closed session
31 until 8:00 p.m.
32

33 **6. Review and Approval of August 24 & 25, 2016, October 25, 2016, November 16 &**
34 **17, 2016, November 28, 2016 and February 8, 2017 Meeting Minutes – Brooke**
35 **Arneson**
36

37 • **August 24 & 25, 2016**
38

39 Ms. Alviso requested page 13, the first line of the paragraph starting with line 136
40 be corrected to read, "Dr. Drummer commented that the Board has heard during
41 testimony in previous hearings, from probationers, that the employer of an
42 employee on probation has received notice that the employer can no longer be
43 an approved provider by the insurance company while the employee was on
44 probation."
45

46 **MOTION:** To approve the minutes as amended.
47

48 **M/S:** Rabena-Amen/Watkins
49

50 **VOTE:** 6-0 Motion carried
51

52 • **October 25, 2016**
53

54 Ms. Alviso expressed concern with page 20, line 73 in that the depiction of the
55 discussion regarding the issues surrounding retired license status wasn't
56 complete. Discussion pursued and it was agreed the motion should read, "the
57 Board requested staff to provide additional draft language to address either
58 utilizing the newly enacted general provision in Business and Professions Code
59 (BPC) 464 and repeal the existing statutory language in BPC 2648.7, or to edit
60 the existing statutory authority for future consideration of regulation."
61

62 **MOTION:** To approve the minutes as amended.
63

64 **M/S:** Alviso/Drummer
65

66 **VOTE:** 6-0 Motion carried
67

68 • **November 16 & 17, 2016**
69

70 Ms. McMillian pointed out that her name was misspelled on page 27, lines 132
71 and 171. Ms. Alviso questioned why there was nothing recorded under agenda
72 item #15. Mr. Kaiser responded there was no outcome; therefore, there was

nothing to record. Ms. Alviso suggested including that the report was reviewed and there was no outcome. Ms. Rabena-Amen requested the vote count be recorded on page 28, line 176.

MOTION: To approve the minutes as amended.

M/S: Watkins/Dominguez

VOTE: 6-0 Motion carried

- **November 28, 2016**

Ms. Welch requested a comma be inserted after “November 16-17, 2016” on page 30, line 69.

MOTION: To approve the minutes as amended.

M/S: Alviso/Watkins

VOTE: 6-0 Motion carried

- **February 8, 2017**

Ms. Alviso commented there was only one presenter noted on page 33, line 75 while there was an additional presenter. Mr. Kaiser replied, it was Gloria Castro, Deputy Attorney General and she’ll be added to the minutes for her contribution to the presentation.

MOTION: To approve the minutes as amended.

M/S: Watkins/Dominguez

VOTE: 6-0 Motion carried

7. President’s Report – Alicia Rabena-Amen

(A) 2017 Adopted Meeting Calendar

Dr. Dominguez advised the August 23rd date would be a challenge due to his students’ schedule. Mr. Kaiser proposed moving the meeting to August 16 and 17, 2017. All other members indicated the new dates would work with their schedule. Later Mr. Kaiser advised DCA’s HQ1 hearing room was available and Sacramento State University has offered to host the Board as well, so either option may be viable for the

116 August meeting. Dr. Drummer requested the CPTA Annual Conference on September
117 16 and 17, 2017 in San Diego be added to the 2017 calendar.

118
119 Before adjournment Mr. Kaiser reported Sacramento State University would be able to
120 host the meeting on August 16 and 17, 2017.

121
122 **MOTION:** Adopt the 2017 meeting calendar as amended.

123
124 **M/S:** Dominguez/Watkins

125
126 **VOTE:** 6-0

127
128 (B) 2018 Proposed Meeting Calendar

129
130 Dr. Dominguez expressed concern with the August meeting dates for 2018 and Dr.
131 Drummer requested the APTA conference be added to the calendar. Ms. Rabena-
132 Amen questioned the exam dates and Mr. Kaiser advised they hadn't yet received the
133 2018 dates. All things considered the calendar will be revisited at the next meeting.

134
135 **8. Discussion and Possible Board Action for the Increase in Board Level and**
136 **Exempt Status of the Executive Officer – Alicia Rabena-Amen**

137
138 The Board discussed the denial of the Board's request for an increase in the Board's
139 Executive Officer from Level O to Level L. Ms. Rabena-Amen questioned if there was
140 an explanation received of why it was denied and Mr. Kaiser replied, there was not.

141
142 **MOTION:** To charge Mr. Kaiser with investigating, as much to the degree that he
143 can, the reason for the denial and what needs to be achieved in order to
144 be successful with the Board's directive to employ an Executive Officer not
145 just for management of the Board but at the true level of which is
146 accomplished.

147 **M/S:** Drummer/Dominguez

148
149 **VOTE:** 6-0 Motion carried.

150
151 **9. Executive Officer's Report – Jason Kaiser**

152
153 Mr. Kaiser highlighted a few events such as the attendance by Sarah Conley,
154 Application Services Manager and himself at the CPTA Student Conclave in Fresno.
155 While there they received requests to present by Mt. St. Mary's College, Loma Linda
156 University and the University of St. Augustine. He also announced the release of the
157 new Study Guide. Dr. Drummer requested a description of the document be contained
158 within the document. Mr. Kaiser replied it will be called the Reference Guide in the
159 future and will indicate it contains all laws and regulations governing the practice of
160 physical therapy. He also mentioned Veterinary Medical Board (VMB) adopted the

161 recommendation of the Animal Rehabilitation Task Force; however, Ms. DeFoe
162 indicated the VMB did not approve of the direct and immediate supervision of the
163 physical therapist by the veterinarian without a premises permit for physical therapy on
164 site. Lastly, Mr. Kaiser addressed outreach efforts and members had suggestions for
165 enhancements.
166

167 **10. Discussion and Possible Board Action Regarding Sunset Review Report**
168 **Pursuant to Business and Professions Code Section 2602 – Jason Kaiser**

169 (A) 30-Day Response to Committee Recommendations
170

171 The members reviewed the Board's prepared response to the Committee's
172 recommendations. Mr. Kaiser and the Board agreed the favorable outcome of the
173 hearing was not only a reflection of the well prepared report but the Board's work in its
174 entirety and its respect for the process.
175

176 **11. Board Member Training – Jason Kaiser**

177 (A) Council on Licensure, Enforcement and Regulation (CLEAR) - Roles and
178 Responsibilities of a Board Member
179

180 The Board found the training to be valuable and applicable to their roles and
181 responsibilities. They encouraged further training at future meetings.
182

183 **12. Recess**
184

185 The Board recessed at 8:00 p.m.
186

187 **Thursday, May 25th**
188

189 **13. Call to Order - 9:00 a.m.**
190

191 **14. Roll Call and Establishment**

192 The Board reconvened at 9:01 a.m. All members were present except Katarina Eleby
193 and a quorum was established. Also present at the meeting were Tara Welch, Legal
194 Counsel; Jason Kaiser, Executive Officer; Sarah Conley and Elsa Ybarra, Managers;
195 Brooke Arneson, Carl Nelson and Monny Martin, Board staff.
196

197 **15. Closed Session**

198 (A) Pursuant to Government Code section 11126(a)(1),
199 Evaluation of Executive Officer
200

201 **16. Reconvene Open Session**
202
203

17. Consumer and Professional Associations and Intergovernmental Relations Reports

(A) Federation of State Boards of Physical Therapy (FSBPT)

There was no representative from the FSBPT present; however, Mr. Kaiser reported he recently had a conversation with FSBPT regarding Alternate Pathway which establishes eligibility by the exam vendor and affords the applicant to take and pass the examination before applying for licensure. It appeared that because the Board cannot adhere to the eligibility requirements, (six time lifetime ban; two low score limit; Coursework Tool 6; and, TOEFL - which the Board will shortly have the authority to comply) the Board will not be able to offer Alternate Pathway as a product at this time. Mr. Kaiser further advised he didn't foresee any negotiations regarding this issue in the near future. The Board questioned whether that meant the Board would maintain its current process of determining applicant eligibility prior to exam registration.

Ms. Rabena-Amen encouraged members and staff to share information and experiences gained from attending meetings of the FSBPT. Mr. Kaiser shared he serves on the Continuing Competency Committee and their current focus. He solicited feedback from members on the FSBPT's Board member training and how it compared to DCA's training. Mr. Kaiser further reported on the Licensure Compact and their setting standards of best practices. He added that much of their standards the Board has already implemented.

(B) Department of Consumer Affairs (DCA) – Executive Office

Dean R. Grafilo introduced himself as the newly appointed Director of the Department of Consumer Affairs. He advised his prior experiences had been as the Commissioner of the Athletic Commission, Lobbyist for the California Medical Association and Chief of Staff for the California State Assembly. The Board welcomed Mr. Grafilo and Mr. Kaiser invited him to attend the upcoming staff meeting to introduce himself.

(C) California Physical Therapy Association (CPTA)

Tameka Island, Executive Associate Professional Affairs indicated there was nothing new of particular interest to report but she wanted to extend the invitation for participation in the Annual Conference scheduled for September 16 and 17, 2017 in San Diego. Mr. Kaiser responded the PTBC would be present.

18. Legislation Report – Brooke Arneson

Ms. DeFoe spoke to AB 387 and expressed concern with the proposal of payment of minimum wage for interns. The bill would significantly impact internship opportunities in one of two ways either 1) there would no longer be clinical internship sites to place

students or 2) the programs would increase their tuition to cover the costs. Ms. DeFoe asked the Board take a position on the bill since she considered it an impact to consumers. She further reported it's currently sitting in suspense but she's not sure where it will end up. Mr. Kaiser suggested waiting to see where the bill ends up before taking a position.

Ms. Arneson reported on the status of the legislative bills included in the agenda.

Dr. Drummer questioned the status of AB 1510, he thought it was withdrawn from committee because it wasn't going to pass and could potentially come back as a two year bill. Mr. Kaiser replied it was a possibility.

Dr. Alviso if it was appropriate to take a position on AB 1706; and, if so should the Board schedule a separate meeting.

(A) 2017/18 Legislative Session Summary

- i. AB 12 (Cooley) State Government: Administrative Regulations: Review
- ii. AB 77 (Fong) Regulations: Effective Dates and Legislative Review
- iii. AB 149 (Jones-Sawyer) Criminal Procedure: Disclosure: Felony Conviction Consequences
- iv. AB 208 (Eggman) Deferred Entry of Judgment: Pretrial Diversion
- v. AB 349 (McCarty, Gonzalez Fletcher, Nazarian) Civil Service: Preference: Special Immigrant Visa Holder
- vi. AB 387 (Thurmond) Minimum Wage: Health Professionals: Interns
- vii. AB 505 (Caballero) Physicians and Surgeons: Probation
- viii. AB 508 (Santiago) Health Care Practitioners: Student Loans
- ix. AB 706 (Patterson) Medical Board of California: Licenses
- x. AB 767 (Quirk-Silva) Master Business License Act
- xi. AB 1005 (Calderon) Professions and Vocations: Fines: Relief
- xii. AB 1278 (Low) Contractor Licensing: Judgment Debtor Prohibition: Final Judgment: Definition
- xiii. AB 1510 (Dababneh) Athletic Trainers
- xiv. AB 1706 (Committee on Business and Professions) Healing Arts: Chiropractic Practice: Occupational Therapy: Physical Therapy
- xv. SB 27 (Morrell) Professions and Vocations: Licenses: Military Service
- xvi. SB 572 (Stone) Healing Arts Licensees: Violations: Grace Period

19. Rulemaking Report – Brooke Arneson

(A) 2017 Rulemaking Update

Ms. Arneson reported on the status of the proposed regulations in progress. She announced the regulatory proposal on *Requirements for Graduates from Non-Accredited Programs: Test of English as a Foreign Language (TOEFL)* was approved by the Office of Administrative Law and filed with the Secretary of State on

May 8, 2017. The regulation will become effective on July 1, 2017. Additionally she reported that section 100 changes, changes without impact, had been filed with OAL earlier this month.

(B) Discussion of Issues and Possible Board Action Regarding Satisfactory Documentary Evidence of Equivalent Degree for Licensure as a Physical Therapist or Physical Therapist Assistant; Clinical Service Requirements for Foreign Educated Applicants; and Criteria for Approval of Physical Therapy Facilities to Supervise the Clinical Service of Foreign Educated Applicants; Proposal to Add Section 1398.26.6 and Amend Sections 1398.26.1, and 1398.26.5, of Article 2, and Section 1398.38 of Article 3 of Division 13.2, Title 16 of the California Code of Regulations

Ms. Arneson advised there were a couple of typos and the language which was included in the agenda book inadvertently omitted the introductory paragraph; therefore, she presented the modified language as a hand out.

Dr. Alviso indicates it's not clear "who" chooses whether to use Coursework Tool (CWT) 6, the credential evaluation service or the applicant?

Ms. Welch advises the word "educational" should be "educated" in subsection (a) line two, reading ...the credential evaluation services will evaluate foreign educated ~~educational~~ credentials....

Ms. Rabena-Amen questioned the advantage to the option? Mr. Kaiser advised that if an applicant becomes licensed in another state and that state requires CWT 6, the Board wouldn't want to deny the applicant for not being evaluated on one of the retro tools.

Ms. Welch concurs with Dr. Alviso's observation the language as written affords the credential evaluation service to make the determination of whether to use CWT 6. It was suggested that removing the word "either" from line three may address the concern of the credential evaluation service making the determination. FSBPT's credential evaluation service, FCCPT, could opt to no longer evaluate credentials based on the retro tools and in that case the applicant can choose from three other credential evaluation services.

Dr. Kaiser recommends striking the word "either" and the word "or" and the language following to the end of the sentence. Ms. Conley commented she found the language confusing since CWT 5 doesn't have an end date and CWT 6 doesn't have a beginning date. Mr. Kaiser then suggested adding language to the beginning of each CWT clarifying which period of time each CWT applies too. Ms. Welch advised the Board the changes were becoming substantive and recommended the Board afford staff time to work with language and bring it back for Board review at a later date. Additionally, there were two areas of clarification required of FSBPT: 1) whether or not there would be an end date to CWT 5; and, 2) the exact revision date

of CWT 6. Dr. Alviso suggested when staff amends proposed language the issue of CWT 6 being a higher standard in general.

(C) Discussion of Issues and Possible Board Action Regarding Uniform Licensing Examinations and California Law Examination Minimum Passing Scores; Proposal to Amend Section 1398.28 of Article 2, Division 13.2, Title 16 of the California Code of Regulations

Ms. Rabena-Amen suggested the Board consider the use of the Performance Evaluation Tool (PET) developed by the FSBPT specifically for an entry level foreign educated physical therapist. The Board will table the regulatory package on sections 1398.26.5, 1398.26.6 and 1398.27 until the FSBPT can address the Board on the PET.

Ms. Arneson presented the Board with the proposed amendments to 1398.28 regarding setting the pass point for the National Physical Therapy Examinations. Mr. Kaiser introduced Heidi Lincer from DCA's Office of Professional Examination Services (OPES). She recommended not including the California Law Examination (CLE) in the language since the Board would then be required to work with the FSBPT to set the pass point on the CLE when historically the Board has worked with OPES.

Ms. Welch questioned the why BPC section 2638 is included in the reference section. It is in her opinion it doesn't apply and shouldn't be included. The Board accepted her recommendation and will strike it from the reference.

MOTION: I move that we approve the proposed text for noticing a 45-day comment period, and direct staff to take all steps necessary to initiate the formal rulemaking process. If no adverse comments are received during the 45-day comment period and no hearing is requested, delegate to the Executive Officer the authority to adopt the proposed regulatory changes as modified and make any technical or non-substantive changes that may be required in completing the rulemaking file.

M/S: Alviso/Rabena-Amen

VOTE: 6-0

20. Administrative Services Report

(A) Budget – *Carl Nelson*

Mr. Nelson directed the Board to the revenue and expenditure reports included in the agenda materials and added the Board could potentially revert 9% of its budget back

into its Fund. He further added a normal reversion would be 2 or 3%. This reversion is largely due to a decrease in expenditures and an increase in fees.

21. Application Report – Sarah Conley

Ms. Conley pointed out the data is year to date thru quarter three which does not include April. She also reported that some data is from the old legacy system and some from the conversion to BreEZe; however this will no longer happen after July 1st and the data reported in November will be exclusively from BreEZe. She further reported there was a 30% increase in productivity but there also was a 30% decrease in personnel impacting staff's ability to meet established timelines.

22. Licensing Services Report – Sarah Conley

She reported returned mail and duplicate license requests as a challenging issue.

(A) Continuing Competency Report

Ms. Conley reported on the data included in her report.

(B) Discussion and Possible Board Action on Removal of Continuing Competency Approval Agency Recognition

Ms. Conley explained the reasons for withdrawing recognition of the following approval agencies.

i. ABC Pilates

MOTION: To approve ABC Pilates' request for the Board to withdraw recognition.

M/S: Dominguez/Alviso

VOTE: 6-0 Motion carried

ii. Advanced Training Specialists

MOTION: To approve Advanced Training Specialists' request for the Board to withdraw recognition.

M/S: Watkins/McMillian

VOTE: 6-0 Motion carried

iii. Color Seven Education LLC

MOTION: To approve Color Seven Education LLC's request for the Board to withdraw recognition.

M/S: Alviso/Watkins

VOTE: 6-0 Motion carried

iv. Global Augmentative Communication Innovators

MOTION: To approve Global Augmentative Communication Innovators' request for the Board to withdraw recognition.

M/S: McMillian/Watkins

VOTE: 6-0

23. Consumer Protection Services Report – Elsa Ybarra

Ms. Phelps presented the report on behalf of Ms. Ybarra and pointed out that the attachment A-1 was not available which is why it's not included. The fourth section of attachment A-2 "Investigations Aging" are incorrect. They should read as 49% should be 60% and the following should be 21%, 7%, 3% and 4%.

24. Probation Monitoring Report – Monny Martin

Mr. Martin presented his report which included those who were determined to be clinically inappropriate for the rehabilitation program. Mr. Watkins questioned how it was determined. Mr. Martin explained the clinical diagnostic evaluation process. Mr. Kaiser suggested a presentation in August by Maximus, the Board's contracted rehabilitation program. In response to an inquiry posed by Dr. Dominguez, Mr. Martin responded eleven of the eighteen probationers who are tolling indicated they've left the profession. Dr. Drummer suggested probationers be advised that pro bono work could be considered as serving probation time.

25. Public Comment on Items Not on the Agenda

Please note that the Board may not discuss or take action on any matter raised during this public comment section that is not included on this agenda, except to decide whether to place the matter on the agenda of a future meeting. [Government Code sections 11125, 11125.7(a).]

There was no public comment.

467 **26. Agenda Items for Future Meeting –**

468 August 23 & 24, 2017
469 Department of Consumer Affairs
470 Hearing Room
471 2005 Evergreen Street
472 Sacramento, CA 95815
473

474 Ms. Rabena-Amen requested including taking positions on legislative bills as an action item on
475 future agendas. The Board considered the possibility of a teleconference before the August
476 meeting if necessary to take a position on proposed legislative bills.
477

478 **27. Adjournment**

479 The meeting adjourned at 4:34 p.m.
480

Physical Therapy Board of California

Adopted 2017 Meeting Calendar

January							February							March							April						
Su	M	T	W	Th	F	S	Su	M	T	W	Th	F	S	Su	M	T	W	Th	F	S	Su	M	T	W	Th	F	S
1	2	3	4	5	6	7				1	2	3	4				1	2	3	4							1
8	9	10	11	12	13	14	5	6	7	8	9	10	11	5	6	7	8	9	10	11	2	3	4	5	6	7	8
15	16	17	18	19	20	21	12	13	14	15	16	17	18	12	13	14	15	16	17	18	9	10	11	12	13	14	15
22	23	24	25	26	27	28	19	20	21	22	23	24	25	19	20	21	22	23	24	25	16	17	18	19	20	21	22
29	30	31					26	27	28	29	30	31		26	27	28	29	30	31		23	24	25	26	27	28	29
																					30						

May							June							July							August						
Su	M	T	W	Th	F	S	Su	M	T	W	Th	F	S	Su	M	T	W	Th	F	S	Su	M	T	W	Th	F	S
	1	2	3	4	5	6					1	2	3							1			1	2	3	4	5
7	8	9	10	11	12	13	4	5	6	7	8	9	10	2	3	4	5	6	7	8	6	7	8	9	10	11	12
14	15	16	17	18	19	20	11	12	13	14	15	16	17	9	10	11	12	13	14	15	13	14	15	16	17	18	19
21	22	23	24	25	26	27	18	19	20	21	22	23	24	16	17	18	19	20	21	22	20	21	22	23	24	25	26
28	29	30	31				25	26	27	28	29	30		23	24	25	26	27	28	29	27	28	29	30	31		
														30	31												

September							October							November							December						
Su	M	T	W	Th	F	S	Su	M	T	W	Th	F	S	Su	M	T	W	Th	F	S	Su	M	T	W	Th	F	S
					1	2	1	2	3	4	5	6	7				1	2	3	4						1	2
3	4	5	6	7	8	9	8	9	10	11	12	13	14	5	6	7	8	9	10	11	3	4	5	6	7	8	9
10	11	12	13	14	15	16	15	16	17	18	19	20	21	12	13	14	15	16	17	18	10	11	12	13	14	15	16
17	18	19	20	21	22	23	22	23	24	25	26	27	28	19	20	21	22	23	24	25	17	18	19	20	21	22	23
24	25	26	27	28	29	30	29	30	31					26	27	28	29	30			24	25	26	27	28	29	30
																					31						

January							February							March							April						
1	New Year's Day						8	PTBC Meeting						31	César Chávez Day						5	PTA NPTE					
12	PTA NPTE							USC, Los Angeles, CA													16	Easter					
16	Martin Luther King Jr						15-18	APTA Combined													26	PT NPTE					
26	PT NPTE							Sections Meeting																			
							20	President's Day																			

May							June							July							August						
14	Mother's Day						9-11	FSBPT Regulatory						4	Independence Day						23-24	PTBC Meeting					
24-25	PTBC Meeting							Training						6	PTA NPTE							Sacramento, CA					
	Sacramento, CA							Alexandria, VA						18-19	PT NPTE												
29	Memorial Day						18	Father's Day						29-30	FSBPT Leadership												
							21-24	APTA Conference							Issues Forum												
								Boston, MA							Alexandria, VA												

September							October							November							December						
4	Labor Day						3	PTA NPTE						3-5	FSBPT Annual						25	Christmas					
16-17	CPTA Annual						25	PT NPTE							& Delegate Assembly												
	Conference						31	Halloween							Santa Ana Pueblo,												
	San Diego, CA													11	Veteran's Day												
														15-16	PTBC Meeting												
															Bay Area, CA												
														23	Thanksgiving												

Physical Therapy Board of California

Proposed 2018 Meeting Calendar

[illegible][illegible]

							1		1						4	5	6					1						1		
2	3	4	5	6	7	8		7	8	9	10	11	12	13		4	5	6	7	8	9	10		2	3	4	5	6	7	8
9	10	11	12	13	14	15		14	15	16	17	18	19	20		11	12	13			16	17		9	10	11	12	13	14	15
16	17	18	19	20	21	22		21	22	23		25	26	27		18	19	20	21	22	23	24		16	17	18	19	20	21	22
23	24	25	26	27	28	29		28	29	30	31					25	26	27	28	29	30		23	24	25	26	27	28	29	
30																							30	31						

1	New Year's Day			31	César Chávez Day	1	Easter
15	Martin Luther King Jr	19	President's Day			25	PT NPTE
24	PT NPTE	21-25	APTA Combined Sections Meeting New Orleans, LA				

May		June		July		August	
13	Mother's Day	17	Father's Day	4	Independence Day	22-23	PTBC Meeting
23-24	PTBC Meeting Sacramento, CA			10	PTA NPTE		Sacramento, CA
				24-25	PT NPTE		
28	Memorial Day						

September		October		November		December	
3	Labor Day	3	PTA NPTE	11	Veteran's Day	25	Christmas
		24	PT NPTE	14-15	PTBC Meeting		
		31	Halloween		TBD, Bay Area, CA		
				22	Thanksgiving		



Physical Therapy Board of California

BUSINESS, CONSUMER SERVICES, AND HOUSING AGENCY - GOVERNOR EDMUND G. BROWN JR.

Physical Therapy Board of California

2005 Evergreen St. Suite 1350, Sacramento, California 95815

Phone: (916) 561-8200 Fax: (916) 263-2560

Internet: www.ptbc.ca.gov



DATE: August 4, 2017

TO: Physical Therapy Board of California (Board)

SUBJECT: Executive Officer's Report

This report is to update you on the current status of the Board's operations.

ADMINISTRATIVE SERVICES – The Administrative Services Program has completed the recruitment process for the Staff Services Analyst (SSA) position within the Application Services Unit, and will be announcing its selection soon. The Administrative Services Program has also completed the recruitment process for the Staff Services Analyst (SSA) in the Administrative Services Program. We would like to congratulate PTBC's own, Araceli Strawmier. Mrs. Strawmier has served the PTBC since 2015 in the Administrative Services Program and will now serve as the Board Relations Analyst handling a variety of different types of services to Board members.

Please refer to Agenda Item 20(A) for a detailed Budget report.

APPLICATIONS & LICENSING – Please refer to Agenda Item 21 and 22 for a detailed report.

CONSUMER PROTECTION SERVICES– Please refer to Agenda Item 23 for a more detailed report.

ANIMAL REHABILITATION– At its April 19-20, 2017 meeting in Oakland, the Veterinary Medical Board (VMB) reviewed each of the recommendations proposed by the Animal Rehabilitation Task Force. The VMB has determined there are several policy considerations that need to be addressed prior to moving forward with a statutory or regulatory proposal. These considerations include; supervision of a Veterinary Assistant (VA) performing Animal Physical Rehabilitation (APR), patient responsibility and whether one veterinarian's referral of the patient to a veterinarian at a separate veterinary premise for APR constitutes as a transfer of the veterinarian-client-patient relationship. Considerations relevant to physical therapy include; A physical therapist who does not hold a certification in APR; the PT would be considered a VA, and depending upon what is ultimately established for a VA, there may be disparity in what should or should not be authorized for a VA verses a non-certified PT in a range setting.

Also, there is still the question of education and training. There are APR certifications for PTs and now specialty recognition for Registered Veterinary Technicians (RVT) that have been a topic of discussion before the VMB. However, there has been no determination or thorough evaluation of whether advanced certifications and specialty recognitions are or should be recognized by the VMB as advanced training for the purposes of providing APR. The VMB has determined that examining the merits of the advanced training will take considerable time to gather all the relevant course work and clinical training information. The VMB may consider delegating this assignment to the Multidisciplinary Advisory Committee (MDC) as a priority to begin this research.

DCA INTERNAL AUDIT – On August 9, 2017, Alicia Johnson, auditor with Department of Consumer Affairs Internal Audit Office, reported that the audit of the PTBC has been completed. The findings

report should be made available within 30-45 days. The audit began on July 1st, 2016 and staff has worked diligently with the Internal Audit Office. While the Internal Audit Office has no direct responsibility or authority over any of the activities or operations, they may provide the PTBC with assistance and recommendations concerning internal controls in the development or redesign of systems or operational activities. The scope of the audit entailed; evaluation and reporting of internal control systems, review of operations, policies, and procedures for effectiveness and efficiencies, recommendation of improvements to address audit findings, monitoring the status of audit findings and consultations at the request of management.

OUTREACH – Please refer to Agenda Item 20(B) for a detailed Outreach report.



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Briefing Paper

Date: August 2, 2017

Prepared for: PTBC Members

Prepared by: Brooke Arneson

Subject: Legislation Report

Purpose:

To provide an update on the 2017/18 Legislative session.

Attachments:

1. [2017 Legislative Calendar](#)
 2. [Definition of the Board's Legislative Positions](#)
 3. [2017/18 Legislative Summary](#)
-

Background and Update:

The 2017 Legislative calendar is included in the meeting materials for your reference, along with a copy of the Board's Legislative positions taken from the PTBC's Board Member Administrative Manual.

As noted on the calendar, the Legislature reconvened from Summer Recess on August 21st and September 8th is the last day to amend on the Floor. October 15th is the last day for the Governor to sign or veto bills passed by the Legislature on or before September 15th and in the Governor's possession after September 15th. All statutes will take effect January 1st 2018.

In addition, a 2017/18 Legislative summary is included which notes all bills from the current Legislative session that could potentially impact Physical Therapy practice, regulation or the operation of the Physical Therapy Board. To aid in the consideration of the bills noted on the agenda, a bill analysis and text for bills of interest is included.

Action Requested:

No action is needed. This Legislative report is for informational purposes only.

2017 TENTATIVE LEGISLATIVE CALENDAR
COMPILED BY THE OFFICE OF THE ASSEMBLY CHIEF CLERK
Revised 11-16-16

DEADLINES

Table with 8 columns (Wk., S, M, T, W, TH, F, S) and 5 rows for January.

Table with 8 columns (Wk., S, M, T, W, TH, F, S) and 5 rows for February.

Table with 8 columns (Wk., S, M, T, W, TH, F, S) and 5 rows for March.

Table with 8 columns (Wk., S, M, T, W, TH, F, S) and 6 rows for April.

Table with 8 columns (Wk., S, M, T, W, TH, F, S) and 6 rows for May.

Jan. 1 Statutes take effect (Art. IV, Sec. 8(c)).
Jan. 4 Legislature reconvenes (J.R. 51(a)(1)).
Jan. 10 Budget Bill must be submitted by Governor (Art. IV, Sec. 12(a)).
Jan. 16 Martin Luther King, Jr. Day.
Jan. 20 Last day to submit bill requests to Office of Legislative Counsel.

Feb. 17 Last day for bills to be introduced (J.R. 61(a)(1), J.R. 54(a)).
Feb. 20 Presidents' Day.

Mar. 31 Cesar Chavez Day.

Apr. 6 Spring Recess begins upon adjournment (J.R. 51(a)(2)).
Apr. 17 Legislature reconvenes from Spring Recess (J.R. 51(a)(2)).
Apr. 28 Last day for policy committees to hear and report fiscal bills for referral to fiscal committees (J.R. 61(a)(2)).

May 12 Last day for policy committees to hear and report to the floor nonfiscal bills (J.R. 61(a)(3)).
May 19 Last day for policy committees to meet prior to June 5 (J.R. 61(a)(4)).
May 26 Last day for fiscal committees to hear and report bills to the floor (J.R. 61 (a)(5)). Last day for fiscal committees to meet prior to June 5 (J.R. 61 (a)(6)).
May 29 Memorial Day observed.
May 30-June 2 Floor session only. No committee may meet for any purpose except for Rules Committee and Conference Committees (J.R. 61(a)(7)).

2017 TENTATIVE LEGISLATIVE CALENDAR
COMPILED BY THE OFFICE OF THE ASSEMBLY CHIEF CLERK
Revised 11-16-16

Table with 8 columns (S, M, T, W, TH, F, S) and 6 rows for the month of June, including week numbers and dates.

June 2 Last day to pass bills out of house of origin (J.R. 61(a)(8)). Committee meetings may resume (J.R. 61(a)(9)).

June 15 Budget Bill must be passed by midnight (Art. IV, Sec. 12(c)(3)).

Table with 8 columns (S, M, T, W, TH, F, S) and 7 rows for the month of July, including week numbers and dates.

July 4 Independence Day.

July 14 Last day for policy committees to hear and report fiscal bills for referral to fiscal committees (J.R. 61(a)(10)).

July 21 Last day for policy committees to hear and report bills (J.R. 61(a)(11)). Summer Recess begins upon adjournment, provided Budget Bill has been passed (J.R. 51 (a)(3)).

Table with 8 columns (S, M, T, W, TH, F, S) and 6 rows for the month of August, including week numbers and dates.

Aug. 21 Legislature reconvenes from Summer Recess (J.R. 51 (a)(3)).

Table with 8 columns (S, M, T, W, TH, F, S) and 7 rows for the month of September, including week numbers and dates.

Sept. 1 Last day for fiscal committees to meet and report bills to the Floor (J.R. 61(a)(12)).

Sept. 4 Labor Day.

Sept. 5– 15 Floor session only. No committee may meet for any purpose (J.R. 61(a)(13)).

Sept. 8 Last day to amend on the Floor (J.R. 61(a)(14)).

Sept. 15 Last day for any bill to be passed (J.R. 61(a)(15)). Interim Recess begins on adjournment (J.R. 51(a)(4)).

IMPORTANT DATES OCCURRING DURING INTERIM RECESS

- 2017
Oct. 15 Last day for Governor to sign or veto bills passed by the Legislature on or before Sept. 15 and in the Governor’s possession after Sept. 15 (Art. IV, Sec.10(b)(1)).
- 2018
Jan. 1 Statutes take effect (Art. IV, Sec. 8(c)).
- Jan. 3 Legislature reconvenes (J.R. 51(a)(4)).

**Legislation - Definition of the
Positions Taken by the Physical
Therapy Board Regarding
Proposed Legislation**

(Board Policy)

The Board will adopt the following positions regarding pending or proposed legislation.

Oppose: The Board will actively oppose proposed legislation and demonstrate opposition through letters, testimony and other action necessary to communicate the oppose position taken by the Board.

Oppose, unless amended: The Board will take an opposed position and actively lobby the legislature to amend the proposed legislation.

Neutral: The Board neither supports nor opposes the addition/amendment/repeal 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. The Board staff and members will closely monitor the progress of the proposed legislation and amendments.

Support, if amended: The Board will take a supportive position and actively lobby the legislature to amend the proposed legislation.

Support: The Board will actively support proposed legislation and demonstrate support through letter, testimony and any other action necessary to communicate the support position taken by the Board.

2017/18 Legislative Summary

Bill	Author	Summary	Board's Position	Status	
<u>AB 12</u> 12/5/16)	Cooley, (Coauthors: Calderon, Cunningham)	State Government: Administrative Regulations: Review This bill would require each state agency to, on or before January 1, 2020, review that agency's regulations, identify any regulations that are duplicative, overlapping, inconsistent, or out of date, to revise those identified regulations, as provided, and report to the Legislature and Governor, as specified. The bill would repeal these provisions on January 1, 2021.	No Position	5/26/17	Assembly 2 Year. Assembly Appropriations Committee. Suspense File.
<u>AB 77</u> (Amended 2/7/17)	Fong, (Coauthor: Gallagher)	Regulations: Effective Dates and Legislative Review This bill requires the Office of Administrative Law (OAL) to submit to each house of the Legislature for review, a copy of each major regulation submitted to the Secretary of State. This bill also states that the effective date of a regulation does not apply if the Legislature enacts a statute to override the regulation.	No Position	5/26/17	Assembly 2 Year. Assembly Appropriations Committee. Suspense File.
<u>AB 208</u> (Amended 3/8/17)	Eggman	Deferred Entry of Judgment: Pretrial Diversion This bill would make the deferred entry of judgment program a pretrial diversion program. The bill would make a defendant qualified for the pretrial diversion program if there is no evidence of a contemporaneous violation relating to narcotics or restricted dangerous drugs other than a violation of the offense that qualifies him or her for diversion, the charged offense did not involve violence, there is no evidence within the past 5 years of a violation relating to narcotics or restricted dangerous drugs other than a violation that	No Position	7/12/17	Senate Appropriations Committee.

2017/18 Legislative Summary

Bill	Author	Summary	Board's Position	Status	
		<p>qualifies for the program, and the defendant has no prior conviction for a serious or violent felony within 5 years prior to the alleged commission of the charged offense. Under the pretrial diversion program created by this bill, a qualifying defendant would enter a plea of not guilty, and proceedings would be suspended in order for the defendant to enter a drug treatment program for 6 months to one year, or longer if requested by the defendant with good cause. The bill would require the court, if the defendant does not perform satisfactorily in the program or is convicted of specified crimes, to terminate the program and reinstate the criminal proceedings. The bill would require the criminal charges to be dismissed if the defendant completes the program.</p>			
AB 349 (Amended 6/14/17)	McCarty, Gonzalez Fletcher, and Nazarian	<p>Civil Service: Preference: Special Immigrant Visa Holder</p> <p>Existing provisions of the State Civil Service Act require that, whenever any veteran, widow or widower of a veteran, or spouse of a 100% disabled veteran, achieves a passing score on an examination, he or she be ranked in the top rank of the resulting civil service eligibility list.</p> <p>This bill would require a person who assisted the United States military and was issued a specified special immigrant visa and who achieves a passing score on an entrance examination to be ranked in the top of the resulting eligibility list unless a veteran, widow, or widower of a veteran, or the spouse of a 100% disabled veteran is in the top rank</p>	No Position	7/14/17	Senate 2 Year. Last Location was Senate Judiciary Committee. May be acted upon Jan 2018.

2017/18 Legislative Summary

Bill	Author	Summary	Board's Position	Status	
<u>AB 387</u> 5/30/17)	Thurmond	<p>Minimum Wage: Health Professionals: Interns</p> <p>This bill would expand the definition of "employer" for purposes of these provisions to include a person who directly or indirectly, or through an agent or any other person, employs or exercises control over the wages, hours, or working conditions of a person engaged in a period of supervised work experience longer than 100 hours to satisfy requirements for licensure, registration, or certification as an allied health professional, as defined.</p> <p>Because this bill would expand the definition of a crime, it would impose a state-mandated local program. 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</p>	No Position	6/1/17	Assembly. Ordered to Inactive File at the Request of Assembly Member Thurmond.
<u>AB 505</u> (Amended 3/27/17)	Caballero		No Position	7/14/17	

2017/18 Legislative Summary

Bill	Author	Summary	Board's Position	Status	
		sexual act or sexual exploitation.			
AB 508 (Introduced 2/13/17)	Santiago	Health Care Practitioners: Student Loans This bill repeals the authority for a licensing board under the DCA, as defined, to cite and fine a licensed healthcare practitioner or deny an initial an initial license application or renewal for a healing arts license if the applicant or licensee is in default on a federal health education loan.	No Position	6/27/17	Senate Third Reading.
AB 706 (Introduced 2/15/17)	Patterson	Medical Board of California: Licenses Requires that all physician and surgeon's certificates, certificates to practice podiatric medicine, registrations of spectacle lens dispensers and contact lens dispensers, and certificates to practice midwifery would expire on the last day at the end of the two-year period for which the license was issued rather than at the end of the licensee's birth month.	No Position	4/28/17	Assembly 2 Year. Failed deadline pursuant to rule 61(a)(2). Last Location was Assembly Business and Professions Committee.
AB 767 (Introduced 2/15/17)	Quirk-Silva	Master Business License Act This bill would create within the Governor's Office of Business and Economic Development, or its successor, a business license center to develop and administer a computerized master business license system to simplify the process of engaging in business in this state. The bill would set forth the duties and responsibilities of the business license center. The bill would require each state agency to cooperate and provide reasonable assistance to the office to implement these provisions. This bill includes additional provisions.	No Position	5/26/17	Assembly 2 Year. Failed deadline. Last Location was Assembly Appropriations Committee. May be acted upon Jan 2018.

2017/18 Legislative Summary

Bill	Author	Summary	Board's Position	Status	
AB 1005 (Amended 5/2/17)	Calderon	Professions and Vocations: Fines: Relief This bill, except with regard to healing arts licensees, would instead require a citation containing an order to pay an administrative fine to contain an order of abatement fixing a period of no less than 30 days for abatement of the violation before the administrative fine becomes effective.	No Position	5/26/17	Assembly 2 Year. Failed Deadline. Last Location was Assembly Appropriations Committee. May be acted upon Jan 2018.
AB 1510 (Introduced 2/17/17)	Dababneh	Athletic Trainers This bill establishes the Athletic Training Practice Act and establishes the Athletic Trainer Licensing Committee under the California Board of Occupational Therapy for the licensure and regulation of athletic trainers.	No Position	4/28/17	Assembly 2 Year. Failed Deadline. Last location was Assembly Committee on Business and Professions.
AB 1706 (Amended 7/5/17)	Committee on Business and Professions	Healing Arts: Occupational Therapy: Physical Therapy This bill extends the operation of the California Board of Occupational Therapy (CBOT), the operation of the Physical Therapy Board of California (PTBC) and the PTBC's authority to appoint an executive officer and other personnel until January 1, 2022. This bill would also repeal BPC Section 2648.7 relating to retired license status as of January 1, 2019. This bill would allow an applicant to demonstrate proficiency in English by achieving a score specified on the TOEFL as prescribed by regulation and also exempt an applicant from this requirement who has been awarded a bachelor's degree or higher in a physical therapist educational program from a college, university, or professional training school in Australia, any part of Canada other than Quebec, Ireland, New Zealand, the United Kingdom, the United	No Position	7/11/17	Senate Appropriations Committee.

2017/18 Legislative Summary

Bill	Author	Summary	Board's Position	Status	
		States or an English-speaking country specified by the Board. In addition, this bill would delete the statutory limitation that the various fees for licensure be in an amount that does not exceed the cost of the associated activity. This bill would also repeal the requirement that the board report to the specified committees of the Legislature whenever it increases a fee. In addition, this bill would make a technical change by correcting an erroneous cross reference.			
<u>SB 27</u> (Introduced 4/17/17)	Morrell (Coauthors: Senators Bates, Berryhill, Nguyen, Wilk and Assembly Members Acosta, Bakers, Chavez, Cunningham, Lackey, Mathis, and Patterson)	Professions and Vocations: Licenses: Military Service This bill would require every board within the Department of Consumer Affairs to grant a fee waiver for the application for and the issuance of an initial license to an applicant who supplies satisfactory evidence, as defined, to the board that the applicant has served as an active duty member of the California National Guard or the United States Armed Forces and was honorably discharged. The bill would require that a veteran be granted only one fee waiver, except as specified.	No Position	5/26/17	Senate 2 Year. Failed Deadline. Last Location was Senate Appropriations Committee.
<u>SB 572</u> (Amended 3/27/17)	Stone	Healing Arts Licensees: Violations: Grace Period This bill would prohibit various boards, as defined, within the DCA from taking disciplinary action against, or otherwise penalizing, healing arts licensees who violate those provisions but correct the violations within 15 days and who are not currently on probation at the time of the violations, if the violations did not cause irreparable harm and will not result in irreparable harm if left uncorrected for 15 days.	No Position	4/28/17	Senate 2 Year. Failed Deadline. Last location was Senate Business, Professions and Economic Development Committee.



Physical Therapy Board of California

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September 16, 2015

The Honorable Edmund G. Brown Jr.
Governor of California
State Capitol
Sacramento, CA 95814

Dear Governor Brown,

The Physical Therapy Board of California (Board), at its August meeting voted to oppose both AB 1351 and 1352 as long as the provisions of the bill applied to applicants and or licensees of the Board.

The Board is mandated by Business and Professions Code section 2602.1 that the Board's highest priority is to protect the public. Applicants and licensees who have been arrested for violations involving drugs pose a great concern as many licensees work in positions where they may have access to controlled substances. Licensees who care for patients while under the influence of controlled substances pose a danger to the public.

Under the proposed revisions currently in AB 1351, the Board may never learn about an applicant's entry into a pretrial diversion program for violations of drug offenses. This information about prior acts is essential to the Board in making informed decisions about licensure and provides a level of public protection. Further, the removal of the entry of a guilty plea before entering a drug diversion program will impair the Board's ability to prove in a disciplinary proceeding that a licensee or applicant has engaged in illicit drug activities; it will also impair the Board's ability to consider this information as part of our enforcement activities.

In addition, evidence shows that individuals who may have issues with controlled substances should participate in treatment for a period of time much greater than 6-12 months as specified in your bill.

The Board has a Substance Abuse Rehabilitation Program and monitors licensees in probation with substance abuse issues to ensure licensed practitioners are safe to practice. Licensees who have substance abuse issues are monitored from 3-5 years, which is the average time needed to properly address substance abuse in a program and provide proper public protection before being allowed to practice with an unencumbered license. The Board's Substance Abuse Rehabilitation Program is a key component. Because of the monitoring that it provides, it can often be used to improve public protection while allowing a licensee to practice while they deal with a substance abuse issue. The individual circumstances of each criminal charge are considered in our discipline and licensing decisions. We seek to allow practice if the public is reasonably and properly protected.

The effect of AB 1351 and 1352 would be that the Board would be unable to charge and take action on violations of licensees with potential substance abuse issues. These licensees may be able to practice and could harm vulnerable patients in California. The public and the licensee would not have the benefit of proper monitoring such as the Board's Substance Abuse Rehabilitation Program.

Now, we understand that legislation (AB 1351 and 1352) may soon arrive at your desk asking for your signature. We respectfully ask that you consider a veto of this legislation, without it, the consumer's of California will be adversely impacted if this bill is enacted as currently written.

Thank you for your consideration of our concerns.

Sincerely,

A handwritten signature in blue ink, appearing to be 'JK' followed by a horizontal line.

Jason Kaiser
Executive Officer

Cc: Melinda McClain, Deputy Director of Legislative and Regulatory Review, Department of Consumer Affairs



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Physical Therapy Board of California

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Internet: www.ptbc.ca.gov



September 8, 2015

Assembly Member Susan Talamantes Eggman
California State Assembly
State Capitol, Room 3173
Sacramento, CA 95814

Dear Assembly Member Eggman,

The Physical Therapy Board of California (Board) wishes to respectfully **Oppose Unless Amended, AB 1351 and 1352.**

The Board, at its August meeting voted to oppose both AB 1351 and 1352 as long as the provisions of the bill applied to applicants and or licensees of the Board.

The Board is mandated by Business and Professions Code section 2602.1 that the Board's highest priority is to protect the public. Applicants and licensees who have been arrested for violations involving drugs pose a great concern as many licensees work in positions where they may have access to controlled substances. Licensees who care for patients while under the influence of controlled substances pose a danger to the public.

Under the proposed revisions currently in AB 1351, the Board may never learn about an applicant's entry (even possible multiple entries) into a pretrial diversion program for violations of drug offenses. This information about prior acts is essential to the Board in making informed decisions about licensure and provides a level of public protection. Further, the removal of the entry of guilty plea before entering a drug diversion program will impair the Board's ability to prove in a disciplinary proceeding that a licensee or applicant has engaged in illicit drug activities; it will also impair the Board's ability to consider this information as part of our enforcement activities.

In addition, evidence shows that individuals who may have issues with controlled substances should participate in treatment for a period of time much greater than 6-12 months as specified in your bill.

The Board has a Substance Abuse Rehabilitation Program and monitors licensees in probation with substance abuse issues to ensure licensed practitioners are safe to practice. Licensees who have substance abuse issues are monitored from 3-5 years, which is the average time needed to properly address substance abuse in a program and provide proper public protection before being allowed to practice with an unencumbered license. The Board's Substance Abuse Rehabilitation Program is a key component. Because of the monitoring that it provides, it can often be used to improve public protection while allowing a licensee to

practice while they deal with a substance abuse issue. The individual circumstances of each criminal charge are considered in our discipline and licensing decisions. We seek to allow practice if the public is reasonably and properly protected.

The effect of your bills would be that the Board would be unable to charge and take action on violations of licensees with potential substance abuse issues. These licensees may be able to practice and could harm vulnerable patients in California. The public and the licensee would not have the benefit of proper monitoring such as the Board's Substance Abuse Rehabilitation Program.

The Board of California respectfully submits an oppose unless amended position to AB 1351 and 1352. We thank you for your consideration of the Board's concerns. If additional information is needed, please feel free to contact the Board's Legislative Analyst, Brooke Arneson at (916) 561-8260.

Sincerely,

A handwritten signature in black ink, appearing to read 'Debra J. Alviso', enclosed within a thin black rectangular border.

Debra J. Alviso, PT, DPT
Board President

Cc: Melinda McClain, Deputy Director of Legislative and Regulatory Review, Department of Consumer Affairs



Physical Therapy Board of California

BUSINESS, CONSUMER SERVICES, AND HOUSING AGENCY - GOVERNOR EDMUND G. BROWN JR.

Physical Therapy Board of California

2005 Evergreen St. Suite 1350, Sacramento, California 95815

Phone: (916) 561-8200 Fax: (916) 263-2560

Internet: www.ptbc.ca.gov



Briefing Paper

Date: August 3, 2017

Prepared for: PTBC Members

Prepared by: Brooke Arneson

Subject: Rulemaking Report

Purpose: To update the Board on the status of proposed rulemaking in progress and to provide an update on the rulemaking process.

Attachments:

1. [2016/17 Rulemaking Tracking Form](#)
2. [Updated DCA Rulemaking Process](#)

Background:

At the November 2016 meeting, the Board adopted the 2017 Rulemaking Calendar as required by Government Code (GC) § 11017.6. The rulemaking calendar prepared pursuant to this section sets forth the Board's rulemaking plan for the year and is published by the Office of Administrative Law (OAL) in the California Regulatory Notice Register (Notice Register); the Notice Register is available on OAL's website: http://www.oal.ca.gov/Notice_Register.htm

From the 2017 Rulemaking Calendar, staff developed a rulemaking tracking form on which all rulemaking progress is noted and reported to the Board at its quarterly meetings.

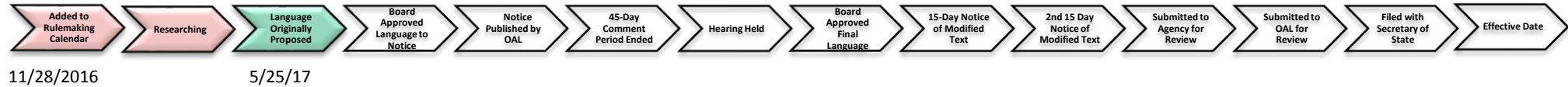
Effective September 7th, 2016 all regulatory packages must be submitted to the Department of Consumer Affairs for Business, Consumer Services, and Housing Agency (Agency) review, prior to publicly noticing with the Office of Administrative Law (OAL). To reflect the updated rulemaking procedure, a copy of the revised DCA Rulemaking process is included.

Action Requested:

No action is requested on presentation of the rulemaking report; however, staff is requesting action which will be addressed during the presentation of agenda item 12(B).

2017 Rulemaking Tracking Form

(2017) Satisfactory Documentary Evidence of Equivalent Degree for Licensure as a Physical Therapist or Physical Therapist Assistant/Coursework Tool

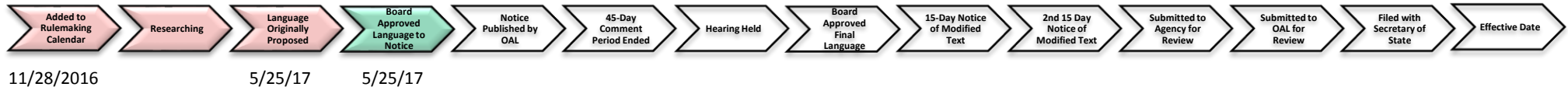


OAL No.:

Notes:

Placed on the 2017 Rulemaking Calendar that was adopted at the Board meeting on November 28, 2016. Proposed regulatory language was presented at the May 2017 Board Meeting. The Board provided feedback and edits to PTBC staff and advised staff to bring the language for Board consideration implementing the Board's recommendations at a future date. PTBC staff is currently working on the proposed language and anticipates providing the language for Board consideration at the November 2017 Board meeting.

(2017) Examination Passing Standard/Setting Examination Score



OAL No.:

Notes:

Placed on the 2017 Rulemaking Calendar that was adopted at the Board meeting on November 28, 2016. Proposed regulatory language was presented at the May 2017 Board Meeting. The Board approved the proposed language and directed PTBC staff to initiate the formal rulemaking process. PTBC staff is currently working on the rulemaking documents and will be submitting to DCA for review soon.

Teal: Current Status Burgundy: Completed

Agenda Item 12(A) – Rulemaking Update

2017 Rulemaking Tracking Form

(2017) License Renewal Exemptions: Disability and Retired License Status



11/28/2016

OAL No.:

Notes:

Placed on the 2017 Rulemaking Calendar that was adopted at the Board meeting on November 28, 2016. PTBC staff is currently working on the proposed language and anticipates providing the language for Board consideration at the November 2017 Board meeting.

(2017) Application and Licensing Regulations, Continuing Competency



11/28/2016

OAL No.:

Notes:

Placed on the 2017 Rulemaking Calendar that was adopted at the Board meeting on November 28, 2016.

Teal: Current Status Burgundy: Completed

Agenda Item 12(A) – Rulemaking Update

2017 Rulemaking Tracking Form

(2017) Unprofessional Conduct



11/28/2016

OAL No.:

Notes:
Placed on the 2017 Rulemaking Calendar that was adopted at the Board meeting on November 28, 2016.

Teal: Current Status Burgundy: Completed

Agenda Item 12(A) – Rulemaking Update

Processing Times

- A rulemaking file must be completed within one year of the publication date of the Notice of Proposed Action. The OAL issues the Notice File Number upon filing the Notice of Proposed Action.
- The DCA is allowed thirty calendar days to review the rulemaking file prior to submission to the Department of Finance (DOF).
- The DOF is allowed thirty days to review the rulemaking file prior to submission to the OAL.
- The OAL is allowed thirty working days to review the file and determine whether to approve or disapprove it. The OAL issues the Regulatory Action Number upon submission of the rulemaking file for final review.
- Pursuant to Government Code section 11343.4, as amended by Section 2 of Chapter 295 of the Statutes of 2012 (SB 1099, Wright), regulation effective dates are as follows:

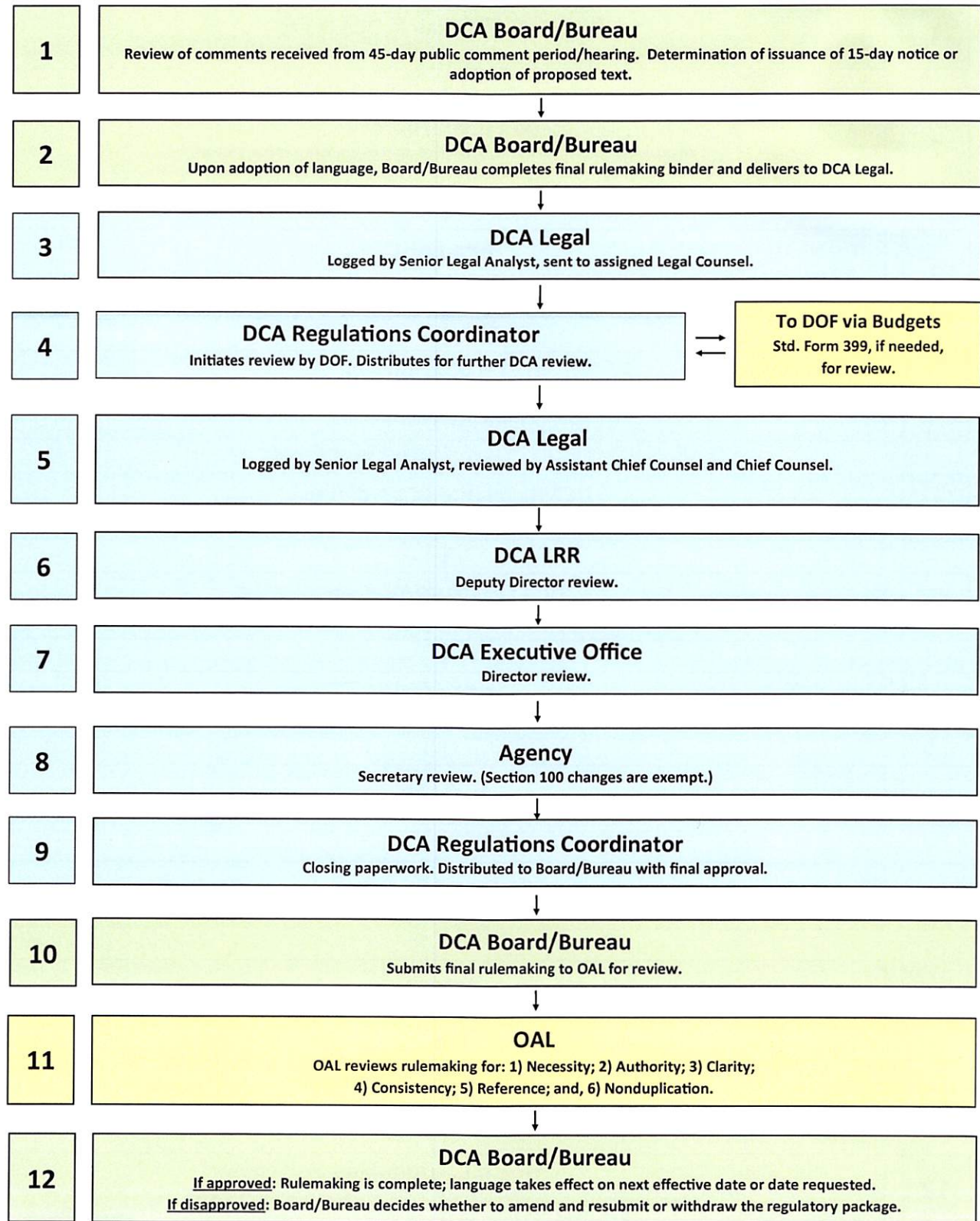
Date Filed with the Secretary of State

Effective Date

September 1 st – November 30 th	January 1 st
December 1 st – February 29 th	April 1 st
March 1 st – May 31 st	July 1 st
June 1 st – August 31 st	October 1 st

REGULAR RULEMAKING PROCESS—DCA BOARDS/BUREAUS

FINAL PHASE

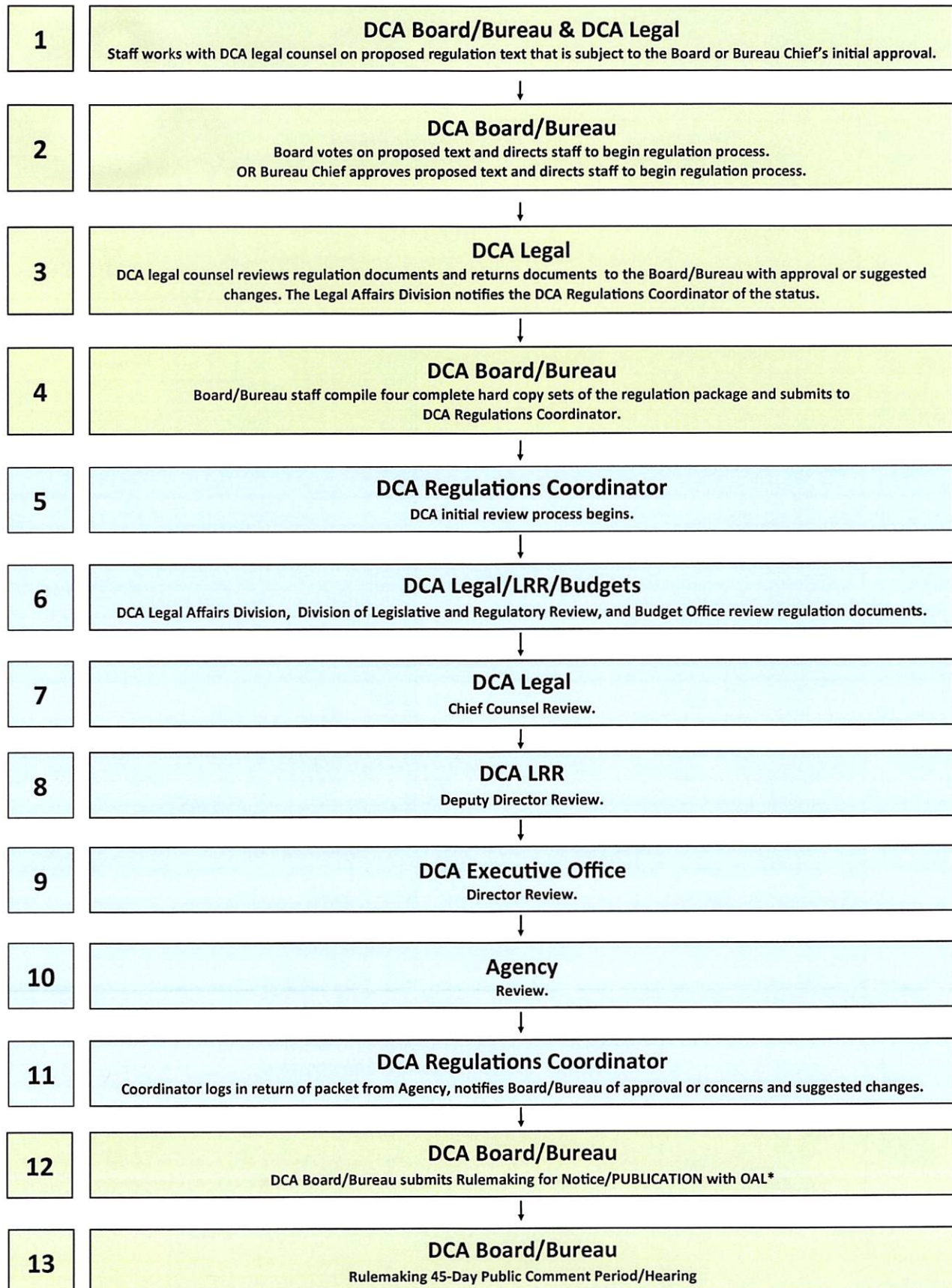


Legend

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

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.



Physical Therapy Board of California

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Briefing Paper

Date: August 11, 2017

Prepared for: PTBC Members

Prepared by: Elsa Ybarra

Subject: 1399.15, Guidelines for Issuing Citations and Imposing Discipline (Guidelines)

Purpose: To propose revisions to the language of the Guidelines for Issuing Citations and Imposing Discipline included by reference in section 1399.15 of Article 8, Division 13.2, Title 16 of the California Code of Regulations.

Attachments: [12\(B-1\) Section 1399.15 of the California Code of Regulations](#)
[12\(B-2\) Guidelines for Issuing Citations and Imposing Discipline \[with proposed revisions\]](#)
[12\(B-3\) Excel spreadsheet of Business and Professions Codes \(BPC\) and other related codes identifying those sections proposed to be revised](#)

Background:

Business and Professions Code (BPC) Section 2615 authorizes the Physical Therapy Board of California (Board) to adopt, amend, or repeal, such rules and regulations as may be reasonably necessary to enable the Board to carry into effect the provisions of the Physical Therapy Practice Act.

BPC Section 315, established the Substance Abuse Coordination Committee (SACC) within the Department of Consumer Affairs (Department) and required the SACC to formulate uniform and specific standards in sixteen specified areas for each healing arts board to use in dealing with substance-abusing licensees.

BPC Section 315.2, specifies that a healing arts board within the Department is required to order a licensee to cease practice if the licensee tests positive for any substance that is prohibited under the terms of the licensee's probation or diversion (rehabilitation) program.

BPC Section 315.4, authorizes healing arts boards within the Department to order a licensee on probation or in a diversion (rehabilitation) program to cease practice for major violations and when the board orders a licensee to undergo a clinical diagnostic evaluation pursuant to the uniform and specific standards adopted and authorized under section Uniform Standards for Substance-Abusing Licensees.

Government Code Section 11400.20 authorizes an agency to adopt regulations to govern an adjudicative proceeding.

Government Code Section 11425.50(e) specifies that a penalty may not be based on a guideline, criterion, bulletin, manual, instruction, order, standard of general application or other rule unless it has been adopted as a regulation.

California Code of Regulations, section 1399.15 of Article 8, Division 13.2 of Title 16, specifies the Board shall consider the disciplinary guidelines entitled “Guidelines for Issuing Citations and Imposing Discipline” Revised December 2013, 5th Edition, when reaching a decision on a disciplinary action under the Administrative Procedures Act.

The Board initially adopted into regulation the “Model Guidelines for Imposing Discipline” in July, 1997. Since then, the Board has revised the title and the content of the Guidelines on four separate occasions to address:

- areas needing enhancement as suggested by a Deputy Attorney General or an Administrative Law Judge or simply through experience when enforcing a Stipulated or Administrative Decision
- statutory and regulatory changes such as the addition of the Uniform Standards of Substance Abusing Licensees
- to make changes without regulatory effect, i.e. typographical or grammatical errors.

Staff is simply proposing to do more of the same and has prepared a spreadsheet for ease of identifying the areas of concern to streamline the review of the proposed changes.

Action Requested:

If the Board does not motion to initiate the rulemaking process due to additional revisions needed, the President may direct the Executive Officer and staff make the revisions to the Guidelines and bring it back for review at its next Board meeting in November.

Should the Board move to initiate the rulemaking process, consider the following motion:

“I move that we approve the proposed regulatory changes, as modified, direct the Executive Officer to take all steps necessary to initiate the formal rulemaking process, and authorize the Executive Officer to make any non-substantive changes to the rulemaking package, 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.”

California Code of Regulations
Title 16. Professional and Vocational Regulations
Division 13.2. Physical Therapy Board of California

PROPOSED LANGUAGE

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

Amend Section 1399.15 of Article 8 of Division 13.2 of Title 16 of the California Code of Regulations to read as follows:

§ 1399.15. Guidelines for Issuing Citations and Imposing Discipline.

(a) In reaching a decision on a disciplinary action under the Administrative Procedure Act (Government Code Section 11400 et seq.), the Board shall consider the “Guidelines for Issuing Citations and Imposing Discipline”, (Revised **INSERT DATE** ~~December 2013~~, 56th Edition; hereafter, “Guidelines”) which are hereby incorporated by reference. Subject to paragraph (c), deviation from these ~~g~~Guidelines and orders, including the standard terms of probation, is appropriate where the Board, in its sole discretion, determines that the facts warrant such a deviation -for example: The presence of mitigating or aggravating factors; the age of the case; or evidentiary problems.

(b) Notwithstanding the Guidelines, any proposed decision issued in accordance with the procedures set forth in Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code that contains any finding of fact that the licensee engaged in any act of sexual contact, as defined in subdivision (c) of Section 729 of the Code, with a patient, or any finding that the licensee has committed a sex offense or been convicted of a sex offense, shall contain an order revoking the license. The proposed decision shall not contain an order staying the revocation of the license. As used in this section, the term “sex offense” shall mean any of the following:

(1) Any offense for which registration is required by Section 290 of the Penal Code or a finding that a person committed such an offense.

(2) Any offense defined in Section 261.5, 313.1, ~~647b~~, or 647.1 subdivisions (a) or (d), or 647b of the Penal Code or a finding that a person committed such an offense.

(3) Any attempt to commit any of the offenses specified in this section.

(4) Any offense committed or attempted in any other state or against the laws of the United States which, if committed or attempted in this state, would be punishable as one or more of the offenses specified in this section.

(c) If the conduct found to be a violation involves drugs, alcohol, or both, and the individual is permitted to practice under conditions of probation, a clinical diagnostic evaluation shall be ordered as a condition of probation in every case, without deviation.

(1) Each of the “Conditions Applying the Uniform Standards,” as set forth in the Guidelines, shall be included in any order subject to this subsection, but may be imposed contingent upon the outcome of the clinical diagnostic evaluation.

(2) The Substance Abuse Coordination Committee's "Uniform Standards Regarding Substance-Abusing Healing Arts Licensees" (Revised April 2011; hereafter, "Uniform Standards"), which are hereby incorporated by reference, shall be used in applying the probationary conditions imposed pursuant to this subsection.

(d) Nothing in this section shall prohibit the Board from imposing additional terms or conditions of probation in any order that the Board determines would provide greater public protection.

Note: Authority cited: Section 2615, Business and Professions Code; and 11400.20, Government Code. Reference: Sections 315, 315.2, 315.4, 2660, 2660.1, 2660.2, 2661 and 2661.5, Business and Professions Code; and Section 11425.50(e), Government Code.

DRAFT – 8/24/2017



GUIDELINES FOR ISSUING CITATIONS AND IMPOSING DISCIPLINE

Physical Therapy Board of California

Department of Consumer Affairs

**Physical Therapy Board of California
Guidelines for Issuing Citations
& and Imposing Discipline**

Edmund G. Brown Jr., Governor

Dean R. Grafilo~~Denise Brown~~, Director
Department of Consumer Affairs

Physical Therapy Board of California Members:

Katarina Eleby, M.A., President
Alicia Rabena-Amen, P.T., M.P.T., Vice President
Debra Alviso, P.T., D.P.T., O.C.S. President
Jesus Dominguez, P.T., PhD,
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Executive Officer: Jason Kaiser

Published by the Physical Therapy Board of California, Department of Consumer Affairs, 2005 Evergreen Street, Suite 1350, Sacramento, California 95815.

~~December 2013~~
56th Edition

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Commented [YE1]: Table of Contents has not been completely revised. Revisions will be completed once Guidelines have been approved with final text, codes, etc...

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Statement of Purpose, Intent & and Expectations

The purpose of physical therapists and physical therapist assistant licensure in the State of California is to protect the public's health, safety and welfare from the incompetent and unprofessional practice of physical therapy. These ~~g~~Guidelines address the challenge of providing public protection and of enabling a licensee to practice his or her profession. In addition to protecting the public and rehabilitating a licensee, the Physical Therapy Board of California (Board) finds imposing the discipline set forth in the ~~g~~Guidelines will further public protection by promoting uniformity, certainty, fairness, and deterrence.

The ~~Physical Therapy Board of California (Board)~~ is producing this ~~5th edition of the~~ "Guidelines for Issuing Citations and Imposing Discipline," (Revised [date], ~~6th Edition~~; hereafter, "~~(Guidelines)~~") for the public, individuals subject to issuance of a citation and fine, as well as those involved in the disciplinary process: Administrative Law Judges, Deputy Attorneys General, Members of the Board who review proposed decisions and stipulations and make final decisions, the Board's Executive Officer and staff, and Respondents and their Counsel. When an Initial Probationary License has been issued, a Statement of Issues, or an Accusation has been filed, these actions indicate the nature of the alleged violation is severe enough to warrant disciplinary action if the allegations are proven true. An administrative citation is not discipline and is issued for less egregious violations. However, when documentation of significant mitigation has been received, discipline may not be required to protect the public.

When criminal charges are alleged and there is an immediate need to protect the public, application of Penal Code, Section 23 shall be sought. In addition, if the alleged conduct poses an immediate threat to public safety, an Interim Suspension Order shall be sought.

The Board has some basic expectations when an Administrative Law Judge determines the allegations are true and a cause for discipline exists. The Board recognizes a rare individual case may necessitate a departure from these ~~g~~Guidelines. Any "Proposed Decision" that departs from the ~~disciplinary g~~Guidelines shall identify the departures and the facts supporting the departure. However, in such a rare case, the mitigating circumstances must be detailed in the Findings of Fact, which is in every Proposed Decision.

These include:

- 1) If at the time of hearing, the Administrative Law Judge finds Respondent, for any reason, not capable of safe practice, the Board expects the outright revocation of the license. This is particularly true in cases of patient sexual abuse. In less egregious cases, a stayed revocation with suspension and probation, pursuant to the ~~g~~Guidelines contained in this manual, would be expected.
- 2) The Board expects revocation to normally be the appropriate order in cases where Respondent does not file a Notice of Defense or appear at a hearing.
- 3) When probation is granted, the inclusion of a stayed revocation order is essential to ensure compliance with terms of probation.

- 4) When the revocation of a license is stayed, a suspension of the license shall be considered when further education, medical or psychological evaluation or treatment is deemed necessary to ensure safe practice. A suspension, when imposed, should not be for less than indicated in the gGuidelines.
- 5) The Board expects the decision to include an order for cost recovery.

The Board expects a similar result and explanation for any Stipulated Settlement negotiated prior to hearing. Any ~~"Proposed Stipulated Settlement"~~ that departs from the disciplinary gGuidelines shall be accompanied by a memorandum identifying the departures and the facts supporting the departure, as well as any mitigating or aggravating circumstances. ~~However, in such a rare case, the mitigating circumstances must be detailed in the Findings of Fact.~~

Probation conditions are divided into three categories: (1) Standard Conditions which the Board expects in all probation cases; (2) Specific Conditions that depend on the nature and circumstances of the particular case; and (3) Conditions Applying the Uniform Standards Specific to Alcohol and/or Controlled Substances.

LEGAL AUTHORITY

~~The legal authority for these guidelines is contained in Section 315, 315.2, 315.4, 2615, 2660, 2660.1, 2661 and 2661.5 of the Business and Professions Code; and Title 16, CCR §1399.15.~~

The legal authority for these Guidelines is contained in Business and Professions Code sections 315, 315.2, 315.4, 2615, 2660, 2660.1, 2661 and 2661.5; and California Code of Regulations, Title 16, section 1399.15

**California Code of Regulations
Title: 16, Professional and Vocational Regulations
Division 13.2, Physical Therapy Board of California
Article 8. Enforcement Actions, Discipline and Reinstatement of License
Disciplinary Guidelines**

§ 1399.5. Guidelines for Issuing Citations and Imposing Discipline.

(a) In reaching a decision on a disciplinary action under the Administrative Procedure Act (Government Code Section 11400 et seq.), the Board shall consider the "Guidelines for Issuing Citations and Imposing Discipline", (Revised ~~December 2013, 5th~~ ^{6th} Edition, hereafter, "Guidelines") which are hereby incorporated by reference. Subject to paragraph (c), deviation from these ~~g~~Guidelines and orders, including the standard terms of probation, is appropriate where the Board, in its sole discretion, determines that the facts warrant such a deviation —for example: The presence of mitigating or aggravating factors; the age of the case; or evidentiary problems.

Commented [YE2]: Will replace with new date and edition

(b) Notwithstanding the Guidelines, any proposed decision issued in accordance with the procedures set forth in Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code that contains any finding of fact that the licensee engaged in any act of sexual contact, as defined in subdivision (c) of Section 729 of the Code, with a patient, or any finding that the licensee has committed a sex offense or been convicted of a sex offense, shall contain an order revoking the license. The proposed decision shall not contain an order staying the revocation of the license.

As used in this section, the term "sex offense" shall mean any of the following:

- (1) Any offense for which registration is required by Section 290 of the Penal code or a finding that a person committed such an offense.
- (2) Any offense defined in Section 261.5, 313.1, ~~647b~~, or 647, subdivisions (a) or (d), or 647b of the Penal code or a finding that a person committed such an offense.
- (3) Any attempt to commit any of the offenses specified in this section.
- (4) Any offense committed or attempted in any other state or against the laws of the United States which, if committed or attempted in this state, would be punishable as one or more of the offenses specified in this section.

(c) If the conduct found to be a violation involves drugs, alcohol, or both, and the individual is permitted to practice under conditions of probation, a clinical diagnostic

evaluation shall be ordered as a condition of probation in every case, without deviation.

(1) Each of the "Conditions Applying the Uniform Standards," as set forth in the Guidelines, shall be included in any order subject to this subsection, but may be imposed contingent upon the outcome of the clinical diagnostic evaluation.

(2) The Substance Abuse Coordination Committee's "Uniform Standards Regarding Substance-Abusing Healing Arts Licensees" (Revised April 2011; hereafter, "Uniform Standards"), which are hereby incorporated by reference, shall be used in applying the probationary conditions imposed pursuant to this subsection.

(d) Nothing in this section shall prohibit the Board from imposing additional terms or conditions of probation in any order that the Board determines would provide greater public protection.

AUTHORITY TO EXAMINE DUE TO MENTAL ILLNESS AND/OR PHYSICAL IMPAIRMENT

Business and Professions Code, Section 820. Examination of licentiate for mental illness or physical illness affecting competency

Whenever it appears that any person holding a license, certificate or permit under this division or under any initiative act referred to in this division may be unable to practice his or her profession safely because the licentiate's ability to practice is impaired due to mental illness, or physical illness, affecting competency, the licensing agency may order the licentiate to be examined by one or more physicians and surgeons or psychologists designated by the agency. The report of the examiners shall be made available to the licentiate and may be received as direct evidence in proceedings conducted pursuant to Section 822.

Business and Professions Code Section 821. Effect of licentiate's failure to comply with order for examination

The licentiate's failure to comply with an order issued under Section 820 shall constitute grounds for the suspension or revocation of the licentiate's certificate or license.

Business and Professions Code Section 822. Action by licensing agency

If a licensing agency determines that its licentiate's ability to practice his or her profession safely is impaired because the licentiate is mentally ill, or physically ill, affecting competency, the licensing agency may take action by any one of the following methods:

- (a) Revoking the licentiate's certificate or license.
- (b) Suspending the licentiate's right to practice.
- (c) Placing the licentiate on probation.
- (d) Taking such other action in relation to the licentiate as the licensing agency in its discretion deems proper.

The licensing agency shall not reinstate a revoked or suspended certificate or license until it has received competent evidence of the absence or control of the condition which caused its action and until it is satisfied that with due regard for the public health and safety the person's right to practice his or her profession may be safely reinstated.

Business and Professions Code Section 823. Reinstatement of licentiate

Notwithstanding any other provisions of law, reinstatement of a licentiate against whom action has been taken pursuant to Section 822 shall be governed by the procedures in this article. In reinstating a certificate or license which has been revoked or suspended under Section 822, the licensing agency may impose terms and conditions to be complied with by the licentiate after the certificate or license has been reinstated. The authority of the licensing agency to impose terms and conditions includes, but is not limited to, the following:

- (a) Requiring the licentiate to obtain additional professional training and to pass an examination upon the completion of the training.
- (b) Requiring the licentiate to pass an oral, written, practical, or clinical examination, or any combination thereof to determine his or her present fitness to engage in the practice

of his or her profession.

(c) Requiring the licentiate to submit to a complete diagnostic examination by one or more physicians and surgeons or psychologists appointed by the licensing agency. If the licensing agency requires the licentiate to submit to such an examination, the licensing agency shall receive and consider any other report of a complete diagnostic examination given by one or more physicians and surgeons or psychologists of the licentiate's choice.

(d) Requiring the licentiate to undergo continuing treatment.

(e) Restricting or limiting the extent, scope or type of practice of the licentiate.

Business and Professions Code Section 824. Options open to licensing agency when proceeding against licentiate

The licensing agency may proceed against a licentiate under either Section 820, or 822, or under both sections.

DEFINITION OF ABUSE REHABILITATION PROGRAMS

The Board does not consider licensees who have been ordered to participate in the Board's diversion program to be "in diversion." Rather, the Board considers these individuals to be in a substance abuse rehabilitation program, (hereafter, ~~referred to as the~~ "rehabilitation program"). As a result, the Board will not use the term "diversion" in these disciplinary guidelines to describe licensees on probation or terms and conditions of probation related to the rehabilitation program. Instead the phrase "rehabilitation program" will be used.

There are two pathways into the Board's rehabilitation program:

(1) Participants with drug and/or alcohol addiction issues who have self-referred to the rehabilitation program and are not under a disciplinary order; and, (2) Participants who have been ordered into the Board's rehabilitation program ~~as a result of~~ resulting from violations of the Physical Therapy Practice Act related to drug and/or alcohol addiction.

Self-Referrals

When a licensee enrolls in the Board's rehabilitation program as a self-referral, the participation is confidential. However, if the rehabilitation program determines a self-referred participant ~~is determined to be~~ too great a risk to the public health, safety, and welfare to continue the practice of physical therapy, the rehabilitation program shall report the facts shall be reported by the rehabilitation program to the Executive Officer of the Board and shall provide all documents and information pertaining to and supporting that conclusion shall be provided to the Executive Officer of the Board. The Board may refer the matter may be referred for investigation and disciplinary action by the Board. Each physical therapist or physical therapist assistant who requests participation in a rehabilitation program shall agree to cooperate with the rehabilitation program designed for him or her. Any failure to comply with the rehabilitation program may result in termination of participation in the rehabilitation program.

Probationary Participants

Probationary participants ~~are required to~~ shall comply with terms of probation or risk losing their license. Pursuant to ~~section 315 of the Business and Professions Code~~ Section 315, the Board uses the Substance Abuse Coordination Committee's *Uniform Standards Regarding Substance Abusing Healing Arts Licensees (April 4/2011)* (hereafter, "Uniform Standards"). A clinical diagnostic evaluation will be ordered as a term of probation and other Conditions Applying the Uniform Standards will also be included.

While self-referred licensees are not subject to terms and conditions in these Guidelines, they are subject to nearly identical contractual terms of participation and the violation of those terms could lead to termination of participation in the rehabilitation program.

SUBSTANCE ABUSE REHABILITATION PROGRAM

OVERVIEW OF PARTICIPANT REQUIREMENTS ~~&AND~~ COSTS (For either self-referrals or probation participants)

Licensees enrolled in the rehabilitation program are required to pay the entire cost of the rehabilitation program pursuant to Business and Professions Code Section 2668. The rehabilitation program costs include the monthly administrative fee, monthly health support fees, and random drug and alcohol testing fees. ***All rehabilitation program fees are subject to change.***

Substance Abuse Rehabilitation Program Timeframe: Participation in the rehabilitation program is for a period of approximately 3 to-5 years.

Monthly Administrative Fee: The participant pays the monthly administrative fee directly to the rehabilitation program. The monthly administrative fee is currently ~~\$288~~\$358.00. The monthly administrative fee may increase 3 to-5 % annually each July. Costs are dependent on the contracted costs.

Random Biological Testing (RBT) ~~&and~~ Fee: Currently the average cost of each RBT is approximately \$60.00, plus the collection fee at the testing site, which can cost up to \$125.00 and possibly more if the applicant is required to test on a weekend. Additionally, there are charges for the medical review officer (hereafter "MRO") who reviews any positive drug test results, at the Board's request. Medical reviews are usually a direct result of problematic (i.e. positive) RBT results.

Professional Support Group Meetings: Support group meetings are a treatment modality of the rehabilitation program. These groups are attended exclusively by licensed professionals who are in their own recovery and involved in a rehabilitation program. The support group facilitators are licensed professionals who have extensive clinical experience in working with licensed professionals in recovery and in rehabilitation programs. Each participant is required to attend support group meetings two times per week during their first 18 months in the rehabilitation program. The frequency of support group meeting attendance can be reduced to one time per week after 18 months of successful participation in the rehabilitation program. This reduction is also based upon the on-going clinical evaluation of each participant.

Professional Support Group Meeting Fees: The participant pays the monthly support group meeting fees directly to the support group facilitator. Support groups all charge different fees and negotiate directly with the participant. Average costs range from \$200.00 to ~\$500.00 monthly. Participants may be required to attend support groups once time or twiceo times weekly.

12-Step Meetings: All participants are required to attend community-based 12-step meetings. The frequency requirement for attending 12-step meetings range from daily attendance to three times per week. The frequency requirement is established and modified by the Clinical Case Manager based upon the on-going clinical evaluation of each participant. Generally, there is not a cost associated with attending 12-step

meetings. Contributions at the 12-step meetings are voluntary.

Clinical Assessment: All participants are required to undergo an initial clinical assessment and subsequent re-assessments by contracted Assessors. There is currently no cost to the ~~Physical Therapy Board~~ participants for the initial clinical assessment and the annual re-assessments. However, if the participant is required to have more than one clinical assessment per year, the participant is required to pay the cost for the additional clinical assessment. These additional assessments are usually a direct result of reoccurring problems in the rehabilitation program.

Additional Costs to Third Parties: Participants may be required to enter formal chemical dependency treatment (i.e. inpatient or outpatient facilities) at treatment programs approved by the rehabilitation program. Referrals to specific treatment programs are based upon the assessment of a participant's clinical need. The cost of any formal chemical dependency treatment program is the sole responsibility of each participant. The participants may also be required to undergo formal treatment for a mental health diagnosis. The cost of any formal treatment for mental health treatment program is the sole responsibility of each participant.

Worksite Monitor: Each participant is required to have a worksite monitor at his or her place of employment. The rehabilitation program will provide the applicant with the required consent forms at the time of enrollment. The worksite monitor is required to report to the rehabilitation program on the status of the participant.

Other Requirements: The participant must submit monthly self-evaluation reports and call into the rehabilitation program on a routine, often daily, basis. The assigned Clinical Case Manager will determine the frequency of how often the participant needs to call in. Participants are required to receive prior approval from the Clinical Case Manager before scheduling and taking any vacations. The participant's Clinical Case Manager may determine other requirements.

DENIAL OF LICENSURE ~~&AND~~ ISSUANCE OF AN INITIAL PROBATIONARY LICENSE

Mandatory Denial of a License

In accordance with Business and Professions Code Section 2660.5 of the B&P Code, the Board must deny licensure to any applicant who is required to be registered pursuant to Penal Code Section 290, unless the only basis for the registration is a misdemeanor conviction under Penal Code Section 314. There is no discretion allowed. If an applicant is a Penal Code Section 290 registrant, his or her application for licensure will be denied.

Permissive Denials of a License

The Board has the ~~right~~authority to deny a license to any applicant for any of the following reasons:

Business and Professions Code Section 480: ~~†The Physical Therapy Board~~ has the authority to deny licensure to any applicant whose misconduct or criminal history is substantially related to the qualifications, functions, or duties of a physical therapist or physical therapist assistant. Reasons for denial of a license include, but are not limited to the following:

- Conviction of a crime substantially related to the practice of physical therapy;
- Any act involving dishonesty, fraud, or deceit with the intent to substantially benefit himself or herself or another, or to substantially injure another;
- Any act which is grounds for suspension or revocation of a license; and
- Making a false statement on the application.

In addition to Section 480, the Board has the authority to deny a license for any of the following reasons:

Business and Professions Code Section 2635: ~~†Every~~ applicant for a license under ~~this chapter~~ the Physical Therapy Practice Act shall, at the time of application, be a person over 18 years of age, not addicted to alcohol or any controlled substance, have successfully completed the education and training required by Section 2650, and not have committed acts or crimes constituting grounds for denial of licensure under Section 480.

Business and Professions Code Section 2660, subdivision (f)(1): Obtaining or possessing in violation of law, or except as directed by a licensed physician and surgeon, dentist, or podiatrist, administering to himself or herself, or furnishing or administering to another, any controlled substances or any dangerous drug.

Business and Professions Code Section 2660, subdivision (f)(2): Using any controlled substance or any dangerous drug.

Business and Professions Code Section 2660, subdivision (w): Habitual intemperance.

Business and Professions Code Section 2660.2, subdivision (a): The Board may refuse a license to any applicant guilty of unprofessional conduct or sexual activity referred to in Section 2660.1.

Business and Professions Code Section 2660.2: The Board may refuse a license to any applicant guilty of unprofessional conduct or sexual misconduct as defined in ~~B&P Business and Professions Code, Section 2660.1 and California Code of Regulations, Title 16, California Code of Regulations, Section 1399.23.~~ The Board may, in its sole discretion, issue a public letter of reprimand or may issue ~~a~~ probationary license to any applicant for a license who is guilty of unprofessional conduct, but who has met all other requirements for licensure.

Commented [YE3]:

Commented [YE4]:

Appeal Rights

The applicant has the right to appeal the denial or the issuance of a license with terms and conditions. In either case, a Statement of Issues would be filed in accordance with Chapter 5, (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, and the Board shall have all the powers granted therein.

Any person whose application for a license has been denied by the Board may reapply to the Board for a license only after a period of one (1) year from the date of the denial.

CITATION

The ~~Physical Therapy Board~~ may issue a citation pursuant to Business and Professions Code Section 125.9 of the ~~Business and Professions Code~~, as an alternate means to address relatively minor violations not necessarily warranting discipline.

Citations are not disciplinary actions, but are matters of public record. The citation program increases the effectiveness of the Board's consumer protection process by providing a method to effectively address less egregious violations.

Citations shall be in writing and shall describe the particular nature and facts of the violation, including a reference to the statute or regulation allegedly violated. In assessing a fine, the Board shall give due consideration to the factors enumerated in California Code of Regulations, Title 16, Section 1399.25 of Title 16 of the CCR.

Payment of a fine with or without an informal conference or administrative hearing does not constitute an admission of the violation charged, but represents a satisfactory resolution of the citation for purposes of public disclosure.

After a citation is issued, the person may:

- 1) Pay the fine/comply with any Order of Abatement and the matter will be satisfactorily resolved.
- 2) Request an informal conference. ~~At the conclusion of the informal conference~~ At the conclusion of the informal conference which, the citation may be affirmed, modified or dismissed, including any fine levied or order of abatement issued.
- 3) Request an Administrative Hearing in appeal of the citation whether or not an informal conference was held.

Failure to pay a fine, unless the citation is being appealed, may result in disciplinary action. Where a citation is not contested and a fine is not paid, the fine shall be added to the fee for renewal of the license.

PUBLIC REPROVALS ~~&AND~~ REPRIMANDS

Business &and Professions Code Section 495 authorizes the Board to publicly reprove a physical therapist or physical therapist assistant for an act constituting grounds for suspension or revocation of a license. ~~The Board may consider issuing a Public Reproval as part of a disciplinary order, if any of the following circumstances exist may be considered when the following circumstances exist:~~

1. The offense is an isolated incident;_
2. Sufficient time elapsed since the offense without further violations indicating a recurrence is unlikely;_
3. Respondent admitted to the offense;_
4. Respondent indicated remorse;_
5. No prior discipline for a similar violation exists;_ and
6. In the case of an offense related to substance abuse, active participation in a recovery program has been documented for at least one (1) year without a relapse.

In lieu of filing or prosecuting a formal accusation against a licensee, Business &and Professions Code Section 2660.3 authorizes the Board, upon stipulation or agreement by the licensee, to issue a public letter of reprimand after it has conducted an investigation or inspection. The public letter of reprimand may include a requirement for specified training or education, and cost recovery for investigative costs. The Board may use a public letter of reprimand only for minor violations (as defined by the Board) committed by the licensee. Minor violations, include, but are not limited to, the following:

1. First DUI with no underlying circumstances that would be considered egregious;_ (e.g. no bodily injury to any third party);_
2. One (1) minor adverse action in another State;_
3. Failure to maintain patient records, such as an isolated incident of a documentation violation;_

GUIDELINES SPECIFIC TO VIOLATION

The following offenses are listed in numerical order of the statutory numbers in the Business and Professions Code (B&P Code), the California Code of Regulations (CCR) and the Health and Safety Code (H&S Code).

B&P Code Section 2660(a) authorizes the ~~Physical Therapy Board of California~~ to cite violations of the Medical Practice Act. When the Board cites violations of the Medical Practice Act ~~are cited, the Board must also cite B&P Code 2660, subdivision (a) must also be cited.~~

Violations of the B&P Code or the CCR may result in the issuance of a Citation, Public Reprimand, Initial Probationary License, filing of a Statement of Issues, or an Accusation. Filing of criminal charges shall be sought when appropriate.

BUSINESS AND PROFESSIONS CODE

B&P CODE §123. SUBVERTING OR ATTEMPTING TO SUBVERT A LICENSING EXAM ~~B&P CODE 123~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reproval or Initial Probationary License
Maximum: Revocation or denial of license

Conditions of Probation:

- 1) All "Standard Probation Conditions"
- 2) "Probation Conditions Specific to Violation" for consideration are: A, B, C, E, F

"Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

Refer to related statutes: B&P Code §§ 584, 2660.(i).(j), 2660.7

Commented [D5]: Added related codes for consistency.

B&P CODE §136. CHANGE OF ADDRESS REPORTING REQUIREMENT ~~B&P CODE 136~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$1,000

Discipline:

Minimum: Public Reproval
Maximum: Public Reproval

Refer to related regulation: CCR §1398.6

B&P CODE §141. DISCIPLINARY ACTION BY A FOREIGN JURISDICTION ~~B&P CODE 141~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

If violation is an offense in California, refer to corresponding statute. If not, the Board shall consider the discipline order from the state, federal government, or country of discipline when determining disciplinary action.

Refer to related statute and/or regulation: B&P Code § 2660(o), CCR § 1399.24(d)(4)

B&P CODE §490. CONVICTION OF A CRIME - SUBSTANTIAL RELATIONSHIP
REQUIRED B&P CODE 490

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reprimand
Maximum: Revocation

Conditions of Probation:

- 1) All "Standard Probation Conditions"
- 2) "Probation Conditions Specific to Violation" for consideration are: A, B, C, D, E, F, M, N, P, T, U, V, W, X, Y, Z, AA

"Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

(Condition "P" should be considered if the violation(s) relate(s) to psychiatric conditions. Conditions "T" thru "AA" should only be used if the violation relates to alcohol/substance abuse)

Refer to related statutes and/or regulations: B&P Code §§ ~~2236~~, 2660(e), (f)(1),(2),(3),(w) ~~(a)~~, 2661, CCR § 1399.24(d)

B&P CODE §490.5. COMPLIANCE WITH CHILD SUPPORT ORDERS AND JUDGMENTS
~~B&P CODE 490.5~~

In addition to the mandatory suspension requirements of B&P Code § 490.5.

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reprimand
Maximum: Public Reprimand

Guidelines since its explained-on page 16 and also in B&P Code 2660(a), page 36. Also, most of the Medical Board Codes are being deleted.

Commented [YE7]:

¹ B&P Code 2660(a) authorizes the Physical Therapy Board of California to cite the Medical Practice Act.

B&P CODE § 498. OBTAINING LICENSURE BY FRAUD ~~B&P CODE 498~~

Discipline:

Revocation or Denial of License

Refer to related statutes: B&P Code 499, 581, 582, 583, ~~2235~~, 2660(c)(a)¹

**B&P CODE § 499. FALSE STATEMENT OF MATERIAL FACT FOR APPLICATION
~~B&P CODE 499~~**

Discipline:

Revocation or Denial of License

Refer to related statutes: B&P Code §§ 498, 581, 582, 583, ~~2235~~, 2660(c)(a)¹

**B&P CODE § 580. SALE OR BARTER OF DEGREE, CERTIFICATE OR TRANSCRIPT
~~B&P CODE 580~~**

Discipline:

Revocation or Denial of License

**B&P CODE § 581. PURCHASE OR FRAUDULENT ALTERATION OF DIPLOMA OR
OTHER WRITINGS ~~B&P CODE 581~~**

Discipline:

Revocation or Denial of License

Refer to related statutes: B&P Code §§ 498, 499, 582, 583, ~~2235~~, 2660(c)(a)¹

**B&P CODE § 582. USE OF ILLEGALLY OBTAINED, ALTERED OR COUNTERFEIT
DIPLOMA, CERTIFICATE, OR TRANSCRIPT ~~B&P CODE 582~~**

Discipline:

Revocation or Denial of License

Refer to related statutes: B&P Code §§ 498, 499, 581, 583, ~~2235~~, 2660(c)(a)¹

¹ ~~B&P Code 2660(a) authorizes the Physical Therapy Board of California to cite the Medical Practice Act.~~

B&P CODE § 583. FALSE STATEMENTS IN APPLICATION DOCUMENTS OR WRITINGS ~~B&P CODE 583~~

Discipline:

Revocation or Denial of License

Refer to related statutes: B&P Code §§ 498, 499, 581, 582, ~~2235~~, 2660(c)(a)[†]

B&P CODE § 584. VIOLATION OF EXAMINATION SECURITY; IMPERSONATION ~~B&P CODE 584~~

Discipline:

Revocation or Denial of License

Refer to related statutes: B&P Code § ~~2288~~, 2660(a), 2660.7

B&P CODE § 650. CONSIDERATION FOR REFERRALS PROHIBITED ~~B&P CODE 650~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Revocation, stayed, 30 days' suspension, 3 years' probation
Maximum: Revocation

Conditions of Probation in Addition to Standard Conditions: NONE

Refer to related statutes: B&P Code § 2660(t)

B&P CODE § 651. ADVERTISING VIOLATIONS- DISSEMINATION OF FALSE OR MISLEADING INFORMATION CONCERNING PROFESSIONAL SERVICES OR PRODUCTS ~~B&P CODE 651~~

Citation:

Minimum Fine: \$1,000
Maximum Fine: \$5,000

Discipline:

Minimum: Revocation, stayed, 30 days' suspension, 3 years' probation
Maximum: Revocation

[†] B&P Code 2660(a) authorizes the Physical Therapy Board of California to cite the Medical Practice Act.

Conditions of Probation:

- 1) All "Standard Probation Conditions"
- 2) "Probation Conditions Specific to Violation" for consideration are: E

"Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

Refer to related statutes and/or regulation: B&P Code §§ 2660(b),(q), H&S 17500, CCR § 1398.10

B&P CODE § 654.2. BENEFICIAL INTEREST REFERRALS – REQUIRED DISCLOSURE STATEMENT ~~B&P CODE 654.2~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Revocation, stayed, days' suspension, 3 years' probation
Maximum: Revocation

Conditions of Probation in Addition to Standard Conditions: NONE

Refer to related statutes: B&P Code § 2660(q)

B&P CODE § 680. HEALTH CARE PRACTITIONER'S DISCLOSURE OF NAME AND LICENSE STATUS ~~B&P CODE 680~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reprimand
Maximum: Public Reprimand

Refer to related regulation: CCR § 1398.11

B&P CODE § 725. EXCESSIVE PRESCRIBING OR TREATMENT ~~B&P CODE 725~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Revocation, stayed, 30 days' suspension, 3 years' probation
 Maximum: Revocation

Conditions of Probation:

- 1) All "Standard Probation Conditions"
- 2) "Probation Conditions Specific to Violation" for consideration are: A, B, C, D, E, F, H, L, M, N, O

"Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

Refer to related statutes: B&P Code § 2234(b), 2660(a)(h)

B&P CODE § 726. SEXUAL ABUSE OR MISCONDUCT WITH PATIENT OR CLIENT
B&P CODE 726

Note: Pursuant to CCR §1399.15, any findings the licensee committed a sex offense or been convicted of a sex offense, the order shall revoke the license. The proposed decision shall not contain an order staying the revocation of the license.

Refer to related statutes and/or regulation: B&P Code §§ 2660 (m),(p), 2660.1, CCR §1399.15(b)

B&P CODE § 802. REPORTS OF MALPRACTICE SETTLEMENTS OR ARBITRATION AWARDS INVOLVING UNINSURED LICENSEES; PENALTIES FOR NON-COMPLIANCE B&P CODE 802

Citation:

Minimum Fine: \$100
 Maximum Fine: \$5,000

Discipline: Refer to related statutes and/or regulation violation triggering malpractice settlement.

B&P CODE § 810. INSURANCE FRAUD - UNPROFESSIONAL CONDUCT B&P CODE 810

Citation:

Minimum Fine: \$100
 Maximum Fine: \$5,000

Commented [D9]: Add? C – Prohibition of Home Care
Included: B- Monitoring required; D-Prohibition of Solo Practice; E-Prohibition of Self-Employ or Ownership

Commented [D10]: Supervision Restrictions: L- Prohib. of Aides included but not conditions J (PTLA/PTALA) and K (PTA's. Add?

Commented [D11]: Add?
 M: Notification to Patients
 N: Notification of Probation Status to Employees

Commented [D12]: 2660(h) is gross negligence

Discipline:

Minimum: Revocation, stayed, 30 days suspension, 3 years probation
 Maximum: Revocation

Conditions of Probation:

- 1) All "Standard Probation Conditions"
- 2) "Probation Conditions Specific to Violation" for consideration are: A, B, C, D, E, **F**

"Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

Refer to related statutes: B&P Code ~~§ 2261, 2262, 2660(a)~~¹, (g), (j), (r), (s)

B&P CODE § 901. REQUIREMENTS FOR LICENSE EXEMPTION ~~B&P CODE 901~~**Citation:**

Minimum Fine: \$100
 Maximum Fine: \$5,000

Refer to related statutes and regulations: B&P Code, §§ 2630.5 (c), (d), (e), (f), (g), CCR §§ 1399.99.2, 1399.99.3, 1399.99.4

B&P CODE § 2068, 2660(a)¹, NUTRITIONAL ADVICE ~~B&P CODE 2068, 2660(a)~~¹**Citation:**

Minimum Fine \$100
 Maximum Fine \$5,000

Discipline:

Minimum: Public Reprimand
 Maximum: Public Reprimand

GROSS NEGLIGENCE B&P CODE 2234(b), 2660(a)¹

Refer to related statutes: B&P Code ~~725, 2660(h)~~

REPEATED NEGLIGENT ACTS B&P CODE 2234(c), 2660(a)¹

Refer to related statute: B&P Code 2660(h)

Commented [D13]: Do we want to add Supervision Restrictions? Add terms J, K, L? And Notification to Patients – M?

Commented [D14]: 2660 . Adding the PTBC Unprof Cond should cover this violation:
 (g) ?? Failure to maintain adequate and accurate records relating to the provision of services to his or her patients.
 (j) The commission of any fraudulent, dishonest, or corrupt act that is substantially related to the qualifications, functions, or duties of a physical therapist or physical therapist assistant.
 (r) Charging a fee for services not performed.
 (s) Misrepresenting documentation of patient care or deliberate falsifying of patient records.

Commented [D15]: 2660(h) = Gross Negligence

Commented [D16]: 2660(h) = includes "repeated acts of negligence"

¹ B&P Code 2660(a) authorizes the Physical Therapy Board of California to cite the Medical Practice Act.

B&P CODE § 2234 (d), 2660(a). INCOMPETENCE B&P CODE 2234(d), 2660(a)¹

Refer to related statute: B&P Code § 2660(d), (h)

PROCURING LICENSE BY FRAUD B&P CODE 2235, 2660(a)¹

Discipline:

Revocation or cancellation is the only suitable discipline in as much as the license would not have been issued but for the fraud or misrepresentation.

Refer to statute(s) for appropriate penalties: B&P Code 498, 499, 581, 582, 583, 2660(c)

CRIMINAL CONVICTION B&P CODE 2236, 2660(a)¹

Note: If the conviction relates to the use or abuse (i.e. possession, possession for sale, trafficking, etc.) of a controlled substance for DUI or related offenses, or if the conviction was attributed to the use of a controlled substance or alcohol (i.e. disorderly conduct) the conditions applying the "Uniform Standards Regarding Substance-Abusing Healing Arts Licensees" shall be imposed.

Refer to related statutes and/or regulation: B&P Code 490, 2660(e)(f), 2661, CCR 1300.24(d)

B&P CODE § 2237, 2660(a). CONVICTION RELATED TO DRUGS B&P CODE 2237, 2660(a)¹

Discipline:

Minimum: Revocation, stayed, 30 days' suspension, 3 years' probation
Maximum: Revocation

Conditions of Probation:

- 1) All "Standard Probation Conditions"
- 2) "Probation Conditions Specific to Violation" for consideration are: A, B, C, D, M, N, P, T, U, V, W, X, Y, Z, AA

"Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

Note: If the conviction relates to the use or abuse (i.e. possession, possession for sale, trafficking, etc.) of a controlled substance for DUI or related offenses, or if the conviction was attributed to the use of a controlled substance or alcohol (i.e. disorderly conduct) the conditions applying the "Uniform Standards Regarding Substance-Abusing Healing Arts Licensees" shall be imposed.

Commented [D18]: Unnecessary – 498, 499, 581, 583, 2660(c) covers violation.

Commented [D19]: 2660 & 2661 covers violation

Commented [D20]: 2237.

(a) The conviction of a charge of violating any federal statutes or regulations or any statute or regulation of this state, regulating dangerous drugs or controlled substances, constitutes unprofessional conduct. The record of the conviction is conclusive evidence of such unprofessional conduct. 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.

(b) Discipline may be ordered in accordance with Section 2227 or the Division of Licensing may order the denial of the license when the time for appeal has elapsed, or the judgment of conviction has been affirmed on appeal, or when an order granting probation is made suspending the imposition of sentence, irrespective of a subsequent order under the provisions of Section 1203.4 of the Penal Code allowing such person to withdraw his or her plea of guilty and to enter a plea of not guilty, or setting aside the verdict of guilty, or dismissing the accusation, complaint, information, or indictment. (Amended by Stats. 1984, Ch. 1635, Sec. 1.)

NOTE: *Outright revocation for conviction of illegal sales of controlled substances unless extensive mitigation appears.*

B&P CODE § 2238, 2660(a). VIOLATION OF DRUG STATUTES B&P CODE 2238, 2660(a)[†]

Discipline:

Minimum: Revocation, stayed, 30 days suspension, 3 years probation
Maximum: Revocation

Conditions of Probation:

- 1) All "Standard Probation Conditions"
- 2) "Probation Conditions Specific to Violation" for consideration are: A, B, C, D, M, N, P, T, U, V, W, X, Y, Z, AA

"Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

The conditions applying the "Uniform Standards Regarding Substance-Abusing Healing Arts Licensees" shall be imposed.

NOTE: *Outright revocation for conviction of illegal sales of controlled substances unless extensive mitigation appears.*

B&P CODE § 2239, 2660(a). SELF ABUSE OF DRUGS OR ALCOHOL B&P CODE 2239, 2660(a)[†]

Discipline:

Minimum: Revocation, stayed, suspension until the ability to practice safely is determined, participation in the rehabilitation program, 5 years' probation or until satisfactory completion of the rehabilitation program, whichever is longer.
Maximum: Revocation

Conditions of Probation:

- 1) All "Standard Probation Conditions"
- 2) "Probation Conditions Specific to Violation" for consideration are: A, B, C, D, J, L, M, N, P, T, U, V, W, X, Y, Z, AA

"Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

The conditions applying the "Uniform Standards Regarding Substance-Abusing Healing Arts Licensees" shall be imposed.

Commented [D21]: 2238.

A violation of any federal statute or federal regulation or any of the statutes or regulations of this state regulating dangerous drugs or controlled substances constitutes unprofessional conduct.
(Amended by Stats. 1984, Ch. 1635, Sec. 2.)

Commented [D22]: 2239.

(a) The use or prescribing for or administering to himself or herself, of any controlled substance; or the use of any of the dangerous drugs specified in Section 4022, or of alcoholic beverages, to the extent, or in such a manner as to be dangerous or injurious to the licensee, or to any other person or to the public, or to the extent that such use impairs the ability of the licensee to practice medicine safely or more than one misdemeanor or any felony involving the use, consumption, or self-administration of any of the substances referred to in this section, or any combination thereof, constitutes unprofessional conduct. The record of the conviction is conclusive evidence of such unprofessional conduct.
(b) 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. The Division of Medical Quality may order discipline of the licensee in accordance with Section 2227 or the Division of Licensing may order the denial of the license when the time for appeal has elapsed or the judgment of conviction has been affirmed on appeal or when an order granting probation is made suspending imposition of sentence, irrespective of a subsequent order under the provisions of Section 1203.4 of the Penal Code allowing such person to withdraw his or her plea of guilty and to enter a plea of not guilty, or setting aside the verdict of guilty, or dismissing the accusation, complaint, information, or indictment.
(Amended by Stats. 1998, Ch. 878, Sec. 10. Effective January 1, 1999.)

[†] B&P Code 2660(a) authorizes the Physical Therapy Board of California to cite the Medical Practice Act.

Refer to related statutes: B&P Code ~~§ 2660(f)(1)(2)(3), 2660(w)~~

Commented [D23]: For consistency, deleted.

MAKING FALSE DOCUMENTS B&P CODE ~~2261, 2660(a)~~¹

Commented [D24]: Covered in 2660(s)
(s) Misrepresenting documentation of patient care or deliberate falsifying of patient records.

Refer to related statutes: B&P Code ~~810, 2262, 2660(a)¹, (c)~~

ALTERATION OF MEDICAL RECORDS B&P CODE ~~2262, 2660(a)~~¹

Commented [D25]: Covered in 2660(s)

Refer to related statutes: B&P Code ~~810, 2261, 2660(a)¹, 2660(c)~~

VIOLATION OF PROFESSIONAL CONFIDENCE B&P CODE ~~2263, 2660(a)~~¹

Commented [D26]: Covered under 2660(u) The willful, unauthorized violation of professional confidence.
2660(v) Failing to maintain confidentiality, except as otherwise required or permitted by law, of all information that has been received from a patient in confidence during the course of treatment and all information about the patient that is obtained from tests or other means.

Refer to related statute: B&P Code ~~2660(u)~~

AIDING AND ABETTING UNLICENSED PRACTICE B&P CODE ~~2264, 2660(a)~~¹

Refer to related statutes and/or regulation: B&P Code ~~2630, 2660(i), CCR 1399~~

FALSE OR MISLEADING ADVERTISING B&P CODE ~~2271, 2660(a)~~¹

Commented [D28]: Covered under 2660(b).
(b) Advertising in violation of Section 17500.

Refer to related statutes and/or regulation: B&P Code ~~651, 2660(b), 17500, CCR 1398.10~~

EMPLOYMENT OF RUNNERS, CAPPERS AND STEERERS B&P CODE ~~2273, 2660(a)~~¹

Commented [D29]: Covered under 2660(t).
(t) Except as otherwise allowed by law, the employment of runners, cappers, steerers, or other persons to procure patients.

Refer to related statute: B&P Code ~~2660(t)~~

B&P CODE ~~§ 2274, 2660(a)~~. UNAUTHORIZED USE OF MEDICAL DESIGNATION B&P CODE ~~2274, 2660(a)~~¹

Commented [D30]: 2274.
(a) The use by any licensee of any certificate, of any letter, letters, word, words, term, or terms either as a prefix, affix, or suffix indicating that he or she is entitled to engage in a medical practice for which he or she is not licensed constitutes unprofessional conduct.
(b) Nothing in this section shall be construed to prohibit a physician and surgeon from using the designations specified in this section if he or she has been issued a retired license under Section 2439.

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

¹ B&P Code 2660(a) authorizes the Physical Therapy Board of California to cite the Medical Practice Act.

Discipline:

Minimum: Revocation, stayed, 30 days' suspension, 3 years' probation
 Maximum: Revocation

Conditions of Probation in Addition to Standard Conditions: NONE

~~VIOLATION OF PROFESSIONAL CORPORATION ACT B&P CODE 2286, 2660(a)¹~~

Citation: _____

Minimum Fine: \$100

Maximum Fine: \$5,000

Discipline:

Minimum: Public Reprimand

Maximum: Revocation

Conditions of Probation in Addition to Standard Conditions: NONE

~~Refer to related statute: B&P Code 2691~~

~~IMPERSONATION OF APPLICANT IN EXAM B&P CODE 2288, 2660(a)¹~~**Discipline:** _____

Revocation or denial of license

~~Refer to related statutes: B&P Code 584, 2660.7~~

~~B&P CODE § 2289, 2660(a). IMPERSONATION- PRACTICE OF MEDICINE B&P CODE 2289, 2660(a)¹~~**Discipline:**

Minimum: Revocation, stayed, 180 days' suspension, 7 years' probation

Maximum: Revocation

Conditions of Probation:

- 1) All "Standard Probation Conditions"
- 2) "Probation Conditions Specific to Violation" for consideration are: A, B, C, D, E, G, J, K, L, M, N, O

"Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

(Term "F" to be used only when self-employed or owner)

~~Refer to related statutes: B&P § Code 2660(i), (j)~~

Commented [D31]: Covered under 2691. 2286.

It shall constitute unprofessional conduct for any licensee to violate, to attempt to violate, directly or indirectly, to assist in or abet the violation of, or to conspire to violate any provision or term of Article 18 (commencing with Section 2400), of the Moscone-Knox Professional Corporation Act (Part 4 (commencing with Section 13400) of Division 3 of Title 1 of the Corporations Code), or of any rules and regulations duly adopted under those laws.

2691.

It shall constitute unprofessional conduct and a violation of this chapter for any person licensed under this chapter to violate, attempt to violate, directly or indirectly, or assist in or abet the violation of, or conspire to violate any provision or term of this article, the Moscone-Knox Professional Corporation Act, or any regulations duly adopted under those laws.

Commented [D32]: Covered in B&P 584.

2288. The impersonation of any applicant or acting as proxy for any applicant in any examination required under this chapter for a certificate constitutes unprofessional conduct.
 (Repealed and added by Stats. 1980, Ch. 1313, Sec. 2.)

Commented [D33]: 2289.

The impersonation of another licensed practitioner or permitting or allowing another person to use his or her certificate to engage in the practice of medicine or podiatric medicine constitutes unprofessional conduct.

Commented [D34]: Add?

C: Restriction of Practice – Prohibition of Home Health Care

Commented [D35]: (Not sure why this is included)

G: Restriction of Practice – Third Party Presence

Commented [D36]: (Restrictions of supervision included but not of PTA)

K: Restriction of Practice – No Supervision of Physical Therapist Assistants

Commented [D37]:

(i) Aiding or abetting any person to engage in the unlawful practice of physical therapy.

ADD:

(j) The commission of any fraudulent, dishonest, or corrupt act that is substantially related to the qualifications, functions, or duties of a physical therapist or physical therapist assistant.

B&P CODE § 2608.5. AUTHORIZATION TO INSPECT PATIENT RECORDS ~~B&P CODE 2608.5~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reprimand
Maximum: Revocation

Conditions of Probation in Addition to Standard Conditions: NONE

Refer to related statute and/or regulation: ~~B&P Code 2660 (u)~~, CCR § 1399.24(c)

B&P CODE § 2620.3. TOPICAL MEDICATIONS ~~B&P CODE 2620.3~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reprimand
Maximum: Revocation

Conditions of Probation in Addition to Standard Conditions: NONE

Refer to related regulations: CCR §§1399.77, 1399.78, 1399.79

B&P CODE § 2620.5. CERTIFICATION TO PENETRATE TISSUE FOR THE PURPOSE OF NEUROMUSCULAR EVALUATION ~~B&P CODE 2620.5~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Revocation, stayed, 5 days' suspension, 3 years' probation
Maximum: Revocation

Conditions of Probation:

- 1) All "Standard Probation Conditions"
- 2) "Probation Conditions Specific to Violation" for consideration are: D

"Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

Commented [D38]: 2608.5 - Authority to inspect, review etc..

Deleted (u). We have the authority to review & inspect, so they would not be in violation of professional confidence. Not sure why 'u' was included.

u: The willful, unauthorized violation of professional confidence.

Commented [D39]: Add:

1394.24 Unprofessional Conduct – In addition to the conduct described in Section 2660 of the Code, "unprofessional conduct" also includes but is not limited to the following:

(c) Failure to cooperate and participate in any board investigation pending against the licensee...

Refer to related statute and/or regulation: B&P Code § 2660(d), CCR § 1399.61

B&P CODE § 2620.7. MAINTENANCE OF PATIENT RECORDS ~~B&P CODE 2620.7~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reproval
Maximum: Revocation

Conditions of Probation:

- 1) All "Standard Probation Conditions"
- 2) "Probation Conditions Specific to Violation" for consideration are: A, B, O

"Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

Refer to related statute and/or regulation: B&P Code § 2660(g), CCR § 1398.13

B&P CODE § 2622. PHYSICAL THERAPIST PATIENT CARE RESPONSIBILITY & AND USE OF ASSISTIVE PERSONNEL ~~B&P CODE 2622~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reproval
Maximum: Revocation

Refer to related statutes and/or regulations: B&P Code §§ 2630.3, 2630.4, ~~2633~~, CCR § 1398.44, 1399

B&P CODE § 2630. UNLICENSED PRACTICE AS A PHYSICAL THERAPIST
~~B&P CODE 2630~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Revocation, stayed, 30 days' suspension, 5 years' probation
Maximum: Revocation

Commented [D40]:
2633 – Authorized titles to use as a P.T.

Commented [D41]: This is the unlawful practice of physical therapy (Unlicensed practice) - why does this have conditions of probation and/or discipline? Unless it's a PTA. If so, then probation conditions must be changed to fit PTA or two standards one for PT and one for PTA..

Conditions of Probation:

- 1) All "Standard Probation Conditions"
- 2) "Probation Conditions Specific to Violation" for consideration are: A, B, J, K, L

"Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

Refer to related statutes and/or regulation: B&P Code §§ ~~2264, 2633, 2660(a)~~[†] (i), (j)

B&P CODE § 2630.3. PHYSICAL THERAPIST ASSISTANT LICENSE & SUPERVISION REQUIREMENTS ~~B&P 2630.3~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Revocation, stayed, 30 days' suspension, 5 years' probation
Maximum: Revocation

Conditions of Probation:

- 1) All "Standard Probation Conditions"
- 2) "Probation Conditions Specific to Violation" for consideration are: A, J, K, L, O

"Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

Refer to related statutes and/or regulation: B&P Code §§ ~~2264, 2660(a)~~[†] (j), 2622(a), (b), 2633.5, CCR § 1398.44

B&P CODE § 2630.4. PHYSICAL THERAPY AIDE SUPERVISION REQUIREMENTS ~~B&P 2630.4~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Revocation, stayed, 30 days' suspension, 5 years' probation
Maximum: Revocation

[†] B&P Code 2660(a) authorizes the Physical Therapy Board of California to cite the Medical Practice Act.

Commented [D42]: Deleted above.

Commented [D43]: Add: 2633 (a) - ...No other person shall be so designated or shall use the term licensed or registered ...

Commented [D44]: Add:

(j) The commission of any fraudulent, dishonest, or corrupt act that is substantially related to the qualifications, functions, or duties of a physical therapist or physical therapist assistant.

Commented [D45]: 2264 deleted above.

Commented [D46]: Add:
2622.

(a) A physical therapist shall be responsible for managing all aspects of the care of each patient as set forth in regulations promulgated by the board.
(b) A physical therapist shall not supervise more than two physical therapist assistants at one time to assist the physical therapist in his or her practice of physical therapy.

Commented [D47]: A Add:
2633.5.

(a) Only a person licensed as a physical therapist assistant by the board may use the title "physical therapist assistant" or "physical therapy assistant" or the letters "PTA" or any other words, letters, or figures that indicate that the person is a physical therapist assistant licensed pursuant to this chapter.
(b) The license of a physical therapist assistant shall not authorize the use of the prefix "LPT," "RPT," "PT," or "Dr.," or the title "physical therapist," "therapist," "doctor," or any affix indicating or implying that the physical therapist assistant is a physical therapist or doctor.

Conditions of Probation:

- 1) All "Standard Probation Conditions"
- 2) "Probation Conditions Specific to Violation" for consideration are: A, J, K, L, O

"Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

Refer to related statutes and regulation: B&P Code §§ 2622(a),(c), 2660(j), CCR § 1399.1398.44

B&P CODE § 2630.5. Persons Exempt from Licensure Requirements

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Refer to related statutes and regulations: B&P Code § 901, CCR §§ 1399.99.2, 1399.99.3, 1399.99.4

B&P CODE § 2633. AUTHORIZED USE OF TITLE "P.T." AND "PHYSICAL THERAPIST" PERMITTED TITLES & AND OTHER DESIGNATIONS; DOCTORAL DEGREE B&P CODE 2633

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Revocation, stayed, 30 days' suspension, 5 years' probation
Maximum: Revocation

Conditions of Probation:

- 1) All "Standard Probation Conditions"
- 2) "Probation Conditions Specific to Violation" for consideration are: A

"Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

Refer to related statute: B&P Code § 2630

Commented [D48]: Add: §622.

(a) A physical therapist shall be responsible for managing all aspects of the care of each patient as set forth in regulations promulgated by the board.
(c) A physical therapist may utilize the services of one aide engaged in patient-related tasks to aid the physical therapist in his or her practice of physical therapy.

2660 (j) Fraudulent, Dishonest or Corrupt Act

Commented [D49]: Quoted wrong CCR

Commented [D50]: Add:
B&P 2630.5 - Referred to as Related Code in B&P 901.

Commented [D51]: Add: §630.

It is unlawful for any person or persons to practice, or offer to practice, physical therapy in this state for compensation received or expected, or to hold himself or herself out as a physical therapist, unless at the time of so doing the person holds a valid, unexpired, and unrevoked physical therapist license issued under this chapter, except as authorized by subdivisions (c), (d), (e), and (g) of Section 2630.5.

B&P CODE § 2633.5. AUTHORIZED USE OF TITLE “PHYSICAL THERAPIST ASSISTANT” & PROHIBITIONS OF USING AFFIXES B&P-2633.5

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Revocation, stayed, 30 days' suspension, 5 years' probation
Maximum: Revocation

Conditions of Probation:

- 1) All "Standard Probation Conditions"
- 2) "Probation Conditions Specific to Violation" for consideration are: A

"Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

Refer to related statute: B&P Code § 2630.3(b)

B&P CODE § 2633.7. AUTHORIZED USE OF TITLE BY “PHYSICAL THERAPIST STUDENT” OR “PHYSICAL THERAPIST ASSISTANT STUDENT” B&P-2633.7

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Issue Initial Probationary License
Maximum: Deny Application

Conditions of Probation in Addition to Standard Conditions: NONE

Refer to related regulations: CCR §§ 1398.37, 1398.52

B&P CODE § 2636.5. REQUIREMENTS FOR OBTAINING LICENSURE WITHOUT A WRITTEN EXAMINATION AND APPLICANT STATUS FOR A PHYSICAL THERAPIST OR PHYSICAL THERAPIST ASSISTANT B&P CODE 2636.5

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Issue Initial Probationary License
Maximum: Deny Application

Commented [D52]: Add:
2630.3.

(b) It is unlawful for any person or persons to hold himself or herself out as a physical therapist assistant, unless at the time of so doing the person holds a valid, unexpired, and unrevoked physical therapist assistant license issued under this chapter, except as authorized in subdivisions (f) and (g) of Section 2630.5.

Commented [D53]: Add:

1398.52 (a) A physical therapist assistant student is an unlicensed person rendering physical therapy services as part of academic training pursuant to section 2650.1 of the Code and shall only be identified as a "physical therapist assistant student." When rendering physical therapy services, the required identification shall be clearly visible and include his or her name and working title in at least 18-point type.

Conditions of Probation in Addition to Standard Conditions: NONE

Refer to related regulations: CCR §§ 1399.10, 1399.12

B&P CODE § 2639. PHYSICAL THERAPIST &AND PHYSICAL THERAPIST ASSISTANT GRADUATE-LICENSE APPLICANT STATUS REQUIREMENTS B&P CODE 2639

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Issue Initial Probationary License
Maximum: Deny Application

Conditions of Probation in Addition to Standard Conditions: NONE

Refer to related regulations: CCR §§ 1399.10, 1399.12

B&P 2639.1. EQUIVALENT TRAINING REQUIREMENTS – PHYSICAL THERAPIST ASSISTANT B&P 2639.4

Discipline:

Minimum: Issue Initial Probationary License
Maximum: Deny Application

Conditions of Probation in Addition to Standard Conditions: NONE

B&P CODE § 2644. EXPIRATION AND RENEWAL OF LICENSE, DISCLOSURE OF MISDEMEANOR OR CRIMINAL OFFENSE &AND CONTINUING COMPETENCY REQUIREMENTS –B&P CODE 2644

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reproval
Maximum: Revocation

Refer to related statute & regulation: B&P Code § 2649, CCR § 1399.24(d)

Commented [D54]: Add: CCR 1399.12
PTALA Supervision Requirements

Commented [D55]: Probation? Add violation specific conditions

Commented [D56]: ADD: Failure to Report 1399.24
(d) Failure to report to the board within 30 days any of the following:
(1) The bringing of an indictment or information charging a felony against the licensee.
(2) The arrest of the licensee.
(3) The conviction of the licensee, including any verdict of guilty, or pleas of guilty or no contest, of any felony or misdemeanor.
(4) Any disciplinary action taken by another licensing entity or authority of this state or of another state or an agency of the federal government or the United States military.
(5) Any report required to be made pursuant to Business and Professions Code section 802 regarding settlements, judgments, or arbitration awards.

B&P CODE § 2648.7. RETIRED STATUS B&P CODE 2648.7

Commented [D57]: Pending Sunset Omnibus-May be repealed

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reproval
Maximum: Revocation

B&P CODE § 2649. DEMONSTRATION OF CONTINUING COMPETENCY REQUIREMENT B&P CODE 2649

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reproval
Maximum: Revocation

Conditions of Probation in Addition to Standard Conditions: NONE

Refer to related statute and regulations: B&P Code § 2644, CCR §§1399.91, 1399.92, 1399.93, 1399.94, 1399.97, 1399.98, 1399.99

Commented [D58]:
ADD:
Contin. Comp Requirements etc..

B&P CODE § 2653. REQUIREMENTS OF GRADUATES FROM FOREIGN SCHOOLS B&P CODE 2653

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Issue Initial Probationary License
Maximum: Deny Application

Conditions of Probation in Addition to Standard Conditions: NONE

Refer to related regulations: CCR §§ 1398.26, 1398.26.5

B&P CODE § 2660(a). VIOLATION OF THE PHYSICAL THERAPY OR MEDICAL PRACTICE ACTS ~~B&P 2660(a)~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

See specific statute violated.

Note: B&P Code § 2660(a) authorizes the ~~Physical Therapy Board of California~~ to cite violations of the Medical Practice Act; therefore, whenever the Board cites violations of the Medical Practice Act, the Board must also cite ~~are cited~~ B&P Code § 2660(a) ~~must also be cited~~.

B&P CODE § 2660(b). ADVERTISING IN VIOLATION OF B&P Code § 17500 ~~B&P CODE 2660(b)~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reprimand
Maximum: Public Reprimand

Refer to related statutes and/or regulation: B&P Code §§ 651, ~~2274~~, 17500, CCR § 1398.10

B&P CODE § 2660(c). PROCURING A LICENSE BY FRAUD OR MISREPRESENTATION ~~B&P CODE 2660(c)~~

Discipline: (Prior to Licensure)

Minimum: Issue Initial Probationary License
Maximum: Deny Application

Discipline: (After Licensure)

Revocation or cancellation is the only suitable discipline in as much as the license would not have been issued but for the fraud or misrepresentation.

Refer to related statutes: B&P Code §§ 498, 499, 581, 582, 583, ~~2235~~, ~~2660(a)~~

Commented [D59]: 2660 a – is a catch all.

(a) Violating or attempting to violate, directly or indirectly, assisting in or abetting the violation of, or conspiring to violate any provision of this chapter, any regulations duly adopted under this chapter, or the Medical Practice Act (Chapter 5 (commencing with Section 2000)).

All violations of the PT Act are unprofessional conduct. May add language to note below.

Commented [D60]: Deleted above.

Commented [D61]: Deleted above.

B&P CODE § 2660(d). PRACTICING OR OFFERING TO PRACTICE BEYOND SCOPE OF PRACTICE OF PHYSICAL THERAPY ~~B&P CODE 2660(d)~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Revocation, stayed, 30 days' suspension or until proficiency to practice safely is determined, 3 years' probation following return to practice.
Maximum: Revocation

Conditions of Probation:

- 1) All "Standard Probation Conditions"
- 2) "Probation Conditions Specific to Violation" for consideration are: A, B, C, D, E, I, J, L, M, N, O

"Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

Refer to related statutes: B&P Code §§ 2234(d), 2660(h)

B&P CODE § 2660(e). CONVICTION OF A CRIME ~~B&P CODE 2660(e)~~

Note: If the conviction relates to the use or abuse (i.e. possession, possession for sale, trafficking, etc.) of a controlled substance for DUI or related offenses, or if the conviction was attributed to the use of a controlled substance or alcohol (i.e. disorderly conduct) the conditions applying the "Uniform Standards Regarding Substance-Abusing Healing Arts Licensees" shall be imposed.

Refer to related statutes and/or regulation: B&P Code §§ 490, ~~2236~~, 2237, 2238, 2239, 2660(a)⁺, (f), 2661, CCR § 1399.24(c),(d)

Commented [D62]: Deleted above.

Commented [D63]: Add sections pertaining to convictions.

B&P CODE § 2660(f). UNLAWFUL POSSESSION OR USE OF, OR CONVICTION OF A CRIMINAL OFFENSE INVOLVING A CONTROLLED SUBSTANCE ~~B&P CODE 2660(f)~~

Discipline:

Minimum: Revocation, stayed, suspension until the ability to practice safely is determined, participation in the rehabilitation program, 5 years' probation or until satisfactory completion of the rehabilitation program, whichever is longer.
Maximum: Revocation

⁺ B&P Code 2660(a) authorizes the Physical Therapy Board of California to cite the Medical Practice Act.

Conditions of Probation:

1) All "Standard Probation Conditions"

2) "Probation Conditions Specific to Violation" for consideration are: A, B, C, D, J, K L, M, N, P, T, U, V, W, X, Y, Z, AA

The conditions applying the "Uniform Standards Regarding Substance-Abusing Healing Arts Licensees" shall be imposed.

Refer to related statutes: B&P Code §§ 490, 2237, 2238, 2239, 2660(a)[†]

B&P CODE § 2660(g). FAILURE TO MAINTAIN ADEQUATE & AND ACCURATE PATIENT RECORDS ~~B&P CODE 2660(g)~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reproval
Maximum: Revocation

Conditions of Probation:

1) All "Standard Probation Conditions"

2) "Probation Conditions Specific to Violation" for consideration are: A, B, O

"Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

Refer to related statute and/or regulations: B&P Code § 2620.7, CCR §§ 1398.13, 1398.44, 1399, 1399.10, 1399.12.

B&P CODE § 2660(h). GROSS NEGLIGENCE OR REPEATED ACTS OF NEGLIGENCE ~~B&P CODE 2660(h)~~

Discipline:

Minimum: Revocation, stayed, 30 days' suspension or until proficiency to practice safely is determined, 3 years' probation following return to practice.
Maximum: Revocation

Commented [D64]: Added probation conditions to Mirror 2620.7

Commented [D65]: Add:
All CCR's have PT. documentation requirements. And as the supervising PT should ensure assistive personnel is also following documentation requirements.

Conditions of Probation:

- 1) All "Standard Probation Conditions"
- 2) "Probation Conditions Specific to Violation" for consideration are: A, B, C, D, E, I, J, K, L, M, N, O

"Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

Refer to related statutes: B&P Code ~~§ 725, 2234(b), 2660(a)~~[†]

B&P CODE § 2660(i). AIDING OR ABETTING UNLAWFUL PRACTICE ~~B&P CODE 2660 (i)~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reproval
Maximum: Revocation

Refer to related statutes: ~~B&P Code 2264, 2660(a)~~[†]

B&P CODE § 2660(j). FRAUDULENT, DISHONEST OR CORRUPT ACT
SUBSTANTIALLY RELATED ~~B&P CODE 2660(j)~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Revocation, stayed, 5 days' suspension, 3 years' probation
Maximum: Revocation

[†] B&P Code 2660(a) authorizes the Physical Therapy Board of California to cite the Medical Practice Act.

Conditions of Probation:

- 1) All "Standard Probation Conditions"
- 2) "Probation Conditions Specific to Violation" for consideration are: A, B, C, D, E, F, J, K, L, M, N, O

"Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

Refer to related statute: B&P Code § 810

B&P CODE § 2660(k). INFECTION CONTROL GUIDELINES ~~B&P CODE 2660(k)~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reproval
Maximum: Revocation

Conditions of Probation:

- 1) All "Standard Probation Conditions"
- 2) "Probation Conditions Specific to Violation" for consideration are: A, B, C, E, I, J

"Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

B&P CODE § 2660(l). VERBAL ABUSE OR SEXUAL HARASSMENT ~~B&P CODE 2660(l)~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reproval
Maximum: Revocation

Conditions of Probation:

- 1) All "Standard Probation Conditions"
- 2) "Probation Conditions Specific to Violation" for consideration are: A, B, C, Q

"Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

B&P CODE § 2660(m). SEXUAL MISCONDUCT OR VIOLATING B&P CODE § 726
B&P CODE 2660 (m)

Note: Pursuant to CCR §1399.15, any findings the licensee committed a sex offense or been convicted of a sex offense, the order shall revoke the license. The proposed decision shall not contain an order staying the revocation of the license.

Refer to related statutes and/or regulation: B&P Code §§ 726, 2660.1, CCR § 1399.15(b)

B&P CODE § 2660(n). PERMITTING PHYSICAL THERAPIST ASSISTANT AND/OR AIDE TO PERFORM, HOLD HIMSELF/HERSELF OUT AS COMPETENT TO PERFORM BEYOND LEVEL OF EDUCATION, TRAINING AND EXPERIENCE OF P.T.A. AND/OR AIDE
B&P CODE 2660 (n)

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reproval
Maximum: Revocation

Refer to related statutes: B&P Code § 2264, 2660(a)⁺, (i), (j)

B&P CODE § 2660(o). ADVSERSE ACTION TAKEN BY ANOTHER STATE OR AGENCY OF THE FEDERAL GOVERNMENT
B&P CODE 2660 (o)

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

If violation is an offense in California, refer to corresponding statute. If not, the Board shall consider the discipline order from the state, federal government, or country of discipline when determining disciplinary action.

Commented [D67]: ADD:
2660.1 Presumption Regarding Incapability to Consent to Sexual Activity

Commented [D68]: ADD:
(b) Specific to sexual misconduct violation.

Commented [D69]: ADD:
(i) Aiding and Abetting
(j) Fraudulent, Dishonest, Corrupt Act

Refer to related statute and regulation: B&P Code § 141, CCR § 1399.24(c),(d)

B&P CODE § 2660(p). INAPPROPRIATE VIEWING OF DISROBED PATIENT IF UNNECESSARY TO PATIENT EVALUATION OR TREATMENT ~~B&P CODE 2660 (p)~~

Discipline:

Minimum: Public Reproval
Maximum: Revocation

“Probation Conditions Specific to Violation” for consideration are: A, B, C, D, G,

Note: This is a variation of inappropriate treatments. Consider conditions of 726.

Refer to related statutes: B&P Code §§ 726, 2660(m), 2660.1

B&P CODE § 2660(q). ENGAGING IN ACTS IN VIOLATION OF SECTION ~~B&P Code §§ 650, 651, OR 654.2~~ ~~B&P CODE 2660 (q)~~

Refer to related statute and/or regulation: B&P Code §§ 650, 651, & 654.2

B&P CODE § 2660(r). CHARGING FEES FOR SERVICES NOT PROVIDED ~~B&P CODE 2660 (r)~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reproval
Maximum: Revocation

Refer to related statutes: B&P Code § ~~2261~~, 2262, 2660(s)

B&P CODE § 2660(s). MISREPRESENTING DOCUMENTATION AND/OR FALSIFYING OF PATIENT RECORDS ~~B&P CODE 2660 (s)~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Revocation, stayed, 30 days' suspension, 3 years' probation
Maximum: Revocation

Conditions of Probation:

- 1) All "Standard Probation Conditions"
- 2) "Probation Conditions Specific to Violation" for consideration are: A, B, C, D, E, F

"Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

Refer to related statutes: B&P Code ~~§ 2261, 2262, 2660(a), (r)~~

B&P CODE § 2660(t). EMPLOYMENT OF RUNNERS, CAPPERS, STEERERS, OR OTHER PERSONS ~~B&P CODE 2660 (t)~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Revocation, stayed, 30 days' suspension, 3 years' probation
Maximum: Revocation

Conditions of Probation:

- 1) All "Standard Probation Conditions"
- 2) "Probation Conditions Specific to Violation" for consideration are: F, Q

"Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

Refer to related statute: B&P § Code ~~650, 2273, 2660(a)~~

B&P CODE § 2660(u). THE WILLFUL, UNAUTHORIZED VIOLATION OF PROFESSIONAL CONFIDENCE ~~B&P CODE 2660 (u)~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Revocation, stayed, 30 days' suspension, 3 years' probation
Maximum: Revocation

Commented [D72]: ADD: 650
For consistency: B&P 2660(t) is referred to in B&P 650 above.

Commented [D73]: Deleted above.

¹ B&P Code 2660(a) authorizes the Physical Therapy Board of California to cite the Medical Practice Act.

Conditions of Probation:

- 1) All "Standard Probation Conditions"
- 2) "Probation Conditions Specific to Violation" for consideration are: O (course should include HIPPA requirements)

"Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

~~Refer to related statute: B&P Code 2263, 2660(a)¹~~

B&P CODE § 2660(v). FAILING TO MAINTAIN PATIENT CONFIDENTIALITY B&P CODE 2660 (v)

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reprimand
Maximum: Revocation

"Probation Conditions Specific to Violation" for consideration are: O (course should include HIPPA requirements)

B&P CODE § 2660(w). HABITUAL INTEMPERANCE B&P CODE 2660 (w)

The conditions applying the "Uniform Standards Regarding Substance-Abusing Healing Arts Licensees" shall be imposed.

~~Refer to related statute: B&P Code 2239, 2660(a)¹~~

B&P CODE § 2660(x). FAILURE TO COMPLY WITH THE PROVISIONS OF SECTION B&P CODE § 2620.1 B&P CODE 2660(x)

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reprimand
Maximum: Revocation

¹ ~~B&P Code 2660(a) authorizes the Physical Therapy Board of California to cite the Medical Practice Act.~~

B&P CODE § 2660.1. PRESUMPTION REGARDING INCAPABILITY TO CONSENT TO SEXUAL ACTIVITY ~~B&P CODE 2660.1~~

Note: Pursuant to CCR §1399.15(b), any findings the licensee committed a sex offense or been convicted of a sex offense, the order shall revoke the license. The proposed decision shall not contain an order staying the revocation of the license.

Refer to related statutes and/or regulation: B&P Code §§ 726, 2660(m), ~~2660(p)~~, CCR §1399.15(b)

Commented [D74]: Add section (b) pertaining to offense; otherwise looks like its regarding the guidelines 1399.15. Confusing.

B&P CODE § 2660.2. ISSUANCE OF PROBATIONARY LICESE APPLICANTS

Refer to related statutes and/or regulation: B&P Code § 2661

B&P CODE § 2660.4. FAILURE OR REFUSAL TO PROVIDE MEDICAL RECORDS
~~B&P CODE 2660.4~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Maximum: Public Reproval

A licensee who fails or refuses to comply with a request from the Board for the medical records of patient, that is accompanied by that patient's written authorization for release of records to the Board, within 15 days of receiving the request and authorization, shall pay the Board a civil penalty of one thousand dollars (\$1,000.00) per day for each day that the records have not been produced after the 15th day, unless the licensee is unable to provide records within this time period for good cause.

Refer to related regulations: CCR §1399.24(b),(c),(e)

Commented [D75]: ADD:
(b) Failure to provide Board Records
(c) Failure to cooperate with Board's investigation
(e) Failure to comply with court order

B&P CODE § 2660.5. DENIAL OF LICENSE IN SPECIFIED CIRCUMSTANCES - REGISTERED SEX OFFENDER (APPLICANT)
~~B&P 2660.5~~

Discipline: Denial of License

B&P CODE § 2660.7. SUBVERSION OF EXAMINATION ~~B&P 2660.7~~

Refer to related statutes for appropriate penalties: B&P Code §§ 123, 584, ~~2288~~, 2660 (a)[†], (i), (k)

Commented [D76]: Delete (k) – Infection Control Guidelines and replace with (j) Fraudulent, dishonest or Corrupt Act

[†] B&P Code 2660(a) authorizes the Physical Therapy Board of California to cite the Medical Practice Act.

B&P CODE § 2661. CONVICTION OF CRIME ~~B&P CODE 2661~~

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 article. A conviction demonstrates a lack of judgment and unwillingness to obey a legal prohibition and also exhibits characteristics and actions that do not demonstrate that he or she exercises prudence and good judgment. Therefore, the conviction is substantially related to the qualifications, functions and duties as a licensee.

Note: B&P Code § 2661 should be cited in conjunction with a conviction violation since it defines the conviction being of substantial relationship to the qualifications, functions and duties, and should not stand alone as its own cause.

Refer to related statutes and/or regulations: B&P Code §§ 490, ~~2236~~, ~~2660~~, 2660(e), ~~2660.2~~, CCR §§ 1399.23, 1399.24(c),(d)

B&P CODE § 2691. PHYSICAL THERAPY CORPORATION ~~B&P CODE 2691~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reprimand
Maximum: Revocation

Conditions of Probation in Addition to Standard Conditions: NONE

Refer to related ~~statute~~ regulations: CCR §§ 1399.35, 1399.37, 1399.39. ~~B&P Code 2286~~
Note: If a licensee violates this section it would be a criminal offense; therefore, also see B&P Code § ~~2236~~ ~~2660(e)~~

B&P CODE § 2692. UNPROFESSIONAL CONDUCT- CORPORATION ~~B&P CODE 2692~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reprimand
Maximum: Revocation

Commented [D77]: Deleted above.

Commented [D78]: Should 2660 stand alone for Unprofessional Conduct?

Commented [YE79]: Per Legal, for consistency add 2660.2

Commented [D80]: Conditions added duplicative to B&P 2286. 2286 deleted above.

Commented [D81]: Both MBC codes deleted above.

B&P CODE § 2693. CORPORATION NAME

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reprimand
Maximum: Revocation

B&P CODE § 2694. DIRECTORS AND OFFICERS

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reprimand
Maximum: Revocation

VIOLATION OF PROBATION

Discipline:

Implementation of Original Stayed Order.

NOTE: The maximum penalty should be given for repeated similar offenses or for probation violations revealing a cavalier or recalcitrant attitude.

B&P CODE §17500. FALSE ADVERTISING

Refer to statutes and regulations for appropriate penalties: B&P Code §§ 651, 2660(b), 2660(q), CCR § 1398.10

Commented [D82]: Referenced as a related violation in: CCR 1398.10, B&P 651, 2660 (b)

TITLE 16, CALIFORNIA CODE OF REGULATIONS

CCR § 1398.6. FILING OF ADDRESSES, EMAIL ADDRESSES & AND NAME CHANGE ~~CCR 1398.6~~

Refer to statutes for appropriate penalties: B&P Code §§ 136, 2660

CCR § 1398.10. ADVERTISING ~~CCR 1398.10~~

Refer to related statute(s) for appropriate penalties: B&P Code §§ 651, ~~2274~~, 2660(b)(a)
⁴, ~~H&S Code 17500~~

Commented [D83]: Removed above.

Commented [D84]: 17500 is a B&P not H&S

CCR § 1398.11. PHYSICAL THERAPY AIDE, APPLICANT, STUDENT AND INTERN IDENTIFICATION ~~CCR 1398.11~~

Refer to related statute(s) for appropriate penalties: B&P Code § 680

CCR § 1398.13. PATIENT RECORD DOCUMENTATION REQUIREMENT ~~CCR 1398.13~~

Refer to related statute(s) for appropriate penalties: B&P Code § 2620.7

CCR § 1398.15. NOTICE TO CONSUMERS (FORM NTC 12-01) ~~CCR 1398.15~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reprimand
Maximum: Public Reprimand

Refer to related statute: B&P Code § 2660

CCR § 1398.26. APPLICATIONS OF FOREIGN EDUCATED GRADUATES ~~CCR 1398.26~~

Refer to related statute(s) for appropriate penalties: B&P Code § 2653

CCR § 1398.26.5. CLINICAL SERVICE REQUIREMENTS FOR FOREIGN EDUCATED APPLICANTS ~~CCR 1398.26.5~~

Refer to related statute(s) for appropriate penalties: B&P Code § 2653

⁴ B&P Code 2660(a) authorizes the Physical Therapy Board of California to cite the Medical Practice Act.

CCR § 1398.37. IDENTIFICATION AND SUPERVISION OF PHYSICAL THERAPIST STUDENTS AND INTERNS DEFINED CCR-1398.37

Refer to related statute(s) for appropriate penalties: B&P Code § 2633.7

CCR § 1398.44. SUPERVISION OF PHYSICAL THERAPIST ASSISTANTS CCR 1398.44

Refer to statute(s) for appropriate penalties: B&P Code §§ 2660(a), 2622, 2630.3

CCR § 1398.52. IDENTIFICATION AND SUPERVISION OF PHYSICAL THERAPIST ASSISTANT STUDENTS AND INTERNS DEFINED CCR-1398.52

Refer to related statute(s) for appropriate penalties: B&P Code § ~~2630.5~~2633.7

CCR § 1399. REQUIREMENTS FOR USE OF AIDES CCR-1399

Refer to related statute(s) for appropriate penalties: B&P Code § ~~2264~~, ~~2630~~, ~~2630.4~~ 2660(a)

CCR § 1399.10. SUPERVISION OF PHYSICAL THERAPISTS LICENSE APPLICANTS CCR-1399.10

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Revocation, stayed, 5 days' suspension, 3 years' probation
Maximum: Revocation

Conditions of Probation:

- 1) All "Standard Probation Conditions"
 - 2) "Probation Conditions Specific to Violation" for consideration are: A, B, J, K, M
- "Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

Refer to related statute(s) for appropriate penalties: B&P Code § 2636.5, 2639

CCR § 1399.12. SUPERVISION OF PHYSICAL THERAPIST ASSISTANT LICENSE APPLICANTS CCR-1399.12

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Commented [D85]: 2630.3.

(a) A licensed physical therapist assistant holding a valid, unexpired, and unrevoked physical therapist assistant license may assist in the provision of physical therapy services only under the supervision of a physical therapist licensed by the board. A licensed physical therapist shall at all times be responsible for the extent, kind, quality, and documentation of all physical therapy services provided by the physical therapist assistant.
(b) It is unlawful for any person or persons to hold himself or herself out as a physical therapist assistant, unless at the time of so doing the person holds a valid, unexpired, and unrevoked physical therapist assistant license issued under this chapter, except as authorized in subdivisions (f) and (g) of Section 2630.5.
(c) Physical therapist assistants shall not be independently supervised by a physical therapist license applicant, as defined in Section 2639, or a physical therapist student, as defined in Section 2633.7.
(d) A physical therapist assistant shall not perform any evaluation of a patient or prepare a discharge summary. The supervising physical therapist shall determine which elements of the treatment plan, if any, shall be assigned to the physical therapist assistant. Assignment of patient care shall be commensurate with the competence of the physical therapist assistant.

Commented [D86]: Replace 2630.5 (Persons Exempt from Licensure Requirements) with correct code – 2633.7 (Authorized Use of Title PT or PTA Student)

Commented [D87]: 2630 requirements/authority for the use of aides was moved to 2630.4

Commented [D88]: 2630.4.

(a) A "physical therapy aide" is an unlicensed person, at least 18 years of age, who aids a licensed physical therapist consistent with subdivision (b).
(b) The aide shall at all times be under the supervision of the physical therapist. An aide shall not independently perform physical therapy or any physical therapy procedure. The board shall adopt regulations that set forth the standards and requirements for the supervision of an aide by a physical therapist.
(c) Physical therapy aides shall not be independently supervised by a physical therapist license applicant, as defined in Section 2639, or a physical therapist student, as defined in Section 2633.7.
(d) This section does not prohibit the administration by a physical therapy aide of massage, external baths, or normal exercise not a part of a physical therapy treatment.

Discipline:

Minimum: Revocation, stayed, 5 days' suspension, 3 years' probation
 Maximum: Revocation

Conditions of Probation:

- 1) All "Standard Probation Conditions"
- 2) "Probation Conditions Specific to Violation" for consideration are: A, B, J, K, M

"Probation Conditions Specific to Violation" should be considered individually since some, or all, may **not** apply.

Refer to related statute(s): B&P Code §§ 2636.5, 2639

CCR § 1399.15(b). DISCIPLINARY GUIDELINES – SEX OFFENSE**Discipline:**

Revocation or Denial of License

Refer to related statutes for appropriate penalties: B&P Code §§ 726, 2660(m), 2660.1

**CCR § 1399.23. REQUIRED ACTIONS AGAINST REGISTERED SEX OFFENDERS
CCR 1399.23****Discipline:**

Revocation or Denial of License

Refer to related statute(s) and regulation for appropriate penalties: B&P Code §§ 480, 726, 2660.1, 2660.5, 2608, 2660.2, 2661, CCR § 1399.15(b)

**CCR § 1399.24(a). PROHIBITING ANOTHER PARTY FROM COOPERATING WITH OR
DISPUTING A COMPLAINT CCR 1399.24(a)****Citation:**

Minimum Fine: \$100
 Maximum Fine: \$5,000

Discipline:

Minimum: Public Reprimand
 Maximum: Revocation

Standard Conditions Only

**CCR § 1399.24(b). FAILURE TO PROVIDE CERTIFIED DOCUMENTS
CCR 1399.24(b)**

Refer to related statute for appropriate penalties: B&P Code § 2608.5

Commented [D89]: ADD:

Referenced as a related code in 726 & 2660(m). 1399.15(b) includes language to Order to revoke for any findings of sexual offense ...

**Commented [D90]: Delete:
Authority to..****~~180 Authority to Deny~~**

~~2608.~~ The procedure in all matters and proceedings relating to the denial, suspension, revocation, or probationary restriction of licenses issued by the board under this chapter shall be governed by the provisions of Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code.

Same with 2660.2 – authority to issue IPL or PR
 Same with 2660.5 – authority to deny
 Same with 2661 authority to discipline

Commented [D91]: ADD:

(b) Requirement ordering revocation of license without Order staying the revocation of license

CCR § 1399.24(c). FAILURE TO COOPERATE IN BOARD INVESTIGATION ~~1399.24(c)~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reproval
Maximum: Revocation
Standard Conditions Only

CCR § 1399.24(d). FAILURE TO REPORT TO BOARD CRIMINAL OR DISCIPLINARY INFORMATION ~~CCR 1399.24(d)~~

Refer to related statutes for appropriate penalties: B&P Code §§ 141, 490, 2660(e), ~~2661, 2660(e)~~

CCR § 1399.24(e). FAILURE TO COMPLY WITH SUBPOENA ORDER
~~CCR 1399.24(e)~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reproval
Maximum: Revocation

Standard Conditions Only

Refer to related statute: B&P Code § 2660

CCR § 1399.35. REQUIREMENTS FOR PROFESSIONAL CORPORATIONS

Refer to related statute for appropriate penalties: B&P Code § 2691

CCR § 1399.37. SHARES: OWNERSHIP AND TRANSFER

Refer to related statute for appropriate penalties: B&P Code § 2691

CCR § 1399.39. CORPORATE ACTIVITIES

Refer to related statute for appropriate penalties: B&P Code § 2691

CCR § 1399.61. CERTIFICATION REQUIRED - ELECTROMYOGRAPHY ~~CCR 1399.61~~

Refer to related statute(s) for appropriate penalties: B&P Code § 2620.5

CCR § 1399.77. ADMINISTRATION OF MEDICATIONS ~~CCR 1399.77~~

Refer to related statute(s) for appropriate penalties and ~~related~~ regulations: B&P Code § 2620.3, CCR §§ 1399.78, 1399.79

CCR § 1399.78. AUTHORIZATION AND PROTOCOLS REQUIRED FOR TOPICAL MEDICATIONS ~~CCR 1399.78~~

Refer to related statute(s) for appropriate penalties and ~~related~~ regulations: B&P Code § 2620.3, CCR §§ 1399.77, 1399.79

CCR § 1399.79. AUTHORIZED TOPICAL MEDICATIONS ~~CCR 1399.79~~

Refer to related statute(s) for appropriate penalties and ~~related~~ regulations: B&P Code § 2620.3, CCR §§ 1399.77, 1399.78

CCR § 1399.91. CONTINUING COMPETENCY REQUIRED ~~CCR 1399.91~~

Refer to related statute(s) for appropriate penalties: B&P Code §§ ~~2649~~, 2644, ~~2649~~

CCR § 1399.92. CONTENT STANDARDS FOR CONTINUING COMPETENCY ~~CCR 1399.92~~

Refer to related statute(s) for appropriate penalties: B&P Code §§ ~~2649~~, 2644, ~~2649~~

CCR § 1399.93. CONTINUING COMPETENCY SUBJECT MATTER REQUIREMENTS AND OTHER LIMITATIONS ~~CCR 1399.93~~

Refer to related statute(s) for appropriate penalties: B&P Code §§ ~~2649~~, 2644, ~~2649~~

CCR § 1399.94. AUTHORIZED PATHWAYS FOR OBTAINING CONTINUING COMPETENCY HOURS ~~CCR 1399.94~~

Refer to related statute(s) for appropriate penalties: B&P Code §§ ~~2649~~, 2644, ~~2649~~

CCR § 1399.95. STANDARDS FOR APPROVED AGENCIES ~~CCR 1399.95~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Maximum: Revocation of recognition as an approved agency

Refer to related statute: B&P Code § 2649

CCR § 1399.96. STANDARDS FOR APPROVED PROVIDERS ~~CCR 1399.96~~

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Maximum: Revocation of recognition as an approved provider

Refer to related statute: B&P Code § 2649,

**CCR § 1399.97. RECORD KEEPING (CONTINUING COMPETENCY)
~~CCR 1399.97~~**

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reprimand
Maximum: Revocation

Refer to related statute(s) for appropriate penalties: B&P Code ~~§§ 2649, 2644, 2649~~

**CCR § 1399.98. INACTIVE STATUS (CONTINUING COMPETENCY)
~~CCR 1399.98~~**

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reprimand
Maximum: Revocation

Refer to related statute(s) for appropriate penalties: B&P Code ~~§§ 2649, 2644, 2649~~

**CCR § 1399.99. EXEMPTION FROM CONTINUING COMPETENCY REQUIREMENTS
~~CCR 1399.99~~**

Citation:

Minimum Fine: \$100
Maximum Fine: \$5,000

Discipline:

Minimum: Public Reproval

Maximum: Revocation

Refer to related statute(s) for appropriate penalties: B&P Code §§ ~~2649, 2644, 2649~~

CCR § 1399.99.2. SPONSORING ENTITY REGISTRATION AND RECORDKEEPING REQUIREMENTS ~~CCR 1399.99.2~~

Citation:

Minimum Fine: \$100

Maximum Fine: \$5,000

Refer to related statute(s) for appropriate penalties: B&P Code § 901

CCR § 1399.99.3. OUT OF STATE PRACTITIONER AUTHORIZATION TO PARTICPATE IN SPONSORED EVENT ~~CCR 1399.99.3~~

Citation:

Minimum Fine: \$100

Maximum Fine: \$5,000

Refer to related statute(s) for appropriate penalties: B&P Code § 901

CCR § 1399.99.4. TERMINATION OF AUTHORIZATION AND APPEAL (OUT OF STATE PRACTITIONER'S AUTHORIZATION) ~~CCR 1399.99.4~~

Citation:

Minimum Fine: \$100

Maximum Fine: \$5,000

Refer to related statute(s) for appropriate penalties: B&P Code § 901

HEALTH AND SAFETY CODE

H&S CODE § 123110. PATIENT'S ACCESS TO HEALTH CARE RECORDS ~~H&S CODE 123110~~

Citation:

Minimum Fine: \$100

Maximum Fine: \$5,000

Discipline:

Minimum: Revocation, stayed, 5 days' suspension, 3 years' probation

Maximum: Revocation

Conditions of Probation in Addition to Standard Conditions: NONE

Commented [JTK92]: Seems inconsistent, no public reproval?

PROBATION CONDITIONS

Probation conditions are divided into three categories: 1) Standard Conditions the Board expects in all probation cases; 2) Specific Conditions that depend on the nature and circumstances of the particular case; and 3) Conditions Specific to Alcohol and/or Controlled Substance.

STANDARD PROBATION CONDITIONS

The standard conditions generally appearing in every probation case are as follows:

1. License Revocation, Stayed

Respondent's license shall be revoked, with the revocation stayed.

2. License Suspension

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

3. Cost Recovery

Respondent is ordered to reimburse the Board the actual and reasonable investigative and prosecutorial costs incurred by the Board in the amount of \$_____, within _____ days of the effective date of this Decision and Order.

Failure to pay the ordered reimbursement, or any agreed upon payment, constitutes a violation of the probation order and may result in revocation of Respondent's license. If Respondent is in default of his responsibility to reimburse the Board, the Board will collect cost recovery ~~from~~ through the Franchise Tax Board, the Internal Revenue Service, or by any other means of attachment of earned wages legally available to the Board.

Or

Respondent is ordered to reimburse the Board the actual and reasonable investigative and prosecutorial costs incurred by the Board in the amount of \$_____. The Board or its designee may establish a payment plan for cost recovery; however, Respondent shall pay the full amount of cost recovery at least 180 days prior to completion of probation, or until Respondent has completed payment of all money owed in cost recovery, whichever is longer.

Failure to pay the ordered reimbursement, or any agreed upon payment, constitutes a violation of the probation order and may result in revocation of Respondent's license. If Respondent is in default of his responsibility

Commented [YE93]: Condition numbers 1 through X, will be corrected once conditions are approved.

to reimburse the Board, the Board will collect cost recovery ~~from~~ through the Franchise Tax Board, the Internal Revenue Service, or by any other means of attachment of earned wages legally available to the Board.

The Board shall not renew or reinstate the license of any respondent who has failed to pay all the costs as ordered in a Decision.

Commented [KJ94]: Taken from OT Guidelines.

Note: Costs represent the actual investigative and prosecutorial costs.

4. Obey All Laws

Respondent shall obey all federal, state and local laws, the statutes and regulations governing the practice of physical therapy, and remain in full compliance with any court ordered criminal probation. This condition applies to any jurisdiction with authority over Respondent, ~~whether it is inside or outside of California.~~

Commented [KJ95]: Consider removal or change language. "Any" is clear that it is any jurisdiction, and not only in California.

Further, Respondent shall, within five (5) days ~~of~~ after any arrest, submit to the Board in writing a full and detailed account of such arrest to include the name and address of the arresting agency.

5. Compliance with Orders of a Court

Respondent shall be in compliance with any valid order of a court. Being found in contempt of any court order is a violation of probation.

6. Compliance with Criminal Probation and Payment of Restitution

Respondent shall not violate any terms or conditions of criminal probation and shall be in compliance with any restitution ordered, payments, or other orders.

7. Quarterly Reports

Respondent shall submit quarterly reports under penalty of perjury on forms provided by the Board, stating whether there has been compliance with all conditions of probation.

8. Probation Monitoring Program Compliance

Respondent shall comply with the Board's probation monitoring program.

9. Interview with the Board's Probation Monitor or its Designee

Respondent shall appear in person for interviews with the Board's Probation Monitor, or its designee, upon request at various intervals.

10. Notification of Probationer Status to Employers

Respondent shall notify all present and future employers ~~(during the period of probation)~~ of the reason for and the terms and conditions of the probation.

Prior to engaging in the practice of physical therapy, Respondent shall provide a true copy of the Initial Probationary License Decision and Order, Statement of Issues or Accusation, Decision and Order, or Stipulated Decision and Order as appropriate to his or her employer, supervisor, or contractor, or prospective employer or contractor, and at any other facility where Respondent engages in the practice of physical therapy before accepting or continuing employment.

Respondent shall provide the ~~Board's p~~Probation ~~m~~Monitor the names, physical addresses, mailing addresses, and telephone numbers of all employers and supervisors, or contractors, and shall inform the ~~p~~Probation ~~m~~Monitor in writing of the facility or facilities at which Respondent will be engaging in the practice of physical therapy for purposes of allowing the ~~Board's p~~Probation ~~m~~Monitor to communicate with the employer, supervisor, or contractor regarding Respondent's work status, performance and monitoring.

~~Respondent shall provide this The information will be provided in writing to the Board's p~~Probation ~~m~~Monitor within ten (10) calendar days ~~from the effective date of this Decision and Order, and within ten (10) calendar days prior to new employment, or change of new employer, supervisor or contractor, and will include~~ing written ~~employer~~ confirmation of receipt.

11. Notification of Name, Address or E-mail Address Change

Respondent shall notify the Board, in writing, of any and all name, address, and/or e-mail address changes within ten (10) days of the change.

12. Restriction of Practice - Temporary Services Agencies

Respondent shall not work for a temporary services agency or registry.

OR:

NOTE: If Respondent's restrictions are limited to a certain number of registries and/or temporary service agencies:

Respondent's work for a temporary services agency or registry shall be limited as follows:

- 1) Respondent shall be limited to work for (indicate # of temporary services or registries) temporary service agency or registry.
- 2) This work must be approved by the Board's Probation Monitor.
- 3) Respondent must disclose this disciplinary proceeding as described above in Condition # ~~[includes]~~ appropriate term # used for Notification of Probationer Status to Employers to the temporary services agency or registry.
- 4) Respondent must disclose this disciplinary proceeding, as described above in Condition # ~~[includes]~~ appropriate term # used for Notification of Probationer Status to Employers to the supervisor at the facility where physical therapy care is being performed.
- 5) Respondent must notify ~~his or her~~ the Board's Probation Monitor or Board's designee, in writing, of any change in registry or temporary services agency.
- 6) Respondent must have written approval by the Board's Probation Monitor prior to commencing work at a new registry or temporary services agency.

13. Restriction of Practice - Clinical Instructor of Physical Therapy Student Interns or Foreign Educated Physical Therapist License Applicants Prohibited

Respondent shall not supervise any physical therapy student interns, foreign educated physical therapist license applicants, or other individuals accumulating hours or experience in a learning capacity in physical therapy during the entire period of probation. Respondent shall terminate any such supervisory relationship in existence on the effective date of the Decision and Order.

14. Prohibited Use of Aliases

Respondent shall not use aliases and shall be prohibited from using any name which is not his or her legally-recognized name or based upon a legal change of name.

15. Intermittent Work

If Respondent ~~works~~ practices or performs (as a paid employee or as a volunteer) less than 192 hours as a physical therapist or a physical therapist assistant in the physical therapy profession in a period of three (3) consecutive months, those months shall not be counted toward satisfaction of the probationary period. Respondent is required to immediately notify the ~~Board's p~~ Probation ~~m~~ Monitor or ~~his or her~~ designee if he or she works less than 192 hours in a three-month period.

A Board-ordered suspension of practice shall not be credited toward completion of probation. Respondent's period of non-practice while on probation shall not be credited toward completion of probation.

If Respondent resides in California and is considered to be in non-practice, Respondent shall comply with all terms and conditions of probation. Any order for payment of cost recovery shall remain in effect whether or not probationer is in non-practice.

Non-practice is defined as any period of time Respondent is not practicing physical therapy as defined in Business & Professions Code 2620 for at least 192 hours in a period of three (3) consecutive months in direct patient care, clinical activity or teaching, or other activity as approved by the Board.

16. **Tolling of Probation**

The period of probation shall run only during the time Respondent is practicing or performing physical therapy within California as a paid employee or as a volunteer. Practicing in another state of the United States or Federal jurisdiction while on probation with the licensing authority of that state or jurisdiction shall not be credited toward completion of probation. A Board-ordered suspension of practice shall not be credited toward completion of probation. Any order for payment of cost recovery shall remain in effect whether or not probation is tolled.

If, during probation, Respondent ~~does not~~ ceases to practice or perform physical therapy within California, Respondent is required to immediately notify the Board's Probation Monitor in writing of the date Respondent ceases ~~is~~ practicing or performing physical therapy out of state within California, and report the date of expected return, if any. If Respondent begins practicing or performing physical therapy by Respondent in California prior to notification to the Board's Probation Monitor, of Respondent's return, the time prior to notification will not be credited toward completion of Respondent's probationary period.

In the event Respondent's period of non-practice while on probation exceeds 18 calendar months, Respondent shall successfully complete the California Law Examination prior to resuming the practice of physical therapy.

XX. **Maintenance of Valid License**

Respondent shall, at all times while on probation, maintain an active current license with the Board including any period during which license is suspended or probation is tolled.

Commented [D96]: New condition for consideration (OT Brd): Do we want them to keep a valid license even if tolled? Things to consider:

- Is there a benefit to this?
- Currently, Breeze will cancel license after 5 years even with 'Probation/Tolled' status.

17. Violation of Probation

Failure to fully comply with any component of any of the probationary terms and conditions is a violation of probation.

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, the Board shall have continuing jurisdiction until the matter is final, and the period of probation shall be extended until the matter is final.

18. Request to Surrender License Due to Retirement, Health or Other Reasons

Following the effective date of the Decision and Order, if Respondent ceases practicing or performing physical therapy due to retirement, health or other reasons or is otherwise unable to satisfy the terms and conditions of probation, Respondent may request, in writing, to surrender his or her license to the Board. The Board reserves the right to evaluate Respondent's request and to exercise its discretion whether to grant the request, or to take any other action deemed appropriate and reasonable under the circumstances. Upon formal acceptance of the surrender by the Board, Respondent shall no longer practice physical therapy in California and shall within 15 calendar days deliver Respondent's wallet license and wall certificate to the Board or its designee. Respondent will no longer be subject to of the tendered license, the terms and conditions of probation, shall be tolled until such time as (1) the license is no longer renewable; (2) Respondent makes application for the renewal of the tendered license; or (3) If Respondent re-applies or makes application for a new license, the application shall be treated as a petition for reinstatement of a revoked license.

19. Completion of Probation

Respondent shall comply with all financial obligations required by this Order (e.g., cost recovery, restitution, probation costs) not later than 180 calendar days prior to completion of probation unless otherwise specified in this Decision and Order. Upon successful completion of probation, Respondent's license shall be fully restored.

20. California Law Examination - Written Exam on the Laws and Regulations Governing the Practice or Performance of Physical Therapy

Within ninety (90) days of the effective date of this Decision and Order, Respondent shall take and pass the Board's written examination on the laws and regulations governing the practice of physical therapy in

California. If Respondent fails to pass the examination, Respondent shall ~~not be suspended from the practice of physical therapy until a repeat the examination has been successfully passed and has been so notified by the Board, or its designee, in writing.~~ Respondent shall pay the costs of all examinations. Passing of the examination shall not satisfy the Continuing Competency requirements pursuant to B&P Code ~~2676~~ § 2649 as a condition for renewal of license.

21. Practice or Performance of Physical Therapy While on Probation

It is not contrary to the public interest for Respondent to practice and/or perform physical therapy under the probationary conditions specified in ~~the disciplinary this Decision and eOrder.~~

~~Accordingly, i~~ It is not the intent of the Board that this Decision and eOrder, the fact that Respondent has been disciplined, or that Respondent is on probation, shall be used as the ~~sole~~ basis for any third-party payor to remove Respondent from any list of approved providers.

Commented [YE98]: For Board discussion.

22. Probation Monitoring Costs

Respondent shall reimburse all costs incurred by the Board for probation monitoring during the entire period of probation. Respondent will be billed at least quarterly. Such costs shall be made payable to the Physical Therapy Board of California and sent directly to the Physical Therapy Board of California. Failure to make ordered reimbursement within sixty (60) days of the billing shall constitute a violation of the probation order.

Respondent's license shall not be renewed or reinstated if Respondent has failed to pay all of the probation monitoring costs as ordered in this Decision and Order.

PROBATION CONDITIONS SPECIFIC TO VIOLATION

Commented [YE99]: Letters A through Z will be corrected once conditions are approved.

The following conditions lettered A through S are specific to the violation, and should be used depending on the nature and circumstances of the particular case.

A. Restriction of Practice - Presence of Supervising Physical Therapist

Note: The purpose of this condition is to allow Respondent (physical therapist or physical therapist assistant) to practice with a level of supervision which ensures Respondent is in compliance with the Physical Therapy Practice Act as well as the probationary conditions. If Respondent works with another physical therapist that is eligible and available to function as Respondent's supervisor, the "Supervision Required" (Condition A) should be used in lieu of Condition B. Condition A is commonly used for, but not limited to: sexual misconduct, aiding and abetting, documentation cases, behavioral issues and where Respondent is not a sole proprietor. This condition should never be used in conjunction with "B" "Practice Monitor Required".

The following probation condition shall apply only when Respondent works as a physical therapist in a practice where he/she does not hold a vested interest (i.e. as an officer, partner or shareholder).

Choose level of supervision:

1) Full Presence/Documentation Review

The level of supervision shall be direct and require ~~4)~~ the physical presence of the supervising physical therapist while physical therapy is performed by Respondent; and may require, ~~2)~~ the supervisor review of patient records and any pertinent documents necessary to determine Respondent's compliance with Respondent's this Decision and Order. Direct supervision and physical presence means, the supervising physical therapist shall be near or close enough to observe or hear ~~the~~ Respondent. While this may not require sharing the same treatment room with Respondent, it does require the supervising physical therapist to be within an audible range that would ensure the immediate presence of the supervising physical therapist.

2) Limited Presence/ Documentation Review

The level of supervision shall not require the physical presence of the supervising physical therapist at all times while physical therapy is performed by Respondent. However, the supervising physical therapist shall physically observe Respondent shall be physically observed at least once per shift, and may be required to review of patient records and any pertinent documents necessary to determine Respondent's compliance with Respondent's this Decision and Order at least once per shift during Respondent's shift by the supervising physical therapist.

3) No Presence/Documentation Review As Determined

The level of supervision shall not require the physical presence of the supervising physical therapist while physical therapy is performed by Respondent; however, it will require the supervisor to review the patient records and any pertinent documents necessary to determine Respondent's compliance with Respondent's this Decision and Order on a time base as agreed upon by the Board.

Within fifteen (15) business days of the effective date of this Decision and Order, Respondent shall submit to the Board in writing, for its prior approval, the name and qualifications of one or more proposed supervisor(s) and an outline of the plan by which Respondent's practice will be supervised. Respondent shall not practice until receiving written approval from the Board, or its designee regarding Respondent's choice of a supervisor.

Each proposed supervisor shall hold a valid California physical therapist license and shall have been licensed in California for at least five (5) years and never been subject to any disciplinary action by the Board. An administrative citation and fine does not constitute discipline; and therefore, in and of itself, is not a reason to deny approval of an individual as a supervisor. The supervisor shall not be an employee of Respondent, have a relationship which is familial, financial or personal in nature with Respondent or any other type of relationship that could reasonably be expected to compromise the ability of the supervisor to render impartial and unbiased reports to the Board. ~~The supervisor shall also not be a family member of Respondent.~~ If the supervisor terminates or is otherwise no longer available, Respondent shall not practice until a new supervisor has been approved by the Board.

Upon approval of the supervisor and outline of supervision, the supervisor shall sign an agreement or contract that he or she has reviewed the conditions of ~~the licensee's~~ Respondent's disciplinary order and/or contract and agrees to supervise ~~the licensee~~ Respondent as set forth by the Board. Respondent shall submit the signed agreement or contract to the Board's Probation Monitor, or its designee. The supervisor shall have full and random access to Respondent's patient records and may evaluate all aspects of Respondent's practice. The supervisor shall complete and submit a written report, on a basis determined by the Board, verifying supervision has taken place as approved by the Board. It shall be Respondent's responsibility to ensure the supervisor submits the reports to the Board in a timely manner within 14 days of signing the report.

The supervisor's report shall include:

- A. Respondent's name and license number
- B. Supervisor's name, license number and signature
- C. Worksite location(s)
- D. Evaluation of Respondent's compliance with his or her probationary conditions and existing laws and regulations governing the practice of physical therapy
- E. Assessment of Respondent's progress in regards to the specific issues, deficiencies or concerns resulting from the violations identified in the Decision and Order by the Board

F. Summary of the supervisor's conclusions and opinions concerning the issues described above and the basis for his or her conclusions and opinions

The Supervisor shall keep any information used to write his or her report (e.g. record of patient records reviewed) and shall make it available at the Board's request. in case Board requests said information. This information does not need to be submitted to the Board unless the Board or its representative requests it or if the supervisor feels the information is pertinent to include in his or her report.

After ~~one (1)~~ [X] year(s) of full compliance with probation, the Board, or its designee, respondent may ~~request in writing for the approval by the Board or its designee, to remove this condition entirely or consider a modification of this term to the requirement to~~ request in writing for the approval by the Board or its designee, to remove this condition entirely or consider a modification of this term to the requirement to a lower level of supervision.

B. Restriction of Practice— Practice Monitoring Required

Note: This probation condition shall only be applied if ~~the~~ Respondent holds a vested interest in the physical therapy practice (i.e. officer, partner, shareholder, sole proprietor). This condition does not require the physical presence of another licensed physical therapist; however, it does require arranged visits by a Practice Monitor approved by the Board for documentation review only. This condition should never be used with condition A.

The following probation condition shall apply only when Respondent works as a physical therapist in a practice where he/she holds a vested interest (i.e. as an officer, partner or shareholder).

Within fifteen (15) business days of the effective date of this Decision and Order, Respondent shall submit to the Board in writing, for its prior approval, the name and qualifications of one or more proposed licensed physical therapist(s) to serve as Practice Monitor(s). Each Practice Monitor shall be a California licensed physical therapist, ~~and~~ shall have been licensed for at least five (5) years, and have never been subject to any disciplinary action by the Board. An administrative citation and fine does not constitute discipline and therefore, in and of itself, is not a reason to deny approval of an individual as a Practice Monitor. The Practice ~~Monitor~~ shall not be an employee of ~~the~~ Respondent, have a relationship which is familial, financial, or personal in nature with Respondent or any other type of relationship that could reasonably be expected to compromise the ability of the Practice Monitor to render impartial and unbiased reports to the Board. ~~The Practice Monitor shall also not be a family member of Respondent.~~ If the Practice Monitor terminates or is otherwise no longer available, Respondent shall not practice until a new Practice Monitor has been approved by the Board. All costs associated with the Practice Monitor shall be paid by Respondent.

Respondent shall not practice until receiving written approval from the Board regarding Respondent's choice of a Practice Monitor.

Commented [D100]: Reworded so that it doesn't contradict or conflict with Petitions for Modifications.

Left number of years to request modification of condition open to allow for consideration depending on violation.

Commented [KJ101]: Consider language to allow for the change of ownership to employment. (close practice.. etc.)

Upon approval of the Practice Monitor by the Board, the Practice Monitor, in conference with the Board's Probation Monitor, will establish the schedule upon which visits will be made to Respondent's place of employment to review Respondent's current practice and adherence to the conditions of probation. The Practice Monitor shall have full and random access to all of Respondent's patient records at all times. The Practice Monitor shall evaluate all aspects of Respondent's practice.

The Practice Monitor shall report on Respondent's current practice and compliance with the conditions of Respondent's probation to the Board's Probation Monitor after each visit. Frequency of the visits by the Practice Monitor shall be determined by the Board. It shall be Respondent's responsibility to ensure the Practice Monitor submits the reports to the Board within fourteen (14) days of ~~the~~ each visit.

The Practice Monitor's report shall include:

1. Respondent's name and license number
2. Practice Monitor's name, license number and signature
3. Worksite location(s)
4. Evaluation of Respondent's compliance with his or her probationary conditions and existing laws and regulations governing the practice of physical therapy
5. Assessment of Respondent's progress in regards to the correction of specific issues, deficiencies or concerns resulting from the violations identified in the Decision and Order by the Board
6. Summary of the Practice Monitor's conclusions and opinions concerning the issues described above and the basis for his or her conclusions and opinions

The Practice Monitor shall also maintain and submit with his or her reports a log of the patient charts reviewed, the date(s) of service reviewed, and the date upon which the review occurred.

C. Restriction of Practice – Prohibition of Home Care

Respondent shall not provide physical therapy services in a patient's home.

XX. Restriction of Practice – Prohibition of Direct Access

Respondent shall not provide direct physical therapy treatment services pursuant to B&P Code § 2620.1.

Commented [D102]: New condition for consideration. A request was made to include with revision of Guidelines.

D. Restriction of Practice – Prohibition of Solo Practice

Respondent shall be prohibited from engaging in the solo practice of physical therapy. Solo practice means a physical therapy business or practice where only Respondent provides patient care.

Note: This condition applies only to a physical therapist since a physical therapist assistant may not perform physical therapy without supervision.

In cases where Respondent's ability to function independently is in doubt as a result of a deficiency in knowledge or skills, or as a result of questionable judgment, this condition should be included. ~~Solo practice means a physical therapy business or practice where only Respondent provides patient care.~~

E. Restriction of Practice - Prohibition of Self-Employment or Ownership

Respondent shall not be the sole proprietor or partner in the ownership of any business that offers physical therapy services. Respondent shall not be a Board member or an officer or have a majority interest in any corporation that offers or provides physical therapy services.

F. Restriction of Practice - Prohibition of Direct Billing of Third-Party Payers

Respondent shall not have final approval over any physical therapy billings submitted to any third-party payers in any employment.

G. Restriction of Practice - Third Party Presence

During probation, Respondent shall have a third-party present while examining or treating _____ (name the specific patient population). Respondent shall, within ten (10) days of the effective date of the Decision and Order, submit to the Board or its designee for its approval the name(s) of the person(s) who will act as the third-party present. Respondent shall execute a release authorizing the third-party present to divulge any information that the Board may request. The person(s) acting in the role of the third-party present shall be provided with a copy of the Initial Probationary License Decision and Order, Statement of Issues or Accusation, Decision and Order, or Stipulated Decision and Order as appropriate.

H. Restriction of Practice - Prohibition ~~Not to~~ from Treating a Specific Patient Population

Respondent shall not treat any _____.
(name the specific patient population)

I. Restriction of Practice - Prohibition from Performing Specified Physical Therapy Procedures

During probation, Respondent is prohibited from performing or supervising the performance of _____ (specific physical therapy procedure; on a specific patient population). ~~After Beginning~~ on the effective date of this Decision and Order, the first time ~~that~~ a patient seeking the prohibited services makes an appointment, Respondent shall orally notify the patient that Respondent does not perform _____ (e.g. a specific physical therapy procedure; on a specific patient population). Respondent shall maintain a log of all patients to whom the required notification was made. The log shall contain the: 1) patient's name, address and phone number; 2) patient's medical record number, if available; 3) the full name of the person making the notification; 4) the date the notification was made; and 5) a description of the notification given. Respondent shall keep this log in a separate file or ledger, in chronological order, shall make the log available for immediate inspection and copying on the premises at all times during business hours by the ~~pPractice mMonitor~~ or the Board's ~~pProbation mMonitor~~, and shall retain the log for the entire term of probation. Failure to maintain a log as defined in the ~~section condition~~, or ~~failure~~ to make the log available for immediate inspection and copying on the premises during business hours is a violation of probation.

In addition to the required oral notification, ~~after beginning on~~ the effective date of this Decision and Order, the first time a patient seeks the prohibited services, and each subsequent ~~time-treatment~~, Respondent shall provide a written notification to the patient stating that Respondent does not perform _____ (e.g. a specific physical therapy procedure; on a specific patient population). Respondent shall maintain a copy of the written notification in the patient's file, shall make the notification available for immediate inspection and copying on the premises at all times during business hours by the ~~pPractice mMonitor~~ or the Board's ~~pProbation mMonitor~~, or its designee, and shall retain the notification for the entire term of probation. Failure to maintain the notification as defined in the section, or to make the notification available for immediate inspection and copying on the premises during business hours is a violation of probation.

If Respondent can demonstrate competency in performing _____ (e.g. a specific physical therapy procedure; on a specific patient population) to the satisfaction of a physical therapist (holding a valid and current, unrestricted license), approved by the Board's ~~pProbation mMonitor~~, the approved physical therapist can recommend to the Board in writing that this term of ~~the probation~~ end be removed without the probationer requiring Respondent to petitioning to modify the probation. The Board, or its designee, will make the decision and notify Respondent of its decision in writing. Until Respondent has been notified in writing by the Board that this term has been terminated, Respondent shall continue to practice under the provision of this term.

Respondent shall pay all costs associated with this condition ~~of the evaluation~~.

J. Restriction of Practice - No Supervision of Physical Therapist License Applicants or Physical Therapist Assistant License Applicants

Respondent shall not supervise any physical therapist license applicants or physical therapist assistant license applicants during the entire period of probation. Respondent shall terminate any such supervisory relationship in existence on the effective date of this Decision and Order.

K. Restriction of Practice - No Supervision of Physical Therapist Assistants

~~Respondent shall not supervise any physical therapist assistants during the entire period of probation. Respondent shall terminate any such supervisory relationship in existence on the effective date of this Decision and Order.~~

Respondent shall not supervise any physical therapist assistants during the entire period of probation unless he or she has first obtained Board approval for each person he or she intends to supervise. Respondent shall, before seeking Board approval, require the physical therapist assistant who he or she intends to supervise to review the Statement of Issues, Accusation, and the Decision and Order in this matter. Respondent shall possess the Board's approval in writing before he or she undertakes the supervision of any physical therapist assistant. Respondent shall terminate any such supervisory relationship in existence on the effective date of this Decision unless otherwise indicated by the Board, or its designee, in writing.

After [x] year(s) of full compliance with probation, the Board, or its designee, may remove the restriction or authorize limited supervision of physical therapist assistants as approved by the Board.

L. Restriction of Practice - No Supervision of Physical Therapy Aides

~~Respondent shall not supervise any physical therapy aides during the entire period of probation. Respondent shall terminate any such supervisory relationship in existence on the effective date of this Decision and Order.~~

Respondent shall not supervise any physical therapy aides during the entire period of probation unless he or she has first obtained Board approval for each person he or she intends to supervise. Respondent shall, before seeking Board approval, require the physical therapy aide who he or she intends to supervise to review the Statement of Issues, Accusation, and the Decision and Order in this matter. Respondent shall possess the Board's approval in writing before he or she undertakes the supervision of any physical therapy aide. Respondent shall terminate any such supervisory relationship in existence on the effective date of this Decision unless otherwise indicated by the Board, or its designee, in writing.

After [x] year(s) of full compliance with probation, the Board, or its designee, may remove the restriction or authorize limited supervision of physical therapy aides as approved by the Board.

M. Notification to Patients

Commented [YE103]: Consider leaving this language in addition to new language to choose from for those cases you don't want Probationer supervising PTA's

Commented [YE104]: Consider leaving this language in addition to new language to choose from for those cases you don't want Probationer supervising PT Aides

Respondent shall notify each patient, in writing, that his or her license is on probation and that [INSERT LANGUAGE SPECIFIC TO CASE, e.g. supervising physical therapist will be reviewing patient records or other specific requirement].

Such notification shall be signed and dated by each patient prior to the commencement or continuation of any examination or treatment of each patient by Respondent. A copy of such notification shall be maintained in the patient's record. Respondent shall offer ~~the~~ each patient a copy of the acknowledgement.

The notification shall include the following language unless the Board₁ or its designee₁ agrees, in writing, to a modification:

The Physical Therapy Board of California (PTBC) has placed [INSERT PHYSICAL THERAPIST/ASSISTANT] license no. [INSERT LICENSE #], issued to [INSERT LICENSEE NAME], on probation.

As a condition of probation, the above-named licensee must notify patients that [INSERT LANGUAGE SPECIFIC TO CASE, e.g. practice monitor will be reviewing patient records or other specific requirement]. In addition, ~~Respondent~~ the above named licensee is required to notify and obtain written acknowledgement from each patient of this condition. A copy of the acknowledgement shall be offered to the patient and placed in the patient's record.

Information regarding PTBC license disciplinary actions may be accessed online at ~~www.ptbc.ca.gov~~ https://www.breeze.ca.gov.

Note:

Condition "M" is necessary if condition "B" Practice Monitor is used.
For cases where the evidence demonstrates Respondent has had an impairment (impairment by mental illness, alcohol abuse and/or drug self-abuse) related violation and is not a present danger to patients.

XX Notice to Consumer CCR Code § 1398.15

Commented [YE105]: New condition for Board consideration.

In accordance with California Code of Regulations, Title 16, Section 1398.15, Respondent shall provide Form NTC 12-01, August 2, 2012 to each patient or patient representative before beginning or continuing care. An acknowledgement, signed and dated by the patient, or patient representative, shall be retained in each patient's medical record demonstrating receipt.

N. Notification of Probationer Status to Employees

If Respondent is an employer, Respondent shall notify all present ~~or~~ and future employees of the reason for and terms and conditions of the probation.

Respondent shall do so by providing a copy of the Initial Probationary License, Statement of Issues, or Accusation, and Decision and Order, as applicable, to each employee and submit ~~confirmation~~ acknowledgement of receipt, signed by the employee ~~of employee receipt~~ to the Board within ten (10) days of the effective date of this Decision and Order, and within ten (10) days of any newly acquired employee beginning work after the effective date. The confirmation(s) provided to the Board shall include the name, address, ~~and~~ phone number, and job title of the each employees.

X. Notification of Probation Status to Assistive Personnel

If Respondent provides supervision to assistive personnel [physical therapy student interns, foreign educated physical therapists license applicants, physical therapist license applicants, physical therapist assistant license applicants, physical therapist assistants, or physical therapy aides], Respondent shall notify all present and future assistive personnel under his/her supervision (during the entire period of probation) of the reason for and terms and conditions of the probation order.

Respondent shall do so by providing a copy of the Initial Probationary License, Statement of Issues, or Accusation, and Decision and Order, as applicable, to all assistive personnel, and submit confirmation of assistive personnel acknowledgement of receipt signed by the assistive personnel to the Board within ten (10) days of the effective date of this Decision and Order, and within ten (10) days of any newly acquired assistive personnel during the entire period of probation. The confirmation(s) provided to the Board shall include the name, address and telephone number of the assistive personnel.

Commented [D106]: New condition for consideration.

O. Education Course(s)

Within thirty (30) days of the effective date of this Decision and Order, Respondent shall submit to the Board, or its designee, for prior approval, a physical therapy remedial educational program (including date, title, and length of course(s) in the content of _____ (specify course subject) which shall not be less than eight (8) hours. Respondent shall supply documentation verifying satisfactory completion of coursework. Respondent shall be responsible for costs incurred of the course(s). Course hours shall not satisfy the Continuing Competency requirements pursuant to B&P Code § 2676 ~~2676~~ 2649 as a condition for renewal of license.

Commented [D107]: B&P 2676 Repealed, replaced with 2649

If Respondent fails to provide documentation verifying satisfactory completion of the coursework within 180 days of the effective date of this Decision and Order, Respondent shall be suspended from the practice of physical therapy until documentation verifying satisfactory completion of the coursework is provided.

P. Psychiatric Evaluation

Within thirty (30) calendar days of the effective date of this Decision and Order, and on whatever periodic basis thereafter may be required by the Board₁ or its designee, Respondent shall undergo and complete a psychiatric evaluation (and psychological testing, if deemed necessary) by a Board-appointed Board certified psychiatrist, who shall consider any information provided by the Board₁ or its designee₁ and any other information the psychiatrist deems relevant, and shall furnish a written evaluation report to the Board₁ or its designee₁ indicating whether Respondent is mentally fit to practice physical therapy safely. Psychiatric evaluations conducted prior to the effective date of the Decision and Order shall not be accepted towards the fulfillment of this requirement. Respondent shall pay all cost of all psychiatric evaluations, psychological testing, and any required additional ~~follow-up~~ visits.

Respondent shall comply with all restrictions or conditions recommended by the evaluating psychiatrist within fifteen (15) calendar days after being notified by the Board₁ or its designee. Failure to undergo and complete a psychiatric evaluation and psychological testing, or comply with the required additional conditions or restrictions, is a violation of probation.

(Option: Condition Precedent)

Respondent shall not engage in the practice of physical therapy until notified by the Board₁ or its designee₁ that Respondent ~~is~~ has been deemed to be mentally fit to practice physical therapy safely. The period of time Respondent is not practicing physical therapy shall not be counted toward completion of the term of probation.

Q. Psychotherapy

Within sixty (60) calendar days of the effective date of this Decision and Order, Respondent shall submit to the Board₁ or its designee₁ for prior approval the name and qualifications of a Board certified psychiatrist or a licensed psychologist who has a doctoral degree in psychology and at least five (5) years of postgraduate experience in the diagnosis and treatment of emotional and mental disorders. Upon approval by the Board, or its designee, Respondent shall undergo and continue psychotherapy treatment, including any modifications to the frequency of psychotherapy, until the Board₁ or its designee₁ deems that no further psychotherapy is necessary based on written notice from the psychiatrist or psychologist.

The psychotherapist shall consider any information provided by the Board₁ or its designee₁ and any other information the psychotherapist deems relevant and shall furnish a written evaluation report to the Board₁ or its designee. Respondent shall cooperate in providing the psychotherapist any information and documents that the psychotherapist may deem pertinent. Respondent shall have the treating psychotherapist submit quarterly status reports to the Board₁ or its designee. The Board₁ or its designee₁ may require Respondent to

undergo psychiatric evaluations by a Board-appointed, Board certified psychiatrist.

If, prior to the completion of probation, Respondent is found to be mentally unfit to resume the practice of physical therapy without restrictions, the Board shall have continued jurisdiction over Respondent's license and the period of probation shall be extended until the Board determines Respondent is mentally fit to resume the practice of physical therapy without restrictions. Respondent shall pay all the costs associated with compliance of this term of all psychotherapy and psychiatric evaluations.

Note:

This condition is for cases where the evidence demonstrates Respondent has had an impairment (impairment by mental illness, alcohol abuse and/or drug self-abuse) related to the violations but is not at present a danger to Respondent's patients.

R. Medical Evaluation

Within thirty (30) days of the effective date of this Decision and Order, and on a periodic basis thereafter, as may be required by the Board₁ or its designee, Respondent shall undergo a medical evaluation by a Board appointed physician and surgeon, who shall furnish a medical report to the Board₁ or its designee. Respondent shall pay the all costs of the associated with the medical evaluation and continued treatments.

If, following the medical evaluation, Respondent is required by the Board₁ or its designee₁ to undergo medical treatment, Respondent shall within thirty (30) days of written notification of the requirement submit to the Board₁ or its designee₁ for its prior approval the name and qualifications of a physician and surgeon of Respondent's choice. Upon Board approval of the treating physician and surgeon, Respondent shall undergo and continue medical treatment until further notice from the Board₁ or its designee. Respondent shall have the treating physician and surgeon submit quarterly status reports to the Board₁ or its designee₁ indicating whether Respondent is capable of practicing physical therapy safely.

Optional Condition

Respondent shall not engage in the practice of physical therapy until notified by the Board₁ or its designee₁ of its determination that Respondent is medically fit to practice safely.

S. Medical Treatment

Within fifteen (15) days of the effective date of this Decision and Order, Respondent shall submit to the Board₁ or its designee₁ for its prior approval the name and qualifications of a physician of Respondent's choice. Upon approval, Respondent shall undergo and continue medical treatment until the Board₁ or

its designee₁ deems that no further medical treatment is necessary. Respondent shall have the treating physician submit quarterly status reports to the Board₁ or its designee₁ indicating whether Respondent is capable of practicing physical therapy safely. The Board₁ or its designee₁ may require Respondent to undergo periodic medical evaluations by a Board appointed physician. Respondent shall pay ~~the~~ all cost associated of the medical treatment(s).

X. Relinquish Wallet License and Wall Certificate

Respondent shall relinquish and shall forward or deliver his or her wallet license to practice and the wall certificate to the Board within ten (10) days of the effective date of the Decision and Order.

Note: This term used on surrender and revocation cases only.

Commented [D108]: New condition for consideration.

**CONDITIONS APPLYING THE UNIFORM STANDARDS
SPECIFIC TO ALCOHOL
AND CONTROLLED SUBSTANCES**

The following conditions, lettered T through AA, must be used in cases where alcohol or a controlled substance was involved in the **violation**.

XX. Cease Practice

From the effective date of this Decision and Order, Respondent shall cease practice until the Board determines that Respondent is safe to return to practice.

Commented [YE109]: Letters A through X will be corrected once conditions are approved.

Commented [YE110]: For Clarity added as its own condition. Uniform Standards require licensee cease practice during CDE and until determined to return to practice safely.

T. Substance Abuse Rehabilitation Program

Within fifteen (15) calendar days from the effective date of this Decision and Order, Respondent shall enroll and participate in the Board's rehabilitation program at Respondent's cost until the rehabilitation program determines that Respondent's participation is no longer necessary. Respondent shall comply with all components of the rehabilitation program. Respondent shall sign a release authorizing the rehabilitation program to report all aspects of participation of the rehabilitation program as requested by the Board, or its designee.

Commented [D111]: Changed order of terms T & U. Enrollment is first step and then CDE follows.

If Respondent fails to comply with the requirements of the rehabilitation program, terminates the program without permission, or is expelled for cause, it shall constitute a violation of probation, and Respondent shall be immediately suspended from the practice of physical therapy.

[Optional language: This condition may be waived by the Board upon a written finding by the Clinical Diagnostic Evaluator that Respondent is not a substance abusing licensee.]

TU. Clinical Diagnostic Evaluation (CDE)

Within thirty (30) days of the effective date of the Decision and Order, Respondent shall undergo a CDE from a licensed practitioner who holds a valid, unrestricted license to conduct CDE's, has at least three (3) years of experience in providing evaluations of health care professionals with substance abuse disorders, and is approved by the Board. The Board may request Respondent to undergo a CDE at any time during the period of probation. The ~~evaluations~~ CDE shall be conducted in accordance with accepted professional standards for conducting substance abuse CDE's.

Respondent shall undergo a CDE to determine whether the Respondent has a substance abuse problem and whether ~~the~~ Respondent is a threat to himself or herself or others. The evaluator shall make recommendations for substance abuse treatment, practice restrictions, or other recommendations related to ~~the~~ Respondent's rehabilitation and ability to safe practice safely.

Respondent shall not be evaluated by an evaluator that has had a financial, personal, familial, or business relationship with ~~the~~ Respondent within the last five (5) years. The evaluator shall provide an objective, unbiased, and independent evaluation.

During the evaluation, if ~~Respondent~~ it is determined that Respondent is to be a threat to himself or herself or others, the evaluator shall notify the Board within 24 hours of such a determination.

For all evaluations, the evaluator shall provide a final written report ~~shall be provided~~ to the Board no later than ten (10) days from the date the evaluator is assigned the matter unless the evaluator requests additional information to complete the evaluation, not to exceed thirty (30) days.

~~Respondent may return to either full time or part time work if the Board determines he or she is fit to do so based upon consideration of the CDE report and the following criteria:~~

xx. Determination on Return to Practice

The Board shall use the following criteria in determining whether or not Respondent is safe to return to full-time or part-time work, what practice restrictions shall be imposed on Respondent, and whether Respondent shall be required to participate in inpatient, outpatient, or any other type of treatment:

- Findings and recommendation(s) of CDE report;
- Respondent's ~~License~~ type;
- Licensee's Respondent's history;
- Documented length of sobriety/time that has elapsed since last substance use;
- Scope and pattern of substance abuse;
- Treatment history;
- Medical history and current medical condition;
- Nature, duration, and severity of substance abuse; ~~and,~~
- Whether ~~the licensee~~ Respondent is a threat to himself or herself or others;

While awaiting the Board's determination, Respondent shall be randomly drug tested at least two (2) times per week as part of the rehabilitation program.

~~The Board shall determine whether or not the Respondent is safe to return to full time or part time work, and what restrictions shall be imposed on the Respondent. However, Respondent shall not return to practice until he or she has thirty days of negative drug tests.~~

~~If the Respondent is required to participate in inpatient, outpatient, or any other type of treatment, the Board shall take into consideration the recommendation of the CDE, license type, licensee's history, length of sobriety, scope and~~

~~pattern of substance abuse, treatment history, medical history, current medical condition, nature, duration and severity of substance abuse and whether the licensee is a threat to himself or herself or others.~~

Commented [D112]: Paragraph is redundant to language above criteria.

In the event that interpretation or clarification of any of the Conditions Applying the Uniform Standards is necessary, the Uniform Standards shall be controlling.

U. Substance Abuse Rehabilitation Program

Commented [D113]: Moved to "T"

~~Within fifteen (15) calendar days from the effective date of this Decision and Order, Respondent shall enroll and participate in the Board's rehabilitation program at Respondent's cost until the rehabilitation program determines that participation in the rehabilitation program is no longer necessary.~~

~~Respondent shall comply with all components of the rehabilitation program. Respondent shall sign a release authorizing the rehabilitation program to report all aspects of participation of the rehabilitation program as requested by the Board or its designee.~~

~~Failure to comply with requirements of the rehabilitation program, terminating the program without permission or being expelled for cause shall constitute a violation of probation by Respondent and shall be immediately suspended from the practice of physical therapy.~~

~~[Optional language: This condition may be waived by the board upon a written finding by the CDE that Respondent is not a substance abusing licensee.]~~

V. Abstain from Use of Controlled Substances and Dangerous Drugs

Respondent shall abstain completely from personal use, possession, injection, consumption by any route, including inhalation, of all controlled substances as defined in the California Uniform, Controlled Substances Act. This prohibition does not apply to medications lawfully prescribed to Respondent for a bona fide illness or condition by a practitioner licensed to prescribe such medications. Within fifteen (15) calendar days of receiving any lawful prescription medications, Respondent shall notify the ~~recovery~~ substance abuse rehabilitation program in writing of the following: prescriber's name, address, and telephone number; medication name and strength; and issuing pharmacy name, address, and telephone number. Respondent shall also provide a current list of prescribed medication with the prescriber's name, address, and telephone number on each quarterly report submitted to the Board's Probation Monitor, or its designee. Respondent shall provide the Board's ~~p~~Probation mMonitor, or its designee, with a signed and dated medical release covering the entire probation period.

Respondent shall identify for the Board's approval a single coordinating physician and surgeon who shall be aware of Respondent's history of substance abuse and who will coordinate and monitor any prescriptions for Respondent for dangerous drugs, and controlled substances. Once a Board-

approved physician and surgeon has been identified, Respondent shall provide a copy of the Initial Probationary License Decision and Order, Statement of Issues or Accusation, Decision and Order, or Stipulated Decision and Order, as appropriate, to the coordinating physician and surgeon. The coordinating physician and surgeon shall report to the Board or its designee on a quarterly basis Respondent's compliance with this condition.

The Board may require that only a physician and surgeon who is a specialist in addictive medicine be approved as the coordinating physician and surgeon.

If Respondent has a positive drug screen for any substance not legally authorized, Respondent shall be contacted and instructed to leave work and ordered by the Board to cease any practice and may not practice unless and until notified by the Board. The Board will notify Respondent's employer, if any, and worksite monitor, if any, that Respondent may not practice. If the Board files a petition to revoke probation or an accusation based upon the positive drug screen, Respondent shall be automatically suspended from practice pending the final decision on the petition to revoke probation or accusation. This period of suspension will not apply to the reduction of this probationary period.

[Optional language: This condition may be waived by the ~~b~~Board upon a written finding by the Clinical Diagnostic Evaluator that Respondent is not a substance abusing licensee.]

W. Abstain from the Use of Alcohol

Respondent shall abstain completely from the use of alcoholic beverages.

[Optional language: This condition may be waived by the ~~b~~Board upon a written finding by the Clinical Diagnostic Evaluator that Respondent is not a substance abusing licensee.]

X. Biological Testing

Respondent shall immediately submit to ~~and pay for~~ any random and directed biological fluid or hair sample, breath alcohol, or any other mode of testing required by the Board, or its designee. All examination(s) and laboratory testing costs associated with this condition shall be paid by Respondent.

Respondent shall be subject to a minimum range of fifty-two (52), ~~but not to exceed, to one-hundred and four (104)~~ random tests per year within the first year of probation, and a minimum range of thirty-six (36) to one-hundred and four (104) random tests per year thereafter, for the duration of the probationary term. However, in cases where there is evidence that ~~the~~ Respondent has participated in a treatment or monitoring program requiring random testing, prior to being subject to testing by the Board, the Board may ~~give consideration to that testing in~~ altering the testing frequency schedule so that it is equivalent to this standard.

Commented [D114]: Deleted. Not within SB 1441 Standards. Cannot establish "Maximum" number of tests.

Respondent shall make daily contact as directed by the Board to determine if he or she must submit to drug testing. To ensure test results are sent immediately to the Board, Respondent shall have the test performed by a Board-approved laboratory certified and accredited by the U.S. Department of Health and Human Services on the same day that he or she is notified that a test is required. ~~This shall ensure that the test results are sent immediately to the Board. Failure to comply~~ If Respondent fails to comply within the time specified, it shall be considered an admission of a positive drug screen and constitute a violation of probation. If ~~the a~~ urine test results in a determination that the urine was too diluted for testing, the result shall be considered an admission by Respondent of a positive urine screen and constitutes a violation of probation. If a positive result is obtained, the Board may order suspend Respondent to cease all practice, and require Respondent to immediately undergo a physical examination and to complete laboratory or diagnostic testing to determine if any underlying physical condition has contributed to the diluted result ~~and to suspend Respondent's license to practice. Any such examination or laboratory and testing costs shall be paid by Respondent. A positive diluted result is one which, based on scientific principles, indicates Respondent attempted to alter the test results in order to either render the test invalid or obtain a negative result when a positive result should have been the outcome. If it is determined Respondent altered the test results, the result shall be considered an admission of a positive urine screen and constitutes a violation of probation and Respondent must cease practicing. Respondent shall not resume practice until notified by the Board.~~ If Respondent tests positive for a banned substance, Respondent shall be contacted and instructed to leave work and ordered to cease all practice. Respondent shall not resume practice until notified by the Board. All alternative drug testing sites due to vacation or travel outside of California must be approved by the Board prior to the vacation or travel.

Commented [D115]: Moved to first paragraph of term.

Commented [D116]: Redundant to above.

[Optional language: This condition may be waived or modified by the Board upon a written finding by the Clinical Diagnostic Evaluator that Respondent is not a substance abusing licensee.]

The "Exceptions to Testing Frequency Schedule" identified in Uniform Standard #4 apply.

Y. Major Violations

~~This provision applies if Respondent commits a violation of the rehabilitation program or any other condition applying the uniform standards specific to controlled substance(s).~~

Commented [YE117]: Moved in brackets below.

If Respondent commits a major violation, Respondent shall immediately upon notification by the Board, cease practice until notified otherwise in writing by the Board.

Major ~~vi~~violations include, but are not limited to, the following:

1. Failure to complete a Board-ordered program;
2. Failure to undergo a required CDE;
3. Committing multiple minor violations of probation conditions;
4. Treating a patient while under the influence of drugs or alcohol;
5. Committing any drug or alcohol offense that is a violation of the Business and Professions Code or other state or federal law;
6. Failure to obtain ordered biological testing for substance abuse;
7. Testing positive for a banned substance; ~~and~~
8. Knowingly using, making, altering, or possessing any object or product in such a way as to defraud a drug test designed to detect the presence of alcohol or a controlled substance.

[This provision applies if Respondent commits a violation of the rehabilitation program or any other condition applying the uniform standards specific to controlled substance(s).]

Z. Facilitated Group Support Meetings

Within fifteen (15) days from the effective date of the ~~is a~~ Decision and Order, Respondent shall submit to the Board, or its designee, for prior approval the name of one or more group support meeting facilitator(s). Respondent shall participate in facilitated group support meetings within fifteen (15) days after a notification of the Board's, or its designee's, approval of the meeting facilitator. When determining the type and frequency of required facilitated group support meeting attendance, the Board, or its designee, shall give consideration to the following:

- ~~The licensee's~~ Respondent's license history
- The documented length of sobriety/time that has elapsed since substance abuse
- The recommendation of the clinical evaluator
- The scope and pattern of substance abuse
- ~~The licensee~~ Respondent's treatment history;
- The nature, duration, and severity of substance abuse

Respondent shall submit ~~Verified~~ documentation of attendance ~~shall be submitted by Respondent~~ with each quarterly report to the Board's Probation Monitor.

Respondent shall continue attendance in such a group for the duration of probation unless notified by the Board that attendance is no longer required.

~~If a facilitated group support meeting is ordered,~~ The group support facilitator shall meet the following qualifications and requirements:

1. ~~The group meeting facilitator shall have a~~ A minimum of three (3) years of experience in the treatment and rehabilitation of substance abuse, and shall be licensed or certified by the state ~~or~~ other nationally certified organizations.

2. ~~The group meeting facilitator s~~ Shall not have had a financial relationship, personal relationship, or business relationship with ~~the licensee~~ Respondent in the last five (5) years.
3. ~~The group facilitator s~~ Shall provide to the Board_i or its designee_i a signed document showing ~~the licensee~~ Respondent's name, the group name, the date and location of the meeting, ~~the licensee~~ Respondent's attendance, and ~~the licensee's~~ Respondent's level of participation and progress.
4. ~~The group meeting facilitator s~~ Shall report any unexcused absence(s) to the Board_i or its designee_i within twenty-four (24) hours.

AA. Worksite Monitor

Respondent shall have a worksite monitor as required by this term. The worksite monitor shall not have any current or former financial, personal, or familial relationship with ~~the licensee~~ Respondent, or other relationship that could reasonably be expected to compromise the ability of the worksite monitor to render impartial and unbiased reports to the Board. If it is impractical for anyone but ~~the licensee~~ Respondent's employer to serve as the worksite monitor, this requirement may be waived by the Board. However, under no circumstances shall ~~a licensee~~ Respondent's worksite monitor be an employee of ~~the licensee~~ Respondent.

The worksite monitor's license scope of practice shall include the scope of practice of the licensee who is being monitored or be another health care professional if no monitor with like scope of practice is available.

The worksite monitor shall have an active unrestricted license, with no disciplinary action within the last five (5) years.

The worksite monitor shall sign an affirmation that he or she has reviewed the terms and conditions of ~~the licensee's~~ Respondent's disciplinary order and agrees to monitor ~~the licensee~~ Respondent as set forth by the Board.

The worksite monitor must adhere to the following required methods of monitoring ~~the licensee~~ Respondent:

1. ~~a) At least once per week, or more frequently if required by the Board. H~~ a) At least once per week, or more frequently if required by the Board. H ~~have face-to-face contact with the licensee~~ Respondent at least once per week in the work environment or more frequently if required by the Board.
2. ~~b) Interview other staff in the office regarding the licensee's~~ b) Interview other staff in the office regarding the Respondent's behavior, if applicable.
3. ~~c) Review the licensee~~ c) Review the Respondent's work attendance.

The worksite monitor shall report to the Board as follows:

- Any suspected substance abuse must be verbally reported to the Board and the ~~licensee~~Respondent's employer within one (1) business day of occurrence. If occurrence is not during the Board's normal business hours, the verbal report must be within one (1) hour of the next business day. A written report shall be submitted to the Board within forty-eight (48) hours of occurrence.
- ~~The worksite monitor shall complete and s~~Submit a written report monthly or as directed by the Board. The report shall include: ~~the licensee~~Respondent's name; license number; worksite monitor's name and signature; ~~worksite monitor's~~ license number; worksite location(s); dates licensee had face-to-face contact with monitor; staff interviewed if applicable; attendance report; any change in behavior and/or personal habits; and any indicators leading to suspected substance abuse.

~~The licensee~~ Respondent shall complete the required consent forms and sign an agreement with the worksite monitor and the Board to allow the Board to communicate with the worksite monitor regarding Respondent.

~~If Respondent tests positive for a banned substance, the Board will immediately notify Respondent's employer that the Respondent's license has been ordered to cease practice.~~

Commented [D118]: Out of place.

[Optional language: This condition may be waived or modified by the Board's Probation Monitor, or its designee ~~board~~ upon a written finding by the Clinical Diagnostic Evaluator that Respondent is not a substance abusing licensee.]

RECOMMENDED LANGUAGE FOR ISSUANCE AND PLACEMENT OF A LICENSE ON PROBATION AND REINSTATEMENT OF LICENSE

Disciplining of a License (With conditions including the Uniform Standards)

IT IS HEREBY ORDERED that [Physical Therapist or Physical Therapist Assistant] License No. [#] issued to Respondent [name], is REVOKED. However, the order of revocation is STAYED and Respondent is placed on probation for [#] years or completion of the substance abuse rehabilitation program plus one (1) year, and all money owed in cost recovery is paid, whichever is longer, on the following terms and conditions.

Disciplining of a License (Without Uniform Standards)

IT IS HEREBY ORDERED that [Physical Therapist or Physical Therapist Assistant] License No. [#] issued to Respondent [name], is REVOKED. However, the order of revocation is STAYED and Respondent is placed on probation for [#] years, or until Respondent has completed payment on all money owed in cost recovery, whichever is longer, on the following terms and conditions:

Surrender of License

IT IS HEREBY ORDERED that [Physical Therapist or Physical Therapist Assistant] License No. [#] issued to Respondent [name], is surrendered and accepted by the Physical Therapy Board of California.

1. Respondent shall lose all rights and privileges as a [physical therapist or physical therapist assistant] in California as of the effective date of this Decision and Order.
2. On or before the effective date of this Decision and Order, Respondent shall cause to be delivered his wallet license and wall certificate to the Board.
3. If Respondent ever files an application for licensure in the State of California, the Board shall treat it as a petition for reinstatement. Respondent must comply with all the laws, regulations and procedures for reinstatement of a revoked license in effect at the time the petition is filed, and all of the charges and allegations contained in the Accusation No. [xx] shall be deemed to be true, correct and admitted by Respondent when the Board determines whether to grant or deny the petition.
4. If Respondent should ever apply or reapply for a new license or certification, or petition for reinstatement of a license, by any other health care licensing agency in the State of California, all of the charges and allegations contained in Accusation No. [XX] shall be deemed to be true, correct, and admitted by Respondent for the purpose of any Statement of Issues or any other proceeding seeking to deny or restrict licensure.
5. Respondent shall pay the Board its costs of investigation and enforcement in the amount of \$[XX] prior to petitioning for reinstatement of his or her physical therapist/assistant license.
6. The surrender of Respondent's physical therapist/assistant license and the acceptance of the surrendered license by the Board shall constitute the imposition of discipline against Respondent. This stipulation constitutes a record of the discipline and shall become a part of Respondent's license history with the Physical Therapy Board of California.

Petition for Termination of Probation GRANTED

The Petition for Early Termination of Probation filed by Petitioner [NAME] is GRANTED. The probation of [Physical Therapist or Physical Therapist Assistant] License No. PT/PTA, issued to [Respondent's Name], is hereby terminated.

Petition for Termination of Probation DENIED

The Petition for Early Termination of Probation filed by Petitioner [NAME] is DENIED.

Or with conditions:

The Petition for Early Termination of Probation filed by Petitioner [NAME] is DENIED; however, Petitioner's probation is modified and probation shall end upon completion of the following conditions:

1. The Board is notified that Petitioner has completed the Drug and Alcohol Recovery Program (Maximus); and
 2. Sixty (60) days have elapsed after the Board's receipt of such notice.
- (note: 1 & 2 are sample language)*

Petition for Reinstatement of License GRANTED

The Petition for Reinstatement filed by Petitioner [NAME] is GRANTED. Petitioner's Physical Therapist/Assistant license is reinstated; however, the order of reinstatement is immediately stayed and the reinstated license is placed on probation for a period of [xx] (x) years under the following terms and conditions:

Petition for Reinstatement of License DENIED

The Petition for Reinstatement filed by Petitioner [NAME], is DENIED.

Applicant Placed on Probation Based on an Initial Probationary License

"IT IS HEREBY ORDERED that the application for licensure as a [physical therapist or physical therapist assistant] of respondent [name] for an unrestricted license is hereby denied. However, an initial probationary license shall remain issued to Respondent, subject to the following terms and conditions:

Applicant Placed on Probation Based on a Denial of Licensure

"IT IS HEREBY ORDERED that the application for licensure as a [physical therapist or physical therapist assistant] of respondent [name] for an unrestricted license is hereby GRANTED upon successful completion of all licensing requirements. A license shall be issued, provided that all licensing requirements are completed within [timeframe] of the effective date of this decision. If a license is not issued within one year of the effective date of this decision, the application is ordered denied, and a new application for licensure will be required. Upon issuance, however, said license shall immediately be REVOKED. However, the order of revocation shall be STAYED, and the license is placed on probation for [#] years subject to the following terms and conditions:"

GLOSSARY OF TERMS

Accusation - Charges filed against a licensee alleging violation(s) of the Physical Therapy Practice Act.

Business and Professions Code (B&P Code) - The statutes in law governing the businesses and professions. The Physical Therapy Practice Act begins with section 2600 of the Business and Professions Code. There are some other sections of the B&P Code named in this document that affect the practice of physical therapy but are not included in the Physical Therapy Practice Act. The Physical Therapy Practice Act can be accessed through the Physical Therapy Board of California website at www.ptbc.ca.gov.

California Code of Regulations (CCR) - Regulations define and clarify the intent of the statutes (laws). The regulations specific to physical therapy are located in Title 16, Chapter 13.2, ~~Article 6~~ of the California Code of Regulations and can be accessed through the Physical Therapy Board of California website at www.ptbc.ca.gov.

Citation - A means of addressing relatively minor violations, which do not warrant discipline in order to protect the public. Citations are not disciplinary actions, but are matters of public record.

Decision - The order of the Board in a disciplinary action.

Default Decision - Licensee fails to respond to Accusation by filing a Notice of Defense or fails to appear at an administrative hearing resulting in a default decision.

Diversion –The Board does not divert licensees from discipline.

Health and Safety Code (H&S Code) - Statutes of law pertaining to the health and safety of the citizens of California. Certain sections of the law contained in this document pertain to the practice of physical therapy. These statutes can be accessed through the Physical Therapy Board of California website at www.ptbc.ca.gov.

Initial Probationary License (IPL) - The Board may in its sole discretion issue a probationary license to any applicant for licensure who is guilty of unprofessional conduct but who has met all other requirements for licensure. An IPL is not considered disciplinary action and is removed from the record upon completion of probation. The IPL is posted on the Board's website only during the period of probation.

Interim Suspension Order - An order issued upon petition, suspending a licensee from all or a specified part of his or her physical therapy practice.

Petition to Revoke Probation - Charges filed against a probationer seeking revocation of ~~their~~ this or her physical therapy license based upon violation(s) of probation.

Practice Monitor (Probation Condition Term B) - The practice monitor is a licensed physical therapist ~~that~~who serves as a subject matter expert to review the probationer's current practice and to evaluate all aspects of the probationer's practice. The practice monitor is approved by the Board and reports to the Board's probation monitor. The practice monitor is used in lieu of a supervising physical therapist when probationer holds a vested interest in the physical therapy practice.

Probation Monitor - The Probation Monitor is an employee of the Physical Therapy Board that monitors a probationers to ensure compliance with the terms and conditions of his or her~~Respondent's~~ probation.

Probation Topped - Credit for time served towards the probationary period does not begin until the probationer commences practice in the State of California.

Public Letter of Reprimand – In lieu of filing a formal accusation, the Board may, pursuant to B&P Code, ~~s~~Section 2660.3, upon stipulation or agreement by the licensee, issue a public letter of reprimand. If the licensee does not agree to the issuance of the letter, the ~~b~~Board shall not issue the letter and may proceed to file a formal accusation. A public letter of reprimand is considered disciplinary action.

Public Reprimand – A formal public reprimand, pursuant to B&P Code, ~~s~~Section 495, may be issued for an act constituting grounds for suspension or revocation of a license. This requires filing of a formal accusation. A public reprimand is considered disciplinary action.

Rehabilitation – A part of a disciplinary action taken in cases of substance abuse.

Revoked - The right to practice is ended.

Revoked, stayed, probation - "Stayed" means the revocation is postponed, put off. Professional practice may continue so long as the licensee complies with specific probationary terms and conditions. Violation of probation may result in the revocation that was postponed.

Statement of Issues - Charges filed against an applicant due to alleged violation(s) of the Physical Therapy Practice Act. If found to be true, the charges may result in discipline.

Supervising Physical Therapist - (Probation Condition Term A) - The supervising physical therapist ensures the probationer adheres to the Physical Therapy Practice Act as well as the probationary conditions and practices in the same facility as the probationer. The supervisor has full and random access to probationer's patient records and evaluates all aspects of probationer's practice. The supervising physical therapist ~~is~~must be approved by the Board's ~~and reports to the Board's p~~Probation ~~m~~Monitor, or designee. The role of the supervising physical therapist may vary depending on the level of supervision set forth in the Decision and Order.

Surrender of License - The licensee turns in the license, subject to acceptance by the Board. The right to practice is ended.

Suspension - The licensee is prohibited from practicing for a specific period.

Uniform Standards Regarding Substance-Abusing Healing Arts Licensees (Uniform Standards) - Addresses penalties established for licensees dealing with substance-abuse violations per Senate Bill 1441 (Ridley-Thomas, Ch. 548, Stats. 2008), developed by the Substance Abuse Coordination Committee, within the Department of Consumer Affairs.

Worksite Monitor (Probation Condition Term Z) - The worksite monitor is a person, usually a physical therapist, who observes for signs of substance abuse through face to face contact, interviews and attendance monitoring. The ~~W~~worksite ~~M~~monitor ~~is~~ must be approved by the Board's Probation Monitor, or designee, rehabilitation program and reports to the Board's rehabilitation program on the status of the probationer.

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Commented [YE119]: Index has not been completely revised. Final revisions will be completed once Guidelines have been approved with final text, codes, etc... Including page numbering.

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Medical Board Codes

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2234(b)	Gross Negligence	X			Covered in 2660 (h)
2234 (c)	Repeated Negligent Acts	X			2660 (h) Includes 'repeated acts of negligence
2234 (d)	Incompetence		X	Not included in 2660	
2235	Procuring License by Fraud	X			Included in General Prov. 498, 499, 581, 583 2660 (c)
2236	Criminal Conviction	X			2660 & 2661
2237	Conviction Related to Drugs		X	Descriptpive of Charges	
2238	Violation of Drug Statues		X	Violation of federal laws or federal regulations	
2239	Self Abuse of Drugs or Alcohol		X	Dangerous use to self or others - (This is not in PT Practice Act.	
2261	Making False Document	X			Covered in 2660 (s)
2262	Alteration of Medical Record	X			Covered in 2660 (s)
2263	Violation of Professinal Confidence	X			Covered in 2660 (u)
2264	Aiding & Abetting Unlicensed Practice	X			Covered in 2660 (j)
2271	False or Misleading Advertising	X			Covered in 2660 (b)
2273	Employment of Runners, Capers & Steerer	X			Covered in 2660 (t)
2274	Unauthorized Use of Medical Designation		X	Not included in PTBC Act	
2286	Violation of Professional Corporation	X			Covered in 2691
2288	Impersonation of Applicant in Exam	X			Covered in General Prov. 584
2289	Impersonation-Practice of Medicine		X	Not included in PTBC Act	

CODE (Guidelines)	DESCRIPTION	DELETE (within Guidelines)	ADDED (within Guidelines)	RELATED CODE (Current)	DESCRIPTION	DELETE (within Code)	ADD (as reference to Code)
B&P 123	Subverting or Attempting to Subvert Exam			B&P 584	Violation of Examination Security; Impersonation		X
				B&P 2660 (i)	Aiding and Abetting Unlawful Practice		X
				B&P 2660 (j)	Fraudulent, Dishonest or Corrupt Act		X
				B&P 2660.7	Subversion of Examination		X
B&P 136	Change of Address Reporting Requirement			CCR 1398.6	Filing of address, email and name change		
B&P141	Disciplinary Action by a Foreign Jurisdiction			B&P 2660(o)	Adverse Action Taken By another State or Agency		
				CCR 1399.24 (d)(4)	Failure to report adverse action by any state, fed gov, or military		X
B&P 490	Conviction of a Crime			B&P 2236	Criminal Conviction	X	
				B&P 2660 (e)	Conviction of a Crime		
				B&P 2660 (f)	Unlawful Possession or use of, or Conviction - Involving Controlled Substance		
				B&P 2660 (w)	Habitual Intemperance		
				B&P 2661	Conviction of a Crime		
B&P 490.5	Compliance with Child Support Orders			NONE			
B&P 498	Obtaining Licensure by Fraud			B&P 499	Obtaining Licensure by Fraud		
				B&P 581	Purchase or Fraudulent Alterationof Diploma or Other Writings		
				B&P 582	Use of Illegally Obtained, Altered or Counterfeit Diploma, Cert. or Trans.		
				B&P 583	False Statement in Applic Docs or Writings		
				B&P 2235	Procuring License by Fraud	X	
				B&P 2660 (a)	Violation of the PT or Medical Practice Act	X	
				B&P 2660 (c)	Procuring License by Fraud or Misrepresent.		
B&P 499	False Statement of Material Fact for App			B&P 498	Obtaining Licensure by Fraud		
				B&P 581	Purchase or Fraudulent Alterationof Diploma or Other Writings		
				B&P 582	Use of Illegally Obtained, Altered or Counterfeit Diploma, Cert. or Trans.		
				B&P 583	False Statement in Applic Docs or Writings		
				B&P 2235	Procuring License by Fraud	X	
				B&P 2660 (a)	Violation of the PT or Medical Practice Act	X	
				B&P 2660 (c)	Procuring License by Fraud or Misrepresent.		
B&P 580	Sale or Barter of Degree, Certificate or Trans.			NONE			
B&P 581	Purchase or Fraudulent Alterationof Diploma or Other Writings			B&P 498	Obtaining Licensure by Fraud		
				B&P 499	False Statement of Material Fact for App		
				B&P 582	Use of Illegally Obtained, Altered or Counterfeit Diploma, Cert. or Trans.		
				B&P 583	False Statement in Applic Docs or Writings		
				B&P 2235	Procuring License by Fraud	X	
				B&P 2660 (a)	Violation of the PT or Medical Practice Act	X	
				B&P 2660 (c)	Procuring License by Fraud or Misrepresent.		
B&P 582	Use of Illegally Obtained, Altered or Counterfeit Diploma, Cert. or Trans.			B&P 498	Obtaining Licensure by Fraud		

		B&P 499	False Statement of Material Fact for App		
		B&P 581	Purchase or Fraudulent Alterationof Diploma or Other Writings		
		B&P 583	False Statement in Applic Docs or Writings		
		B&P 2235	Procuring License by Fraud	X	
		B&P 2660 (a)	Violation of the PT or Medical Practice Act	X	
		B&P 2660 (c)	Procuring License by Fraud or Misrepresent.		
B&P 583	False Statement in Applic Docs or Writings	B&P 498	Obtaining Licensure by Fraud		
		B&P 499	False Statement of Material Fact for App		
		B&P 581	Purchase or Fraudulent Alterationof Diploma or Other Writings		
		B&P 582	Use of Illegally Obtained, Altered or Counterfeit Diploma, Cert. or Trans.		
		B&P 2235	Procuring License by Fraud	X	
		B&P 2660 (a)	Violation of the PT or Medical Practice Act	X	
		B&P 2660 (c)	Procuring License by Fraud or Misrepresent.		
B&P 584	Violation of Examination Security; Impersonation	B&P 2288	Impersonation of Applicant in Exam	X	
		B&P 2660 (a)	Violation of the PT or Medical Practice Act	X	
		B&P 2660.7	Subversion of Examination		
B&P 650	Consideration for Referrals Prohibited	B&P 2660 (t)	Employment or Runners, Cappers, Steerers, or other Persons		
B&P 651	Advertsing Violations - False Misleading	B&P 2660 (b)	Advertising in Violation of B&P 17500		
		B&P 2660 (q)	Engaging in Acts in Violation of Section 650, 651, 654.2		
		B&P 17500	False Advertising		
		CCR 1398.10	Advertising		
B&P 654.2	Beneficial Interst Referrals -Req. Disclosure	B&P 2660 (q)	Engaging in Acts in Violation of Section 650, 651, 654.2		
B&P 680	Health Care Pract. Disclosure of Name & License	CCR 1398.11	Physical Therapy Aide, Applicant, Student, Intern Identification		
B&P 725	Excessive Prescribing or Treatment	B&P 2660 (h)	Gross Negligence or Repeated Negligent Acts		
		B&P 2234 (b)	Gross Negligence	X	
		B&P 2660 (a)	Violation of the PT or Medical Practice Act	X	
B&P 726	Sexual Abuse or Misconduct with Patient or Client	B&P 2660 (m)	Sexual Misconduct or Violating B&P 726		
		B&P 2660 (p)	Inapropriate Viewing of Disrobed Patient if Unnecessary to Evaluate or Treat		
		B&P 2660.1	Presumption Regarding Incapability to Consent to Sexual Activity		
		CCR 1398.15 (b)	Notice to Consumer		
B&P 802	Reports of Malparctice Settlements etc.	NONE			
B&P 810	Insurance Fraud-Unprofessional Conduct	B&P 2261	Making False Documents	X	
		B&P 2262	Alteration of Medical Records	X	
		B&P 2660 (a)	Violation of the PT or Medical Practice Act	X	
		B&P 2660 (g)	Authority for ced to leave their state due to govt. declared emergency		X
		B&P 2660 (j)	Aiding or Abetting Unlawful Practice		X
		B&P 2660 (r)	Charging Fees for Services not Provided		X
		B&P 2660 (s)	Misrepresenting Documentation and/or Falsifying of Patient Records		X
B&P 901	Requirements for License Exemption	B&P 2630.5 (c)	Authority for P.T. from other jurisdiction for research, teaching, etc. for 60 days		
		B&P 2630.5 (d)	Additional criteria and authority for consultation, guest, etc..		
		B&P 2630.5 (e)	Authority to provide physical therapy to athletic team, organization, etc. For 60 days		
		B&P 2630.5 (f)	Authority for PTA to assist in the above		

			B&P 2630.5 (g)	Authority for ced to leave their state due to govt. declared emergency	
			CCR 1399.99.2	Sponsoring Entity Registration and Recordkeeping Requirements	
			CCR 1399.99.3	Out of State Practitioner - for Sponsored Event- Requesto to Participate	
			CCR 1399.99.4	Termination of Authorization and Appeal	
B&P 2068	Nutritional Advice		B&P 2660 (a)	Violation of the PT or Medical Practice Act	
B&P 2234 (b)	Gross Negligence	X	B&P 2660 (a)	Violation of the PT or Medical Practice Act	
B&P 2234 (c)	Repeated Negligent Acts	X	B&P 2660 (h)	Gross Negligence or Repeated Negligent Acts	
B&P 2234 (d)	Incompetence		B&P 2660 (d)	Practicing or Offering to Practice Beyond the Scope of Practice of P.T.	
			B&P 2660 (h)	Gross Negligence or Repeated Negligent Acts	
B&P 2235	Procuring License by Fraud	X	B&P 498	Obtaining Licensure by Fraud	
			B&P 499	False Statement of Material Fact for App	
			B&P 581	Purchase or Fraudulent Alterationof Diploma or Other Writings	
			B&P 582	Use of Illegally Obtained, Altered or Counterfeit Diploma, Cert. or Trans.	
			B&P 583	False Statement in Applic Docs or Writings	
B&P 2236	Criminal Conviction	X	B&P 2660 (c)	Authority for P.T. from other jurisdiction for research, teaching, etc. for 60 days	
			B&P 490	Conviction of a Crime	
			B&P 2660 (e)	Authority to provide physical therapy to athletic team, organization, etc. For 60 days	
			B&P 2660 (f)	Authority for PTA to assist in the above	
			B&P 2661	Conviction of a Crime	
			CCR1399.24 (d)	Failure to report adverse action by any state, fed gov, or military	
B&P 2237	Conviction Related to Drugs		NONE		
B&P 2238	Violation of Drug Statutes		NONE		
B&P 2239	Self Abuse of Drugs or Alcohol		B&P 2660 (f)	Unlawful Possession or use of, or Conviction - Involving Controlled Substance	
			B&P 2660 (f)(1)	Administering Controlled Substance or Dangerous Drug	X
			B&P 2660 (f)(2)	Using Controlled Substance	X
			B&P 2660 (f)(3)	Conviction of a Crime Involving Consumption of or Self Admnstration of..	X
			B&P 2660 (w)	Habitual Intemperance	
B&P 2261	Making False Document	X	B&P 810	Insurance Fraud-Unprofessional Conduct	
			B&P 2262	Alteration of Medical Records	
B&P 2262	Alteration of Medical Records	X	B&P 2660 (s)	Misrepresenting Documentation and/or Falsifying of Patient Records	
			B&P 810	Insurance Fraud-Unprofessional Conduct	
			B&P 2261	Making False Document	
			B&P 2660 (s)	Misrepresenting Documentation and/or Falsifying of Patient Records	
B&P 2263	Violation of Professional Confidence	X	B&P 2660 (u)	Willful, Unauthorized Violaton of Professional Confidence	
B&P 2264	Aiding and Abetting Unlicensed Practice	X	B&P 2630	Unlicensed Practice of Physical Therapy	
			B&P 2660 (j)	Fraudulent, Dishonest or corrupt Act Substantially Related	
			CCR 1399	Requirements for the Use of Aides	
B&P 2271	False or Misleading Advertising	X	B&P 651	Advertsing Violations - False Misleading	
			B&P 2660 (b)	Advertising in Violation of H&S 17500	
			B&P 17500	False Advertising	
			CCR 1398.10	Advertising	
B&P 2273	False or Misleading Advertising	X	B&P 651	Advertsing Violations - False Misleading	

			B&P 2660 (b) B&P 17500 CCR 1398.10 NONE	Advertising in Violation of H&S 17500 False Advertising Advertising		
B&P 2274	Unauthorized use of Medical Designation					
B&P 2286	Violation of Professional Corporation Act	X	B&P 2660 (a)	Violation of the PT or Medical Practice Act		
			B&P 2691	Physical Therapy Corporation		
B&P 2288	Impersonation of Applicant in Exam	X	B&P 584	Violation of Examination Security; Imersonation		
			B&P 2660.7	Subversion of Examination		
B&P 2289	Impersonation - Practice of Medicine		B&P 2660 (i)	Aiding or Abetting Unlawful Practice		
			B&P 2660 (j)	Fraudulent, Dishonest or corrupt Act Substantially Related		X
B&P 2608.5	Authorization of Insepct Patient Records		B&P 2660 (u)	Willful, Unauthorized Violaton of Professional Confidence	X	
			CCR 1399.24 (c)	Faillure to Coperatate in Board Investigation		X
B&P 2620.3	Topical Medicaions		CCR 1399.77	Administraton of Medications		
			CCR 1399.78	Authorization and Protocols Required for Topical Medications		
			CCR 1399.79	Authorized Topical Medications		
B&P 2620.5	Certification to Penetrte Tissue for the Purpose of Neuromuscular Eval		B&P 2660 (d)	Practicing or Offering to Practice Beyond the Scope of Practice of P.T.		
			CCR 1399.61	Certification Required - Electromyography		
B&P 2620.7	Maintenance of Patient Records		B&P 2660(g)	Failure to Maintain Adequate & Accurate Pt. Records		
			CCR 1398.13	Patient Record Documentation Requirement		
B&P 2622	Physical Therapist Care Responsibility & Use of Assistive Personnel		B&P 2630.3	Physical Therapist Assistant License & Supervison Requirements		
			B&P 2630.4	Physical Therapy Aide Supervision Requirements		
			B&P 2633	Authorized Use of Title "P.T." and Permitted Titles	X	
			CCR 1398.44	Supervision of Physical Theapist Assistants		
			CCR 1399	Requirements for the Use of Aides		
B&P 2630	Unlicensed Practice as a P.T.		B&P 2264	Aiding and Abetting Unlicensed Practice	X	
			B&P 2633	Authorized Use of Title "P.T." and Permitted Titles		X
			B&P 2660 (a)	Violation of the PT or Medical Practice Act	X	
			B&P 2660 (i)	Aiding or Abetting Unlawful Practice		
			B&P 2660 (j)	Fraudulent, Dishonest or corrupt Act Substantially Related		X
B&P 2630.3	Physical Therapist Assistant License & Supv. Req.		B&P 2264	Aiding and Abetting Unlicensed Practice	X	
			B&P 2660 (a)	Violation of the PT or Medical Practice Act	X	
			B&P 2660 (j)	Fraudulent, Dishonest or corrupt Act Substantially Related		
			B&P 2622 (a)	PT Responsibility of All Aspects of Care		X
			B&P 2622 (b)	PT - Authorization to Supervise 2 PTA's		X
			B&P 2633.5	Authorized Use of Title 'PTA' and Prohibitions of Using Affixes		X
			CCR 1398.44	Supervision of Physical Theapist Assistants		
B&P 2630.4	Physical Therapy Aide Supervision		B&P 2660 (j)	Fraudulent, Dishonest or corrupt Act Substantially Related		X
			B&P 2622 (a)	PT Responsibility of All Aspects of Care		X
			B&P2622 (c)	PT - Authorization to Supervise 1 Aide		X
			CCR 1399	Requirements for the Use of Aides		X

B&P 2630.5	Persons Exempt from Licensure Requirements	X	CCR 1398.44	Supervision of Physical Theapist Assistants	X	
			B&P 901	Requirements for License Exemption		X
			CCR 1399.99.2	Sponsoring Entity Registration and Recordkeeping Requirements		X
			CCR 1399.99.3	Out of State Practitioner - for Sponsored Event- Requesto to Participate		X
B&P 2633	Authorized Use of Title "Physical Therapist"		CCR 1399.99.4	Termination of Authorization and Appeal		X
			B&P 2630	Unlicensed Practice of Physical Therapy		X
			B&P 2630.3 (b)	Unlawful to Holld Himself/Herself Out as PTA Without License		X
			CCR 1398.37	Identif and Supervision of PT Students		
B&P 2633.5	Authorized Use of Title "Physical Therapist Assist		CCR 1398.52	Identif and Supervision of PTA Students		X
B&P 2633.7	Authorized Use of Title PT or PTA Student					
B&P 2636.5	Req for Obtaining Licensure without Written Exam & PTLA, PTALA Status					
B&P 2639	PT & PTA Graduate-License Applicant Status		CCR 1399.10	Supervision of PTLA		
			CCR 1399.12	Supervision of PTALA		X
			CCR 1399.10	Supervision of PTLA		
			CCR 1399.12	Supervision of PTALA		
B&P 2639.1	Equivelant Training Requirement-PTA Expiration & Renewal of Lic., Diclosure of Misd. Or Criminal Offense & CC Req.		NONE			
B&P 2644	Retired Status		B&P 2649	Demonstration of Contin. Comp Requirement		
			CCR 1399.24 (d)	Failure to Report with in 30 days - Indictment, Arrest, Conviction, etc.		X
			NONE			
B&P 2648.7	Demonstration of Continuing Competency Req			Expiration & Renewal of Lic., Diclosure of Misd. Or Criminal Offense & CC Req.		
			B&P 2644	CC Required		X
			CCR1399.91	Content Standards for CC		X
			CCR1399.92	CC Subject Matter Req other Limitations		X
B&P 2649	Requirement of Graduates from Foreign Schools		CCR1399.93	Authorized Pathwas for CC		X
			CCR1399.94	CC Record Keeping		X
			CCR1399.97	CC Inactive Status		X
			CCR1399.98	Exemption from CC Requirements		X
B&P 2653	Violation of the PT or Medical Practice Act		CCR 1399.99	Applicatins of Foreign Graduates		
			CCR 1398.26	Clinical Service Req for Foreign Graduates		
			CCR 1398.26.5			
			NONE			
B&P 2660 (a)	Advertising in Violation of B&P 17500		B&P 651	Advertsing Violations - False Misleading	X	
			B&P 2271	False or Misleading Advertising		
			B&P 17500	False Advertising		
			CCR 1398.10	Advertising (Authoirized provision for PT to advertise)		
B&P 2660 (b)	Procuring a License by Fraud or Misrepresentation		B&P 498	Obtaining Licensure by Fraud		
			B&P 499	False Statement of Material Fact for App		
			B&P 581	Purchase or Fraudulent Alterationof Diploma or Other Writings		
			B&P 582	Use of Illegally Obtained, Altered or Counterfeit Diploma, Cert. or Trans.		
B&P 2660 (c)			B&P 583	False Statement in Applic Docs or Writings		
			B&P 2235	Procuring License by Fraud		X
			B&P 2660 (a)	Violation of the PT or Medical Practice Act		X

B&P 2660 (d)	Practicing or Offering to Practice Beyon Scope of PT	B&P 2234 (d)	Incomptetence		
		B&P 2660 (h)	Gross Negligence or Repeated Acts of Negligence		
B&P 2660 (e)	Conviction of a Crime	B&P 490	Conviction of a Crime		
		B&P 2236	Criminal Conviction	X	
		B&P 2237	Conviction Related to Drugs		
		B&P 2238	Violation of Drug Statutes		X
		B&P 2239	Self Abuse of Drugs or Alcohol		X
		B&P 2660 (a)	Violation of the PT or Medical Practice Act	X	
			Unlawful Possession of Use of, or Convictinof a Criminal Offense Involving		
		B&P 2660(f)	Controlled Substance		
		B&P 2661	Conviction of a Crime		
		CCR 1399.24	Unprofessional Conduct		
		CCR 1399.24 (c)	Failure to Cooperate with Board Investigation		X
		CCR 1399.24(d)	Failure to Report Indictment, arres, conviction, etc..		X
B&P 2660 (f)	Unlawful Possession of Use of, or Convictinof a Criminal Offense Involving Controlled Substance	B&P 490	Conviction of a Crime		X
		B&P 2237	Conviction Related to Drugs		X
		B&P 2238	Violation of Drug Statutes		X
		B&P 2239	Self Abuse of Drugs or Alcohol		
		B&P 2660 (a)	Violation of the PT or Medical Practice Act		
B&P 2660 (g)	Failure to Maintain Adequate & Accurate Pt. Records	B&P 2620.7	Maintenance of Patient Records		
		CCR 1398.13	Patient Record Documentation Requirement		
		CCR 1398.44	Supervision of PTA (Documentation Requirements)		X
		CCR 1399	Requirements for the Use of Aides		X
		CCR 1399.10	Supervision of PTLA (Documentation Requirements)		X
		CCR 1399.12	Supervision of PTALA (Documentation Requirements)		X
B&P 2660 (h)	Gross Negligence or Repeated Acts of Negligence	B&P 725	Excessive Prescribing or Treatment		
		B&P 2234 (b)	Gross Negligence	X	
		B&P 2660 (a)	Violation of the PT or Medical Practice Act	X	
B&P 2660 (i)	Aiding and Abetting Unlawful Practice	B&P 2264	Aiding and Abetting Unlicensed Practice	X	
		B&P 2660 (a)	Violation of the PT or Medical Practice Act	X	
B&P 2660 (j)	Fraudulent, Dishonest or Corrupt Act	B&P 810	Insurance Fraud-Unprofessional Conduct		
B&P 2660 (k)	Infection Control Guide	NONE			
B&P 2660 (l)	Verbal Abuse or Sexual Harassment	NONE			
B&P 2660 (m)	Sexual Misconduct or Violating Code	B&P 726	Sexual Abuse or Misconduct with Patient or Client		
		CCR 1399.15 (b)	Specific to Sexual Misconduct violations		X
		B&P 2660.1	Presumption Regarding Incapability to Consent to Sexual Activity		X
	Permitting PTA, Aide to Hold Self Out Beyond Educ., Training and Exper.	B&P 2264	Aiding and Abetting Unlicensed Practice	X	
B&P 2660 (n)		B&P 2660 (a)	Violation of the PT or Medical Practice Act	X	
		B&P 2660	Unprofessional Conduct		
		B&P 2660 (i)	Aiding and Abetting Unlawful Practice		X

B&P 2660 (o)	Adverse Action Takenby Anohter State or Agency		B&P 2660 (j) B&P 141 CCR 1399.24 CCR 1399.24 (c) CCR 1399.24 (d)	Fraudulent, Dishonest or Corrupt Act Disciplinary Action by a Foreign Jurisdiction Unprofessional Conduct Failure to Cooperate with Board Investigation Failure to Report Indictment, arres, conviction, discipline, etc..		X X X
B&P 2660 (p)	In aproprate Viewing of Disrobed Patient		B&P 726 B&P 2660 (m) B&P 2660.1	Sexual Abuse or Misconduct with Patient or Client Sexual Misconduct or Violating Code Presumption Regarding Incapability to Consent to Sexual Activity		
B&P 2660 (q)	Engaging in Acts in Violation of Section 650, 651, or 654.2		B&P 650 B&P 651 B&P 654.2	Consideration for Referrals Prohibited Advertsing Violations - False Misleading Beneficial Interst Referrals -Req. Disclosure		
B&P 2660 (r)	Charging Fees for Services not Provided		B&P 2261 B&P 2262 B&P 2660 (s)	Making False Document Alteration of Medical Records Misrepresenting Documentation and/or Falsifying of Patient Records	X X	
B&P 2660 (s)	Misrepresenting Documentation and/or Falsifying of Patient Records		B&P 2261 B&P 2262 B&P 2660 (a) B&P 2660 (r)	Making False Document Alteration of Medical Records Violation of the PT or Medical Practice Act Charging Fees for Services not Provided	X X X	
B&P 2660 (t)	Employment of Runners, Cappers, Steerers, or Other Persons		B&P 650 B&P 2273 2660 a	Consideration for Referrals Prohibited False or Misleading Advertising Violation of the PT or Medical Practice Act		X X
B&P 2660 (u)	Willful, Unauthorized Violation of Professional Confidence		B&P 2263 B&P 2660 (a)	Violation of Professional Confidence Violation of the PT or Medical Practice Act	X X	
B&P 2660 (v)	Failing to Maintain Patient Confidentiality		NONE			
B&P 2660 (w)	Habitual Intemperance		B&P 2239 B&P 2660 (a)		X X	
B&P 2660 (x)	Failure to Comply with Provisions of Section 2620.1		NONE			
B&P 2660.1	Sexual Abuse or Misconduct with Patient or Client		B&P 726 B&P 2660(m) B&P 2660(p) CCR 1399.15 CCR 1399.15 (b)	Sexual Abuse or Misconduct with Patient or Client Sexual Misconduct or Violating Code In aproprate Viewing of Disrobed Patient Guidelines for Issuing Citatins and Imposing Discipline Proposed Decision - Sexual Misconduct		
B&P 2660.2	Issuance of Probationary Licene to Applicants	X	B&P 2661	Conviction of Crime		X
B&P 2660.4	Failure or Refusal to Provide Medical Records		CCR 1399.24 (b) CCR 1399.24 CCR 1399.24 (e)	Failure to Provide Records Failure to Cooperate with Board Investigation Failure to Comploy with Court Order		X X X
B&P 2660.5	Denial of License in Specified Circumstances - Registered Sex Offender		NONE			
B&P 2660.7	Subversion of Examination		B&P 123 B&P 584	Subverting or Attempting to Subvert Exam Violation of Examination Security; Impersonation		

		B&P 2288	Impersonation of Applicant in Exam	X	
		2660 (a)	Violation of the PT or Medical Practice Act	X	
		2660(i)	Aiding and Abetting Unlawful Practice		
		2660(j)	Fraudulent, Dishonest or Corrupt Act		X
		2660(k)	Infection Control Guidelines	X	
B&P 2661	Conviction of a Crime	B&P 490	Conviction of a Crime		
		B&P 2236	Criminal Conviction	X	
		2660	Unprofessional Conduct	X	
		B&P 2660 e	Conviction of a Crime		
		B&P 2660.2			
		CCR 1399.23	Required Actions Against Registered Sex Offenders		
		CCR 1399.24	Unprofessional Conduct		
		CCR 1399.24 (c)	Failure to Cooperate with Board Investigation		X
		CCR 1399.24 (d)	Failure to Report Conviction		X
B&P 2691	Physical Therapy Corporation	B&P 2236	Criminal Conviction	X	
		B&P 2286	Violation of Professional Corporation Act	X	
		B&P 2660 e	Conviction of a Crime		X
B&P 2692	Unprofessional Conduct - Corporation	NONE			
B&P 17500	False Advertising	B&P 651	Advertsing Violations - False Misleading		X
		B&P 2660 (b)	Advertising in Violation of B&P 17500		X
		B&P 2660 (q)	Engaging in Acts in Violation of Section 650, 651, or 654.2		X
		CCR 1398.10	Advertising		X
CCR 1398.6	Filing of Addresses, Email & Name Change	B&P 136	Change of Address Reporting Requirement		
		B&P 2660	Unprofessional Conduct		
CCR 1398.10	Advertising	B&P 651	Advertsing Violations - False Misleading		
		B&P 2271	False or Misleading Advertising	X	
		B&P 2660 (b)	Advertising in Violation of B&P 17500		
		B&P 2660 (a)	Violation of the PT or Medical Practice Act	X	
		B&P 17500	False Advertising		
CCR 1398.11	Physical Therapy Aide, Applicant, Student & Intern Identification	B&P 680	Health Care Pract. Disclosure of Name & License		
CCR 1398.13	Patient Record Documentation Requirement	B&P 2620.7	Maintenance of Patient Records		
CCR 1398.15	Notice to Consumer (Form NTC 12-01)	B&P 2660	Unprofessional Conduct		
CCR 1398.26	Applications of Foreign Graduates	B&P 2653	Requirements of Graduates From Foreign Schools		
CCR 1398.26.5	Clinical Service Requirement for Foreign Educ. App.	B&P 2653	Requirements of Graduates From Foreign Schools		
CCR 1398.37	Identif. & Supv. of PT Students & Interns	B&P 2633.7	Authoirzation of use of title by PT Student or PTA Student		
CCR 1398.44	Supervision of PTA's	B&P 2660 (a)	Unprofessional Conduct - Violation of any Provison of this Chapter		
		B&P 2622	Physical Therapist Care Responsibility & Use of Assistive Personnel		
		B&P 2630.3	Physical Therapist Assistant License & Supv. Req.		X
CCR 1398.52	Identification & Supv. of PTA Student & Interns	B&P 2630.5	Persons Exempt from Licensure Requirements	X	
		B&P 2633.7	Authorized Use of Title PT or PTA Student		X
CCR 1399	Requirements for the Use of Aides	B&P 2264	Aiding and Abetting Unlicensed Practice	X	

CCR 1399.10	Supervision of Physical Therapist License Applicant		B&P 2630	Unlicensed Practice as a P.T.	X	
			B&P 2630.4	Physical Therapy Aide Supervision		X
			B&P 2660 (a)	Unprofessional Conduct - Violation of any Provison of this Chapter	X	
			B&P 2636.5	Req for Obtaining Licensure without Written Exam & PTLA, PTALA Status		
CCR 1398.12	Supervision of Physical Therapist Assistant License Applicant		B&P 2639	PT & PTA Graduate-License Applicant Status		
			B&P 2636.5	Req for Obtaining Licensure without Written Exam & PTLA, PTALA Status		X
CCR 1399.15 (b)	Order to revoke for any findings of sexual offense ...	X	B&P 2660 (m)	Sexual Misconduct or Violating Code		X
			B&P 2660.1	Presumption Regarding Incapability to Consent to Sexual Activity		X
			B&P 726	Sexual Abuse or Misconduct with Patient or Client		X
			B&P 480	Denial of License		
CCR 1399.23	Required Actions Against Registered Sex Offenders		B&P 726	Sexual Abuse or Misconduct with Patient or Client		
			B&P 2660.1	Presumption Regarding Incapability to Consent to Sexual Activity		
			B&P 2660.5	Denial of License in Specified Circumstances - Registered Sex Offender		
			B&P 2608	Proceedings related to denial, suspension, ect...		
			B&P 2660.2	Authoirty to Issue IPL or PR		
			B&P 2661	Authority to Discipline		
			CCR 1399.15 (b)	Authority to order to revoke for any findings of sexual offense ...		X
CCR 1399.24 (a)	Prohibiting Another Person from Cooperating with or Disputing Complaint		NONE			
CCR 1399.24 (b)	Failure to Provide Certified Documents		B&P 2608.5	Authorization of Insepct Patient Records		
CCR 1399.24 (c)	Failure to Cooperate in Board Investigation		NONE			
CCR 1399.24 (d)	Failure to Report Criminal or Disciplinary Information		B&P 141	Disciplinary Action by a Foreign Jurisdiction		
			B&P 490	Conviction of a Crime		
			B&P 2661	Conviction of a Crime		
			B&P 2660 (e)	Conviction of a Crime		
CCR 1399.24 (e)	Failure to Comply with Subpoena Order		B&P 2660	Unprofessional Conduct		X
CCR 1399.61	Certification Required - Electromyography		B&P 2620.5	Authorization of Insepct Patient Records		
CCR 1399.77	Administration of Medications (Topical)		B&P 2620.3	Authorization of Insepct Patient Records		
			CCR 1399.78	Authorization and Protocols Required for Topical Medications		
CCR 1399.78	Authorization and Protocols required for Topical Meds		CCR 1399.79	Authorized Topical Medications		
			B&P 2620.3	Authorization of Insepct Patient Records		
			CCR 1399.77	Administration of Medications		
CCR 1399.79	Authorized Topical Medications		CCR 1399.79	Authorized Topical Medications		
			B&P 2620.3	Authorization of Insepct Patient Records		
			CCR 1399.77	Administration of Medications		
			CCR 1399.78	Authorization and Protocols Required for Topical Medications		
CCR 1399.91	Continuing Competency Required			Expiration & Renewal of Lic., Diclosure of Misd. Or Criminal Offense & CC		
			B&P 2644	Req.		
			b&p 2649	Demonstration of Continuing Competency Req		

CCR 1399.92	Content Standards for Continuing Competency	B&P 2644 B&P 2649	Expiration & Renewal of Lic., Disclosure of Misd. Or Criminal Offense & CC Req. Demonstration of Continuing Competency Req
CCR 1399.93	Contin. Comp. Subject Matter Requirements & Other Limitations	B&P 2644 B&P 2649	Expiration & Renewal of Lic., Disclosure of Misd. Or Criminal Offense & CC Req. Demonstration of Continuing Competency Req
CCR 1399.94	Authorized Pathways for Obtaining CC Hours	B&P 2644 B&P 2649	Expiration & Renewal of Lic., Disclosure of Misd. Or Criminal Offense & CC Req. Demonstration of Continuing Competency Req
CCR 1399.95	Standards for Approved Agencies	B&P 2649	Demonstration of Continuing Competency Req
CCR 1399.96	Standards for Approved Providers	B&P 2649	Demonstration of Continuing Competency Req
CCR 1399.97	Record Keeping (CC)	B&P 2644 B&P 2649	Expiration & Renewal of Lic., Disclosure of Misd. Or Criminal Offense & CC Req. Demonstration of Continuing Competency Req
CCR 1399.98	Inactive Status (CC)	B&P 2644 B&P 2649	Expiration & Renewal of Lic., Disclosure of Misd. Or Criminal Offense & CC Req. Demonstration of Continuing Competency Req
CCR 1399.99	Exemption from Continuing Competency Req.	B&P 2644 B&P 2649	Expiration & Renewal of Lic., Disclosure of Misd. Or Criminal Offense & CC Req. Demonstration of Continuing Competency Req
CCR 1399.99.2	Sponsoring Entity Registration & Record Keeping	B&P 901	Requirements for License Exemption
CCR 1399.99.3	Out of State Practitioner Authoriz. To Participate in Sponsored Event	B&P 901	Requirements for License Exemption
CCR 1399.99.4	Termination of Authoriz. And Appeal (Out of State Practitioners)	B&P 901	Requirements for License Exemption
H&S 123110	Patient's Access to Health Care Records	NONE	



Physical Therapy Board of California

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Date: 8/15/2017
Prepared for: Board Members
Prepared by: Liz Constancio, Administrative Services Manager
Subject: 2nd Request - Executive Officer Exempt Level Increase

Purpose:

To request the exempt level of the PTBC's Executive Officer (EO) position be increased from Level O to Level L. The Board Members have determined this action is necessary in efforts to provide the appropriate exempt level in support of the PTBC's organizational structure.

Attachments: 1. [PTBC's Executive Officer Exempt Level/Organizational Structure Overview \(PTBC-5/2016\)](#)
 2. [DCA Exempt Level Comparison \(PTBC-8/2017\)](#)
 3. [DCA Executive Officer Exempt Level Study \(DCA-5/2000\)](#)
 4. [Exempt Salary Schedule \(CalHR-10/2016\)](#)
 5. [Career Executive Assignment Guidelines \(CalHR-11/2015\)](#)
 6. [Memorandum Request for Consideration of Increase of Exempt Level of Executive Officer \(Draft -8/2017\)](#)
 7. [Executive Officer Exempt Level Increase \(Previous package\) \(PTBC-8/2016\)](#)

Background:

The PTBC's Executive Officer (EO) Exempt Level is not appropriately allocated in accordance with the organization structure.

The EO position was initially established on July 1, 1976 with the title of "Deputy, Physical Therapy Examining Committee, and Staff Consultant". The position was under the direction of the Medical Board of California (MBC) within the Department of Consumer Affairs (DCA).

On November 14, 1988, the EO exempt entitlement B&P code E/BP2604 was tied to the position and on March 2, 1989, the exempt level changed from P4 level (Associate Analyst II equivalent) to level P2 (SSM I equivalent), following the DCA's EO Exempt Level Study conducted in 1985.

FY 1996-97, the oversight designation was transferred to the Physical Therapy Examining Committee (PTEC) from the MBC (Chapter 829, Statutes of 1996 (AB3473)), which later changed the PTEC to the Physical Therapy Board of California (PTBC). The PTBC's EO exempt level did not change with the organizational change and remained allocated at the P2 level (SSM I equivalent).

On August 31, 2000, the EO exempt level was reallocated from level P2 to level O (SSM II equivalent) and the classification title changed from Deputy, Physical Therapy Examining Committee, and Staff Consultant

to “Executive Officer, Physical Therapy Board of California” in result of another department-wide EO Exempt Level Study conducted by the DCA’s Office of Human Resources (OHR) (dated May 2000). At the time of the study (FY 2000/01), the PTBC was authorized 8.8 positions, including the EO position and was allocated a budget authority of \$1,956,976. In addition, the PTBC supported a licensee population of approximately 32,612.

FY 2011-12, initiated an EO Exempt Level Study and contracted with the California Human Resources (CalHR) to conduct a salary study of all the EO positions, including PTBC’s EO position to determine if the salaries were appropriately allocated. At the time the study was conducted, the PTBC was authorized 18.0 positions, including the EO position, had a budget authority of \$3,472,038 and approximately 32,187 licensees. Using the DCA’s previous EO Exempt Level Study Guidelines of May 2000, the PTBC would have met the allocation criteria for exempt level M. However, the Study was limited due to budget constraints resulting in furloughs, vacancies, state-wide hiring freezes, etc. and increased resources, including exempt level increases were not permitted.

FY 2015-16, the PTBC was authorized 19.1 positions, including the EO and also employs four additional staff (1 OT, 2 SSA and 1 AGPA) authorized in the “temp help” line item (blanket expenditures). These temporary positions were necessary to accommodate increasing program requirements and alleviate excessive backlogs. In addition, the PTBC had a budget authority of \$4,227,000 and projected to spend \$4,142,460 (year-end).

FY 2016-17, Board President, Katarina Eleby submitted a formal request on behalf of the Board Members to the DCA’s, Office of Human Resources requesting consideration to increase the EO’s exempt level, from O to level L, effective August 1, 2016. However, on April 21, 2017, President Eleby was informed by DCA’s Human Resource Chief, Ricardo DeLaCruz the Boards request for the exempt level increase was not approved.

While various significant program changes have occurred between FY 2000/01 and FY 2016/17, the most significant over the past five (5) years is as followed:

- 2010/11 – the PTBC implemented Continuing Competency (CC) requirements (California Code of Regulations, sections 1399.90 – 1399.99). The CC requires all licensees to accumulate 30 hours of continuing education during each renewal cycle (biennial) from a course provider approved by the Board. In addition, to ensure applicants meet CC requirements, the PTBC is required to conduct a percentage of random audits. This change increased the licensing requirements. As a result, the PTBC increased its staffing resources to manage the new additional workload.
- 2011/12 – the PTBC implemented the Consumer Protection Enforcement Initiative (CPEI) developed by the DCA. The CPEI proposed streamlining and standardize the complaint intake/analysis to decrease the average processing time for complaint intake, investigation, and prosecution from three years to 12-18 months. This change increased the enforcement requirements. As a result, the PTBC increased staffing resources to manage the new additional workload.

In addition, the PTBC implemented fixed-date testing for its National Physical Therapy Exam (NPTE) administered by the Federation of State Boards of Physical Therapy (FSBPT). The Fixed-date testing schedule requires all applicants to adhere to the FSBPT fixed-date testing schedule and deadlines. The FSBPT administers the NPTE for physical therapist and physical therapist assistants 4 times per year. This change revised the sequence and frequency of examinations, requiring the Board to process a higher volume of applications in a compressed amount of time resulting in additional workload within the application and licensing services. The PTBC was required to absorb the additional workload within its existing resources

- 2012/13 – Implemented expedited licensure requirements (Business and Professions Code, section 115.5). The expedited licensure requirements provide applicants identified as a spouse or domestic partner of active duty military personnel to an expeditious license process. This change revised the sequence of the application process, requiring the PTBC to process these applications expeditiously, in turn, processing a higher volume of applications in a compressed amount of time resulting in additional workload within the application, licensing and cashing services. The PTBC was required to absorb the additional workload within its existing resources.
- 2013/14 – Passage of SB 198 (eff. 1/1/14) – revised the Physical Therapy Practice Act in its entirety; however, the most impactful changes:
 - ✓ Medical Records - Added authority for the Board to collect \$1,000 per day for each day a patient's medical records have not been produced to the Board after the 15th day of request.
 - ✓ Test of English as a Foreign Language (TOEFL) - Added requirement for individuals educated outside the U.S. at a non-accredited school to submit proof of English proficiency.
 - ✓ Licensure Exemption – Added provisions providing licensure exemption to the licensees who are licensed out of state or out of the country if they are researching, demonstrating, or providing physical therapy in connection with teaching or participating in an education seminar for no more than 60 days a calendar year. ○ Education Accreditation – Added educational requirements shall include those prescribed by CAPTE or the Physiotherapy Education Accreditation Canada, and shall include 18 weeks of full time experience.
 - ✓ Licensure Renewal Fee Exemptions and Waivers - Added licensure renewal exemptions for Military, Disability, Voluntary/Unpaid; and Retired.
 - ✓ Direct Access – Added provisions allowing patients to access physical therapy services without a diagnosis for 45 calendar days or 12 visits, whichever occurs first. If treatment continues beyond 45 calendar days or 12 visits, the patient must receive an in-person examination from a physician and surgeon or podiatrist, who must also sign off on the physical therapist's plan of care. AB 1000 also expands the types of licensed professionals permitted to work for a professional corporation; adds physical therapy corporations to the list of corporations in Section 13401.5, identifying who, other than physical therapists, may be a shareholder, officer, or director of a physical therapy corporation; and, permits a licensed physical therapist to be a shareholder, officer, or director of a medical corporation and a podiatric corporation.

- 2015/16 – Implemented new licensing and enforcement online system, Breeze. The Breeze is an integrated system that has replaced the DCA's legacy systems (CAS/ATS), effective January 19, 2016. In order to determine the impact the Breeze has on board operations, the PTBC will continue to work on system efficiencies and monitor and track operations over the next 12 months. Meanwhile, the PTBC is required to absorb any additional workload within its existing resources.
- 2016/17 – Staffing resources increased by 3.0 positions in support the volume of workload for processing applications for examination and licensure. Further, in efforts to align our structure to meet allocation guidelines the PTBC was authorized one additional Staff Services Manager I position within the Application and Licensing Services Program. This action was necessary to obtain a separation in duties between its' administrative functions and application and licensing functions. As a result, staff resources increased from 19.1 to 21.5 authorized positions, The 21.5 authorized positions does not include positions allocated as blanket expenditures, which includes a Cashier and one Application Analyst.

Analysis:

Generally, when changes occur, increasing program requirements, such as, scope of responsibility, staff size, budget, complexity, special requirements, etc. merits a salary or level increase.

Over the past decade, the PTBC's role and responsibilities have changed significantly resulting in increased program requirements, which includes increased staffing levels, budget authority, operating expenditures, etc. The PTBC's EO Exempt Level has not changed since fiscal year 2000/01. Meanwhile the EO exempt level remains at the same level (O), which was determined based on PTBC's organizational structure and level of responsibilities of FY 2000-01. The PTBC's current structure is as follows:

Working Title: Executive Officer
Exempt Level: O
Salary: 7053-7856

Authorized Positions: 21.4
Authorized Budget: 5,224,000
Licensee Population: 36,368

In reviewing the DCA's EO exempt level criteria outlined in the EO Exempt Level Study of May 2000, the PTBC's EO level is not allocated appropriately to support the current organizational structure.

In addition, The EO exempt level from O to level L, will not require a budget change proposal request, nor create a budget deficiency. The EO monthly salary base of level O is \$7053-\$7856 and \$8132 - \$9058 for level L. Based on the maximum monthly salary base, the PTBC's expenditures may have a potential annual increase of \$14,424 within its Personnel Services budget. The PTBC is currently authorized \$1,975,000 for Personnel Services and projects to fully expend its budget (year-end); however, expenditures include the cost for temp help staff, which approximately \$13,027 annually. The PTBC anticipates these additional expenditures to decrease each year – as staffing deficiencies have been corrected through the BCP process allowing the PTBC to true-up its budget and significantly reduce

its reliance on temp help. The potential maximum annual increase (\$14, 424) is minor and absorbable within existing resources.

Further, the DCA, Budget Office has advised staff that the PTBC's fund is healthy and the PTBC can support the estimated cost identified within its existing resources without requiring a budget change proposal.

Therefore, in my opinion, a change to the PTBC's EO Exempt Level from O to Level L is a viable course of action.

Action Requested:

Board Members - Motion to vote in support of the DCA, Office of Human Resources to work with the PTBC staff and appropriate agencies in obtaining an exempt level increase for PTBC's EO position.

Physical Therapy Board of California
Executive Officer Exempt Level / Organizational Structure Overview

Categories	FY 1996/97 (Actual)	FY 2000/01 (Actual)	FY 2011/12 (Actual)	FY 2012/13 (Actual)	FY 2013/14 (Actual)	FY 2014/15 (Actual)	FY 2015/16 (Actual)	FY 2016/17 (As of 6/30/17)	% Increase / Decrease (FY 2000/01 FY 2016/17)
Authorized Positions	5.5	8.8	18.0	14.3	16.4	19.4	19.4	21.4	143%
Executive Officer (Exempt Level)	P2	O	O	O	O	O	O	O	None
PERS SVS / OE & E Budget	\$949,210	\$1,496,576	\$2,491,132	\$2,249,952	\$2,253,849	\$2,758,979	\$3,025,000	\$3,267,000	118%
Licensee Population	18,786	21,351	32,187	32,604	34,207	35,435	36,312	37,435	75%
Applications Received	1,094	1,569	1,953	1,900	2,040	2,139	2,546	2,771	77%
Enforcement Budget	\$652,351	\$460,400	\$980,906	\$1,107,051	\$1,173,913	\$1,317,611	\$1,202,000	\$1,909,000	315%
Complaints Received	189	219	1,816	1,528	1,309	1,006	703	769	251%
Investigations	192	126	1,796	1,483	1,197	995	692	775	515%
Cases Referred to AG's Office	22	26	70	59	52	60	25	51	96%
Disciplinary Actions	9	15	33	35	41	54	54	33	120%
Citations Issued	0	4	613	258	249	99	70	38	850%
Authorized Budget	\$1,601,561	\$1,956,976	\$3,472,038	\$3,357,003	\$3,427,762	\$4,076,590	\$4,227,000	\$5,176,000	164%
Total Expenditures (CalStars FM13)	\$1,539,012	\$1,954,347	\$3,232,964	\$3,204,071	\$3,407,765	\$4,007,185	\$4,108,884	\$4,805,470	146%

- **FY 1996/97**
 1. No Change in EO Level, following the designated oversight transferring from MBC to PTBC.
- **FY 2000/01**
 1. EO level changed from level P2 to level O, following DCA's EO Exempt Level Study (5/2000).
- **FY 2011/12**
 1. No Change in EO Level.
 2. \$150,000 one-time AG Augmentation.
- **FY 2012/13**
 1. \$170,000 one-time AG Augmentation.
- **FY 2013/14**
 1. No Change in EO Level.
 2. \$320,000 one-time AG Augmentation.
 3. BCP 1110-31 Staffing increase w/ funding \$189,000.
- **PY 2014/15**
 1. No Change in EO Level.
 2. BCP 1110-03L Staffing increase (2 yr. limited-term) w/ \$91,000 FY14/15 and \$83,000 FY15/16.
 3. BCP 1110-32 \$142,000 AG Augmentation.
- **CY 2015/16**
 1. No Change in EO Level.
 2. 6/30/16, 2 yr. limited-term AGPA position was abolished.
- **CY 2016/17**
 1. No Change in EO Level.
 2. BCP 1111-024-BR-2016-GB Staffing increase (3.0 positions) w/\$268,000 FY16/17 and \$244,000 FY17/18 and ongoing.

**Physical Therapy Board of California
Executive Officer Level and Structure Chart**

	FY 1996/97	FY 2000/01	FY 2011/12	FY 2012/13 (Actual)	FY 2013/14 (Actual)	PY 2014/15 (Actual)	% Board Changes (FY 00/01 FY 11/12)	% Board Changes (FY 00/01 PY 14/15)	CY 2015/16 (As of 6/30/16)
Authorized Positions	5.5	8.8	18.0	14.4	16.1	19.1	104%	117%	19.1
Executive Officer Level	P2	Level O	Level O	Level O	Level O	Level O	0%	0%	Level O
PERS SVS / OE & E Budget	\$949,210	\$1,496,576	\$2,491,132	\$2,249,952	\$2,253,849	\$2,758,979	57%	84%	\$3,025,000
Licensee Population	18,786	21,351	32,187	33,185	33,993	35,158	51%	65%	37,580
Applications Received	1,094	1,569	1,953	1,900	2,038	2,139	30%	36%	2,294
Enforcement Budget	\$652,351	\$460,400	\$980,906	\$1,107,051	\$1,173,913	\$1,317,611	113%	186%	\$1,202,000
Complaints Received	189	219	1816	1528	1215	1006	729%	359%	700
Investigations	192	126	1796	1483	1197	995	1325%	690%	692
Cases Referred to AG's Office	22	26	70	59	51	60	169%	131%	25
Disciplinary Actions	9	15	33	35	41	54	120%	260%	54
Citations Issued	0	4	613	258	258	99	15225%	2375%	79
Total Budget	\$1,601,561	\$1,956,976	\$3,472,038	\$3,357,003	\$3,427,762	\$4,076,590	77%	108%	\$4,227,000
Total Expenditures (CalStars FM13)	\$1,539,012	\$1,954,347	\$3,232,964	\$3,204,071	\$3,407,765	\$4,007,185	65%	105%	\$4,108,884

- **FY 1996/97**
 1. No Change in EO Level, following the designated oversight transferring from MBC to PTBC.
- **FY 2000/01**
 1. EO level changed from level P2 to level O, following DCA's EO Exempt Level Study (5/2000).
- **FY 2011/12**
 1. No Change in EO Level.
 2. \$150,000 one-time AG Augmentation.
- **FY 2012/13**
 1. \$170,000 one-time AG Augmentation.
- **FY 2013/14**
 1. No Change in EO Level.
 2. \$320,000 one-time AG Augmentation.
 3. BCP 1110-31 Staffing increase w/ funding \$189,000.
- **PY 2014/15**
 1. No Change in EO Level.
 2. BCP 1110-03L Staffing increase (2 yr. limited-term) w/ \$91,000 FY 14/15 and \$83,000 FY 15/16.
 3. BCP 1110-32 \$142,000 AG Augmentation.
- **CY 2015/16**
 1. No Change in EO Level.
 2. 6/30/16, 2 yr. limited-term AGPA position was abolished.

Physical Therapy Board of California
 August 2017 Board Meeting
 Comparison of DCA Healing Arts Boards - Exempt Levels Scope of Responsibility

Table 1. List DCA, Healing Arts Boards s . The Boards similar to PTBC's scope of responsibilities are highlighted (blue). The larger healing arts Boards are provided in Table 2.

Program	Working Title	Exempt Category	Level	Level Definition	CalHR Established Salaries	Civil Service Excluded Level Definition	Authorized Budget	Authorized Positions	Licensee Population
Physical Therapy Board of California	Executive Officer	I. Management	O	SSM II Equivalent	7,053 - 7,856	SSMII (M)	5,224	21.4	36,368
Veterinary Medical Board	Executive Officer	I. Management	M	SSM III Equivalent	7,752 - 8,635	SSMIII	4,964	21.3	25,799
Dental Hygiene Committee of California	Executive Officer	I. Management	O	SSM II Equivalent	7,053 - 7,856	SSMII (M)	2,036	10.2	24,205
Respiratory Care Board of California	Executive Officer	I. Management	M	SSM III Equivalent	7,752 - 8,635	SSMIII	3,733	17.4	23,215
Speech Language Pathalogoy & Audiology & Hearing Aid Dispensers Board	Executive Officer	I. Management	O	SSM II Equivalent	7,053 - 7,856	SSMII (M)	1,997	9.6	22,330
California Board of Psychology	Executive Officer	I. Management	M	SSM III Equivalent	7,752 - 8,635	SSMIII	4,962	21.3	22,079
Board of Chiropractic Examiners	Executive Officer	I. Management	* -		9,839 - 11,173		4,091	19.4	18,619
California State Board of Optometry	Executive Officer	I. Management	O	SSM II Equivalent	7,053 - 7,856	SSMII (M)	1,889	12.4	17,082
California Acupuncture Board	Executive Officer	I. Management	O	SSM II Equivalent	7,053 - 7,856	SSMII (M)	3,795	11.0	16,126
California Board of Occupational Therapy	Executive Officer	I. Management	O	SSM II Equivalent	7,053 - 7,856	SSMII (M)	2,318	15.2	15,553
Physician Assistant Board	Executive Officer	I. Management	* -		7,053 - 8,092		1,672	4.5	10,764
Osteopathic Medical Board of California	Executive Director	I. Management	O	SSM II Equivalent	7,053 - 7,856	SSMII (M)	2,291	11.4	9,074
California Board of Podiatric Medicine	Executive Officer	I. Management	O	SSM II Equivalent	7,053 - 7,856	SSMII (M)	1,511	5.2	2,333

Table 2. List the largest DCA, Healing Arts Boards.

Program	Working Title	Exempt Category	Level	Level Definition	CalHR Established Salaries	Civil Service Excluded Level Definition	Authorized Budget	Authorized Positions	Licensee Population
Medical Board of California	Executive Director	I. Management	F	CEA IV Equivalent	10,320 - 11,498	CEA (B)	63,216	170.9	155,679
Board of Pharmacy	Executive Officer	I. Management	* -		10,054 - 11,200		20,477	101.1	138,444
Board of Registered Nursing	Executive Officer	I. Management	* -		11,706 - 12,058		42,513	157.8	528,198
Board of Vocational Nursing & Psychiatric Technicians	Executive Officer	I. Management	* -		8,942 - 10,259		13,320	67.9	134,410
Dental Board of California	Executive Officer	I. Management	J		8,942 - 9,960	CEA (A)	13,349	67.5	97,139 / 17,380 (permits)

The data being reported was collected from various resources, as follows:
 CalHR Exempt Pay Scale (REV. 8/8/17)
 CalHR Exempt Pay Schedule (REV. 10/2016)
 DCA, Annual Report (2016)
 Govenor's Budget Act (FY 2016/17)

* - Staff was unable to identify the Exempt Levels of these positions.

SUMMARY OF ISSUES

At the request of the Department of Personnel Administration (DPA), the Department of Consumer Affairs (DCA) reviewed the exempt Executive Officer positions for the various boards within the Department to determine the appropriate Exempt Levels for those positions.

METHODOLOGY

The Department conducted a study of the salaries and levels of responsibility of the Executive Officer positions. Included in this study were:

- a review of the history of the exempt levels of the positions;
- a review of the duty statement of the positions;
- a review of the organizational structures;
- a objective comparison of the numbers for each program over the past ten years (1989-90 and 1998-99) and
- a survey completed by each incumbent which sought to elicit more information in the more subjective areas of complexity and sensitivity.

ANALYSIS

The analysis of the information contained in the study focused on the following allocation considerations:

1. Degree of authority
2. Scope of Responsibility
3. Staff size
4. Budget
5. Complexity
6. Sensitivity of Programs
7. Special requirements

DEGREE OF AUTHORITY

Executive Officers for all boards have such a similar degree of authority that it is not a determining factor. All positions have the authority to make essentially the same types of decisions; differences exist in the consequence of error of such decisions.

Each position has administrative authority over staff, responsibility for policy development and implementation and responsibility for management of the board programs, including:

- Examinations and/or licensing;
- Regulations;
- Complains and mediation;
- Inspections and/or investigations;
- Enforcement/disciplinary actions;
- Legislation and testimony;
- Budget development and testimony;
- Strategic Plan development;
- Media contact;
- Industry relations; and
- Public education programs.

In the larger boards, immediate responsibility for some of these functions may be delegated to subordinate staff; in the small boards, often the Executive Officer is the only one qualified to make decisions in these areas.

EXECUTIVE OFFICER EXEMPT LEVEL STUDY

May, 2000

SCOPE OF RESPONSIBILITY (Staff/Budget) – Historical Overview

In 1985, when the last salary survey was completed, the boards were categorized in accordance with the following criteria:

Level	Size	Budget	Staff	Licensees
I	Small Department <ul style="list-style-type: none"> Medical Board Contractors 	\$10 M +	100+	100,000+
K	Largest Board <ul style="list-style-type: none"> Accountancy* Dental Examiners* Pharmacy Professional Engineers Registered Nursing* Voc.Nurse & Psych Tech.* 	\$2.5 – 10 M	35 – 100	100,000+
L	Large Board <ul style="list-style-type: none"> NONE 	\$2.0 – 2.5 M	24 – 34	25 – 100,000
M	Medium Board <ul style="list-style-type: none"> Architects Athletic Structural Pest 	\$1.0 – 2.0 M	15 – 24	20 – 25,000
O	Small Board <ul style="list-style-type: none"> Behavioral Sciences* Vet Medicine* 	\$0.5 – 1.0 M	10 – 14	10 – 20,000
P2	Smallest Boards <ul style="list-style-type: none"> Acupuncture* Dental Auxiliaries Geology Optometry Physical Therapy* Physician Assistants* Podiatric Medicine* Psychology* Respiratory Care* Shorthand Reporters Speech Pathology 	Up to \$0.49 M	2 – 9	Up to 10,000

* Received upgrades after 1985 study

- RN increased from M to K
- Accountancy, Dental, Pharmacy, Voc Nurse increased from M to L
- Architects increased from O to M
- Behavioral Science, Vet Med increased from P2 to O
- Acupuncture, Physical Therapy, Physician Assist, Podiatric Med, Psychology and Respiratory Care increased from P4 to P2

The following changes have occurred since 1985:

In 1989, Respiratory Care Board increased from P2 to O.

In 1990, Psychology increased from P2 to O.

In 1994, Psychology increased from O to M.

In 1995, Voc Nurse increased from L to K

In 1997, Medical Board and CSLB increased from G to F; Behavioral Science increased from O to M; Accountancy, Dental and Pharmacy increased from L to K and Architects increased from M to L.

EXECUTIVE OFFICER EXEMPT LEVEL STUDY
May, 2000

Over the past fifteen years, the changes shown above have altered the categories and levels. The chart below describes the current structure:

Level	Size	Budget	Staff	Licensees
F	Small Department • No change	\$36 - 45M	314 - 479	400,000+
K	Largest Board • No change	\$5.6 – 13.7M	40 – 96.7	35 - 325,000
L	Large Board • Architects	\$3.5M	34.1	
M	Medium Board • Athletic • Behavioral Science • Structural Pest	\$0.9 – 4.5M	13.3 – 35.9	2 – 20,000
O	Small Board • Vet Medicine	\$1.85 M	12	14,000
P2	Smallest Board • Acupuncture • Dental Auxiliaries • Geology • Optometry • Physical Therapy • Physician Assistants • Podiatric Medicine • Court Reporters • Speech Pathology	\$0.9 – 2M	5.1 – 10.8	3 – 43,000
P4*				

*As in 1985, the Board of Guide Dogs for the Blind, with a FY 2000-01 staff of 1.5 and a budget of \$.1M, is currently allocated to this level

COMPLEXITY/SENSITIVITY

To evaluate the complexity of each position, the following factors were considered:

- Number of separate programs
- Complexity of examinations (Board-developed vs. purchased or national; multiple parts, etc.)
- Difficulty of application approval (complexity of requirements; foreign school curriculum review; equivalency formulas, etc.)
- School accreditation/approval
- Continuing education requirements
- Complexity of investigations
- Discipline (citation and fine programs; review committees; stipulation; license revocation, etc.)
- Interaction with other agencies (other state and local public agencies; professional associations; industry contacts, etc.)
- Consumer education programs
- Special programs (diversion; research; trusts, etc.)

To evaluate the sensitivity of the programs, the following factors were reviewed:

- Public interest
- Legislative interest/activity
- Media contact
- Sophistication of licensees (educational level; political interest, etc.)
- Types of enforcement cases
- Consequence of error
- Health and Safety issues

SPECIAL REQUIREMENTS

The statutory requirement for professional licensure for the Executive Officers of two boards, Registered Nursing and Vocational Nurse, must be given special consideration in determining Exempt Level allocations.

QUANTITATIVE AND QUALITATIVE DATA FOR EACH BOARD

The information provided below uses the categories established in 1985 but indicates the current Exempt Levels of the Executive Officer positions.

SMALL DEPARTMENT (CURRENTL LEVEL F) – CONTRACTORS, MEDICAL BOARD

Although these boards have grown substantially since 1985, Exempt Level upgrades during the past fifteen years have adequately addressed these issues; therefore, no changes are requested.

LARGEST BOARDS (CURRENT LEVEL K/L) - ACCOUNTANCY, DENTAL BOARD, PROFESSIONAL ENGINEERS, PHARMACY, ARCHITECTS (L), VOCATIONAL NURSE, REGISTERED NURSING

In 1985, the Board of Architectural Examiners was allocated to level M and Professional Engineers was allocated to level K; the rest of these boards were assigned to level L. With the exception of Professional Engineers, all of these boards have moved up one level in the past fifteen years to address the growth in staffing and budget levels. But the increased classification levels of subordinate civil service staff has created compaction in the Board of Accountancy, Pharmacy, Professional Engineers and the Dental Board which now merits an additional level for the Executive Officers. In addition, the requirement for professional licensure for the Executive Officers for the Board of Registered Nursing and the Board of Vocational Nurse and Psychiatric Technicians and the obvious public health and safety issues of these two boards should be considered adequate reasons for higher levels for these boards. The Department also deems the higher professional level of the licensee population of the Board of Registered Nursing a valid basis for justifying the highest Exempt Level for this category of boards.

Board Of Accountancy

Quantitative Data (additional comprehensive data is attached)

	1989-90	1998-99	% Change	2000-01
Authorized Positions	47.4	81	+70.9	84.3
Budget	\$6,157,000	\$9,663,000	+56.9	\$9.8M

Note: 30,695 Licenses or Registrations were renewed and 16,721 licensure examinations were scheduled in 1998-99.

Qualitative Factors

Public Interest - Medium

In 1999, the Board's Website experienced a tremendous amount of public inquiries and almost a 200% growth from the previous year – 233,866 "hits" in 1999, compared with 78,515 "hits" in 1998. Board staff responded to almost 6,000 email inquiries in 1999. In the summer of 2000, the Board will unveil its online "License Lookup" feature on its Website.

Legislative Interest – High

The Board sponsors at least one piece of legislation annually, and it is currently rewriting its enabling legislation, the Accountancy Act. In addition, the Board participates in the promulgation of new regulations or amending existing regulations at least three times each year. In addition, the Board is undergoing its second sunset review, with a report due to the Joint Legislative Sunset Review Committee later this year.

Program Sensitivity – High

The Board is often involved in high profile, complex disciplinary matters involving large accounting firms. This activity requires management of significant resources by the Executive Officer related to the litigation of these matters.

Complexity and Visibility

California is the only accountancy board in the nation to offer an online application for the Uniform CPA Examination. For the Board's latest semi-annual examination, approximately 6,000 of the 8,000 total candidates applied online via the Board's Website.

As regulator of the second largest number of accounting professionals in the nation, California plays a national leadership role in initiatives involving the profession, such as heading the newly-formed Regulatory Coalition of Boards of Accountancy. The chart of the Coalition is to effect positive and timely change in the management of all examination-related issues, ensure active participation of accountancy regulators in the change management process and achieve uniformity in exam practices in the 54 jurisdictions. The Executive Officer frequently serves in national leadership positions, such as serving on the Computerization Implementation Committee (leading the automation of the Uniform CPA Examination) and she is called upon to speak at state and national meetings as well as serve on state and national panels regarding regulation of the profession.

In addition, California is actively participating in the effort to develop national uniformity in licensing. The Executive Officer regularly interacts with the American Institute of Certified Public Accountants, the National Association of State Boards of Accountancy as well as with various industry and trade associations in the state regarding the examination, licensing and regulation of the profession.

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California Dental Board

Quantitative Data (additional comprehensive data is attached)

	1989-90	1998-99	% Change	2000-01
Authorized Positions	39.4	48.8	+23.9	54.4
Budget	\$3,221,000	\$6,435,052	+99.8	\$6.5M

Note: 13,893 Licenses or Registrations were renewed and 1,374 licensure examinations were scheduled in 1998-99.

Qualitative Factors

Public Interest – High

A number of recent deaths in dental offices due to the use of oral sedation, unlicensed practice and scope of practice involving Oral Maxiofacial Surgeons performing cosmetic surgery have resulted in a great deal of public interest, including major television network news stories.

Legislative Interest – High

The unfortunate incidents cited above have created renewed legislative interest in issues involving the Dental Board and the practice of dentistry in California.

Health and Safety Issues

Scope of practice, Oral Maxiofacial surgeons, control of infections, office dentistry methods (mercury vs. non-mercury), fluoridation and unlicensed activities are the major issues facing the Dental Board.

Board of Professional Engineers and Land Surveyors

Quantitative Data (additional comprehensive data is attached)

	1989-90	1998-99	% Change	2000-01
Authorized Positions	47	59	+25.5	59.5
Budget	\$3,809,000	\$6,954,976	+82.6	\$7.0M

Note: 18,716 Licenses or Registrations were renewed and 11,051 licensure examinations were scheduled in 1998-99.

Qualitative Factors

Complexity and Visibility

Public awareness and legislative interest typically peak immediately after a natural disaster. For instance, after the Loma Prieta earthquake, there were several instances of collapsed structures ranging from large parking garages and freeway overcrossings, to small apartment complexes and family homes.

Unlike other regulated professions, a negligent or incompetent engineer has the capability of causing severe injury or death to thousands of individuals. For instance, the failure of a dam could cause harm to all those that are in the way when it fails. Or, if a building collapses numerous individuals may face severe injury or death. In contrast to this profession is a healing arts professional. Should he or she be found negligent or incompetent, typically the harm is only to one individual.

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Furthermore, the engineering profession differentiates itself due to the separate branches of registration and the overall scheme of registration. The Executive Officer and Board staff must be versed in the complexities of the law in order to effectively carry out the Board's mandate of protecting the public health and safety. For instance, a safety engineer is not authorized to design structures. Nor are several other disciplines. Only a civil engineer, or civil engineer with a structural authority, may design structures. Such differences must be delineated upon application, during examination development and during the investigation of an enforcement case.

In addition, the enforcement workload is impacted by the complexity of the cases. Although the number of enforcement cases may be low in comparison to other programs, the complexity creates a different workload. For instance, a case of a roof collapsing may seem to lead one to the conclusion that the engineer was negligent or incompetent. From this, however, many situations may arise. There could have been faulty workmanship by the contractor. Or, there could be shared blame between a contractor and the engineer. The nature of the building industry requires the coordination of several disciplines. Therefore, in reviewing a case of such type it is important that staff procure an expert with relevant expertise in the area of the violation, be well versed in the PE or PLS Act in order to provide guidance to the expert, be able to separate out violation of the PE or PLS Act from other areas of law, have general knowledge of closely related disciplines such as architects and contractors, and lastly have good project manager skills.

Therefore, throughout all of these phases the Executive Officer must have a thorough grasp of all programs and laws to assure that staff carries out their roles in a prudent manner.

Board of Pharmacy

Quantitative Data (additional comprehensive data is attached)

	1989-90	1998-99	% Change	2000-01
Authorized Positions	33	52	+57.6	52.9
Budget	\$3,051,000	\$5,965,000	+95.5	\$6.4M

Note: 23,665 Licenses or Registrations were renewed and 1,518 licensure examinations were scheduled in 1998-99.

Qualitative Factors

Public Interest – High

There is a vast range of highly potent drugs available to prescribers to treat diseases in patients. To perform their intended functions these drugs must be properly prescribed, dispensed, handled, stored and used. Drugs that may save lives, alleviate pain and cure illnesses, may also produce harmful effects, or possibly kill, if not dispensed and used correctly. Prescription drugs are a constant factor in emergency room admissions as well as prime factors in drug addictions and deaths.

All prescription drugs and prescription devices provided to Californians and California's licensed health care practitioners are dispensed, furnished and transported by Board of Pharmacy-licensed entities and individuals. For example, to ensure that drugs are properly dispensed and used correctly, pharmaceutical therapy must be provided and assessed by highly educated and trained pharmacists who meet the professional standards set by the Board.

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Legislative Interest - High

Regulation

The Board of Pharmacy has one of the most active regulatory programs in the Department of Consumer Affairs. Since 1990, the Board has promulgated over 61 regulations. This is over 6 regulations per year. In addition in 1995, pursuant to Executive Order W-127-95, the Board reviewed over 92 regulations against 11 criteria. The purpose of the review was to demonstrate the necessity of existing regulations.

Legislation

The Board has a legislative program that is complex and diverse in its policy implications which requires the Board to be very proactive to ensure its presence at the Legislature. Each year since 1989, the Board has sponsored at least one major bill that impacts the practice of pharmacy in California. For example:

- In 1991, the Board sponsored legislation that authorized the use of pharmacy technicians. This was a major change to the practice of pharmacy that was vigorously opposed by labor. As sponsor of the legislation, the Board led a large coalition of professional associations and interested parties to negotiate its successful passage. The law allowed registered pharmacy technicians to count and pour medications, functions that were traditionally required of pharmacists.
- In 1992, the Board put in place a regulation that required pharmacists to consult with patients on all new medications.
- These new requirements revolutionized pharmacy by changing how pharmacy was practiced -- by placing the pharmacist at the front of the pharmacy "talking" to the patient, and the pharmacy technician behind the counter performing the more technical functions that did not require the expertise of the pharmacist.

Other examples of major legislative actions initiated by the Board:

- In 1993, California was one of the first states that authorized the electronic transmission of prescriptions. This was the result of legislation sponsored by the Board.
- In 1996, the Board sponsored legislation that recodified the entire pharmacy act.
- In 1997, the Board followed with another Board-sponsored bill that made over 200 substantive changes to pharmacy law. The Board is not aware of any other departmental agency pursuing such an ambitious legislative proposal with such success.
- In 1998, the Board sponsored legislation to make technical and clean-up changes to the pharmacy law as a result of the previous year's legislation.
- In 1999, over 20 major pharmacy law changes took place and again the Board sponsored legislation that enacted ten of those changes. The Board was also highly involved in the other 10 bills that changed pharmacy law, and actively pursued and achieved amendments to address Board concerns and public protection mandates.

Also in 1999, the Board actively opposed legislation that would have significantly changed the authority of physicians to dispense medications and effectively operate pharmacies. Because of the questionable tactics of the bill's sponsor, there was no public policy hearing on this major change. For months, the Board was the only agency to vigorously oppose this bill. The Board's amendments were finally taken at the end of the session, but the Board-led opposition led to the veto of the bill for other provisions that still remained.

Pharmacists are the gatekeepers when it comes to prescription medications and perform an essential double check when dispensing medications, so pharmacy law overlaps with the laws other health care providers such as physicians, osteopaths, physician assistants, nurses, nurse practitioners, veterinarians, dentists and optometrists. Consequently the Board must monitor pending legislation involving these practitioners as their scope of practice changes and gives

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them authorization to "furnish" medication similar to a physician's "prescribing" medication. The Board must also monitor the Health and Safety Code because these statutes govern controlled substances and federal statute as well, areas of law enforced by the Board.

The Board monitors and takes positions on numerous bills annually. The Board is involved in many complex and sensitive negotiations with major political entities such as: the California Medical Association, California Retailers Association, Kaiser Permanente, California Association of Health Plans, California Nurses Association, California Pharmacists Association, California Association of Health System Pharmacists, United Food and Commercial Workers, California Narcotics Officers Association and the California District Attorney's Office.

This year the Board is sponsoring three major pieces of legislation. The first one would require pharmacies to implement quality assurance programs to prevent prescription errors (SB 1339, Figueroa). This is a major consumer protection bill. It is especially important in light of the recent studies documenting the high incident of medical errors. The Board anticipates opposition from the Trial Lawyers Association, a major player in the Legislature.

The Board is also sponsoring legislation to make permanent CURES (the electronic tracking program for Schedule II prescription drugs) and eliminate the triplicate prescription document (AB 2018, Thomson). The elimination of the triplicate prescription document is major program change in that this document has been in use for over 50 years. The Board has formed a coalition of support that includes professional associations and major pain advocacy organizations who believe that the triplicate prescription document prevents patients from getting adequate pain control. The Attorney General's Office does not support the elimination of the triplicate nor do other law enforcement agencies, so the Board will have substantial opposition to overcome to secure enactment of the legislation.

Prior to the introduction of the bill, the Board hosted a conference to develop policy as it relates to the monitoring of Schedule II drugs in California. Nationally recognized experts in pain management made presentations at the conference and were actively involved in the policy discussions as were representatives from the Drug Enforcement Administration and the AG's Office.

The Board is also the origin of provisions in SB 1554 (Senate Business and Professions Committee) that will make three technical changes in pharmacy law and will contain a substantive change to permit ambulances to obtain prescription medication from pharmacies.

In addition to these three significant pieces of legislation, the Board is actively involved in monitoring and advocating the Board's position on another 18 bills that affect the practice of pharmacy, and is offering amendments to nearly 10 bills. In addition, there are another 200 bills that have been introduced impacting managed care or the general operations of the Board as an entity of the executive branch.

Program Sensitivity

Internet Pharmacy

Over the last year the growth of Internet pharmacies has skyrocketed. These are pharmacies from which consumers can order their prescription drugs electronically. While pharmacy law requires that a patient have a written prescription, there are some unscrupulous sites that provide prescription drugs to consumers upon completion of a health questionnaire and review of the questionnaire by a physician. Or the pharmacy internet site is in a foreign country and the drugs are being provided without a prescription. This issue has been the subject of federal and

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state oversight hearings. Internet pharmacies that dispensed prescription medications to California patients must be licensed in California as nonresident pharmacies.

Current pharmacy law does provide adequate protection and authority to pursue action against unlicensed or illegal pharmacy practice over the internet, especially since the provider may not be in California. However, to assure adequate public protection, the Board will be seeking additional resources to proactively investigate these sites and work cooperatively with other state boards of pharmacy and the Federal Food and Drug Administration to ensure that medications are being properly dispensed.

Patient Confidentiality

Because of rapid technological advancement in pharmacy practice today, the Board is constantly reviewing its law to ensure that a patient's confidentiality is adequately protected. Examples of confidentiality issues that the Board is involved in include the electronic transmission of a prescription from a prescriber's office to a pharmacy, where the prescription information may reside at a website outside the control of the prescriber or pharmacist; the use of patient compliance programs to remind patients to take their medications or in unethical situations, the drug manufacturer obtains patient information to encourage the patient to switch medications to the manufacture's brand; and the negligent acts of pharmacists who do not confidentially destroy prescription records to ensure adequate public protection.

These issues are the subjects of highly visible media reports and legislation has been introduced to deal with many of these topics. The Board's leadership, visibility and activities in these areas will have a major influence on consumer protection in the future.

Automation

There are many robotic dispensing machines available to pharmacies that are more efficient to use than their human counterparts, and these machines can economically dispense thousands of prescriptions safely. However, pharmacy law is very specific and restricts to a pharmacist the ability to perform most duties. Moreover, if a process is not authorized in law as being permitted, it is not authorized. As a result the Board constantly reviews various permutations of automated dispensing devices to determine if the law supports their use. The Board's position is to make its authority broad enough so that pharmacy law is able to accommodate and not hinder these technological advancements. Pharmacy is a highly automated profession and the Board is strategically positioning itself so that it can be proactive to change instead of reactive which is detrimental to the patient.

Prescription Errors

In November 1999, the Institute of Medicine issued a report about patient safety and medical errors in our nation's health care system. According to the study, as many as 98,000 Americans lose their lives each year as a result of preventable medical errors. Up to 7,000 die because of errors in prescribing medications. And the cost of all these errors is as much as \$29 billion in medical bills. In addition to this study, there have been many articles in the press on the numbers of prescription errors and the significant patient harm these errors can cause. Prescription error complaints are the number one consumer complaint that the Board receives, approximately 300 per year.

Prescription errors are serious and this issue has caught everyone's attention. Several different resolutions have been proposed at state and national levels, including a national reporting system. The Board of Pharmacy is sponsoring legislation that would require all pharmacies to implement a quality assurance program that would document and prevent future prescription errors. If such legislation is enacted, California will be one of the first states to require such a program.

Manpower Issues

There is tremendous concern among large employers of pharmacists (chain store pharmacies) that by 2004, there will not be enough pharmacists to fill the 5 billion prescriptions projected. These estimates represent a doubling of prescription volume over the next four years, so without an increase in the number of pharmacists (which cannot occur because there are not sufficient pharmacists or enough students in pharmacy schools), patients will have much longer delays in getting their prescription medication unless various solutions are implemented including:

- increasing the number of ancillary support allowed in a pharmacy,
- expanding the use of the ancillary support,
- making technology more available,
- placing automated dispensing devices in remote pharmacy locations without a pharmacist,
- requiring an universal insurance card and
- allowing reciprocity.

Each of these options is highly controversial among various sectors of health care and the pharmacy profession, and the Board needs to act with leadership to find a resolution.

Drugs from Mexico

Many consumers cross the border daily to obtain drugs from Mexico at substantial savings. However, many consumers are unaware that unlike the United States, Mexico has no requirement that a qualified health professional (such as a pharmacist) dispenses these drugs. Mexico treats prescription drugs like any other commodity. There is also no guarantee that the prescription drug dispensed meets the stringent manufacturing standards of the United States. And because the prescription label frequently is in Spanish, the patient does not know if he or she is actually receiving the intended drug or understands how to take the medication properly.

Also, other consumers travel to Mexico to obtain prescription medications after seeing a Mexican health professional to obtain a written prescription first. This is usually done for those seeking controlled substances.

Another concern is that Mexican drugs are smuggled into California and sold at swap meets and unlicensed entities contrary to good patient care, and in violation of pharmacy law and customs law.

The Board is participating on the Bi-national Task Force with the Mexican Government to address many of these health and safety concerns. To demonstrate the economic impact of prescription drug trade in Mexico, there are over 1,000 pharmacies in Tijuana compared to 300 pharmacies in San Diego.

Complexity and Sensitivity

Integration and Activation of the Board's Strategic Plan

Over the last two years, the Board has reorganized its operations and activities into one of five goal areas. Established as committees, each of these goal areas is overseen by a team of two board members who work with the Executive Officer and designated staff to pursue strategic and ongoing activities essential to the Board's mandate. The goal areas are: Enforcement, Licensing, Public Education and Communication, Legislation and Regulation, and Organizational Development.

Through these committees, the Board establishes policy initiatives that are brought to the Board for approval and activation. The Board meets four times annually, and each committee meets

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at least once per quarter before the Board meeting to discuss the committee's activities. At each Board meeting, a status update of the committee's activities is provided. At least once a year, each committee holds a public meeting.

Another essential component to the Board's strategic plan is the annual update and full staff integration into the strategic planning process. By such activities, the Board's plan is kept current and vital to both board members and staff, who share responsibility for achieving the purpose, vision and goal objectives.

Evolving Practice of Pharmacy and Pharmacists' Payment for Cognitive Services

Historically the reimbursement to pharmacists for their services is only done on the product dispensed, so pharmacists essentially earn sales commission on prescription medications they dispense instead of being paid on the their professional knowledge and services provided in managing and advising patients on drug therapy.

The profession has been undergoing substantial change, crisis and consolidation since the early 1990s. Managed care has depressed reimbursement rates for prescription drug prices to such low levels that pharmacies are having a difficult time meeting expenses. Unhappy pharmacists continue to pressure and blame the Board for failing to step in and resolve these economic issues. The Board is expected to address Labor Code issues, reimbursement issues, workload and staffing within pharmacies, and independent pharmacies versus large retail corporations who are saturating the market with the pharmacies located in communities. The result is considerable conflict for any action or inaction the Board takes in these areas.

Board of Vocational Nurse and Psychiatric Technicians

Quantitative Data (additional comprehensive data is attached)

	1989-90	1998-99	% Change	2000-01
Authorized Positions	30.5	35.8	+17.4	40
Budget	\$ 3,474,000	\$5,150,000	+48.2	\$5.6M

Note: 35,807 Licenses or Registrations were renewed and 6,141 licensure examinations were scheduled in 1998-99.

Qualitative Factors

Enforcement Enhancements

Cost Recovery

Pursuant to the Business and Professions Code, Section 125.3, the Board is authorized to request the administrative law judge to direct the licensee found to have committed a violation or violations of the licensing act to pay a sum not to exceed the reasonable costs of the investigation and enforcement of the case. In 1994, the Board implemented a program to order payment of enforcement costs by licensees who were disciplined. The Board aggressively pursues cost recovery for all of its enforcement cases. An internal Cost Recovery Tracking Program was established to monitor receipt of all applicable monies.

Probation Monitoring Program

In 1995, the Board implemented a drug/alcohol-screening program. This program ensures that all licensees who are on Board imposed probation due to drug or alcohol related offenses abstain from the use of those substances.

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Remediation Program

In 1995, the Board established new requirements for "remedial coursework" for cases in which the licensee's actions do not warrant formal disciplinary action.

Enforcement Fingerprint Program

In 1996, legislation was enacted to implement a fingerprint program. All applicants for licensure are required to submit fingerprint cards which are checked by the Department of Justice and the Federal Bureau of Investigation to ascertain if the individual has any criminal convictions. If a reported conviction is substantially related to the practice of Licensed Vocational Nurses or Psychiatric Technicians, licensure may be denied.

Record of conviction Information Collected on Renewal Forms

In 1996, the Board established new requirements that licensees must "self-disclose" conviction information every two years, prior to license renewal.

Performance Standards Defined

In 1996, the Board established new regulations which specify that Licensed Vocational Nurses and Psychiatric Technicians must safeguard their patients'/clients' health and safety by reporting to the Board instances of unprofessional conduct.

Citation and Fine Program

In 1996, the Board established new regulations which specified the criteria for issuance of a citation and/or fine.

Collection Requirements

In 1996, the Board established an agreement with the Franchise Tax Board Intercept Program to intercept tax refunds and lottery winnings from individuals who owe delinquent sums of money to the Board (e.g., cost recovery and fines, etc.)

Internet Web Site:

In 1997, the Board established an Internet Web Site, which provides information about the Board's activities and requirements. Consumers can obtain a listing of recent disciplinary actions, information on California accredited vocational nursing and psychiatric technician schools, information for filing complaints, and a fact sheet for applying for licensure. The Web Site is located at <http://www.bvnpt.ca.gov>.

Restricted Licensed Vocational Nursing Requirements

Established through legislation which became effective in 1988, the Board requires issuance of "restricted Vocational Nursing Licenses" to Medical Technical Assistants who are employed by the California Department of Corrections and California Department of Youth Authority.

Examination Enhancements

In 1990, the Board successfully developed and implemented computer administered testing for Psychiatric Technicians licensure. The computer based examination allows for centralized scheduling, increased testing opportunities, a more secure and controlled testing environment and immediate score reports. In 1994, the Board converted to year-round computer-adaptive testing for its Vocational Nurse applicants. Prior to that date, the Board's Executive Officer chaired the National Council State Boards of Nursing' Committee to effectuate the successful development and implementation of computerized testing for Registered Nurses and Licensed Vocational Nurses nationwide.

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Continuing Education

In 1992 the Board implemented continuing education requirements as a conditions of license renewal for Psychiatric Technicians.

Board of Registered Nursing

Quantitative Data (additional comprehensive data is attached)

	1989-90	1998-99	% Change	2000-01
Authorized Positions	69.2	96.7	+39.7	96.7
Budget	\$8,451,000	\$13,051,00	+54.4	\$13.7M

Note: 123,621 Licenses or Registrations were renewed and 13,528 licensure examinations were scheduled in 1998-99.

Qualitative Factors

Public Interest

Following are examples that demonstrate the high public interest in the Board of Registered Nursing:

- BRN issues draw such intense public interest that audiences consistently range from 200 – 1,000 people for board meetings and forums. Such levels of public interest and participation are rare within the department.
- Media interest is high regarding egregious enforcement cases, particularly those involving patient deaths or patient abuse.
- Media interest is also high regarding the nursing shortage, changes in nursing practice, the impact of unlicensed assistive personnel, legislative initiatives regarding nursing, and other nursing issues.
- Millions of California consumers receive care from RNs each year in California. These consumers rely on the BRN to ensure that their RNs are safe and competent to practice. No other government or private organization fulfills this mission.
- Over 17,000 people per month contact the BRN via telephone and 7,000 people per month contact the web site to inquire about nursing practice issues, verification of RN licensure, or other issues of public interest.
- The ongoing nursing shortage generates significant public interest in the BRN's efforts to assess and resolve this problem. California has the lowest ratio of RNs to population of any state, which has serious implications for the quality of nursing care to consumers. The number of RNs in the state has increased greatly in the past 10 years, but the increase in the number of RNs has not kept pace with the growth in California's population.

Legislative Interest

The Legislature relies on the Board of Registered Nursing as an objective, credible source on nursing issues that affect consumers in California. The BRN Executive Officer is contacted frequently by legislative consultants for input on issues, and Senators and Assembly Members solicit her testimony for hearings at the Legislature. Examples of the Board's involvement with Legislative issues include:

- In 1999 the Senate Business and Professions Committee requested the Executive Officer to testify at hearings on the nursing shortage. The BRN is recognized as the only source in the state for data on nursing demographics and trends for workforce planning. These hearings resulted in significant legislative proposals and initiatives.

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- A special Senate subcommittee sought the Executive Officer's testimony twice in 1993 on topics related to government effectiveness. The BRN was one of only three boards selected to testify based on recognized effectiveness of its programs.
- Each year the BRN has legislative input on over 30 bills, including testimony and/or meetings with consultants and legislators. The Executive Officer and staff must confer with nursing and consumer groups to determine the various perspectives on proposed legislation, including controversial issues. After much research, the BRN takes positions on bills based on its mission to promote quality nursing care for consumers. The Legislature consistently seeks the BRN's position and views on pending bills.
- Legislative proposals that the BRN is called upon for input are frequently controversial and far-reaching. A few examples include: nursing staffing ratios; "prescriptive" authority for nurse practitioners to order controlled substances and obtain DEA numbers; restriction or expansion of the role of unlicensed personnel assisting with nursing care; solutions for the nursing shortage; "whistle-blower" protection for RNs; regulation of telephone medical advice by out-of-state RNs; and performance of complex laboratory examinations by RNs.
- The BRN is often called upon to act in a leadership role to implement newly enacted legislation. For example, the BRN facilitated formation of the "Scott Commission" to implement AB 655 and chaired the mandated committee. The committee will meet its mandate to report in April to the Legislature and the Governor on its proposals to increase the number of nursing school graduates and to provide more specialty training in critical areas where there are nursing shortages.

Program Sensitivity

The Executive Officer of the Board of Registered Nursing must respond to controversial and sensitive issues that receive much public attention. This sensitivity results from many factors: the life-and-death nature of nursing practice, the overlapping practice issues among health care providers, the conflicting agendas of some of the BRN's stakeholders, and the philosophical differences among groups. Specific examples of questions and issues facing the Executive Officer include:

- Can or should RNs administer lethal injections in death penalty cases?
- Should advanced practice RNs have prescribing authority and be registered with the DEA?
- To what degree can RNs overlap into medical practice under the legal framework for standardized procedures?
- In what ways, if any, does the practice of a certified nurse anesthetist differ from an anesthesiologist? (Or a certified nurse midwife versus an obstetrician?)
- Can unlicensed assistive personnel safely perform some nursing functions in certain settings such as community care homes or schools?
- Can or should RNs administer injections for therapeutic abortions?
- Are standards for internationally educated RN applicants too stringent or too low when compared to U.S. education standards? Do the standards balance the need for consumer protection as well as fairness for applicants?

Health and Safety Issues

Complexity of nursing practice

Registered nurses make decisions in their practice every day that can mean life or death for their patients. The practice of registered nursing has grown more complex and advanced in recent years. RNs deliver babies, administer anesthesia, provide primary care, use advanced technology such as lasers, and independently assess and intervene with patients in intensive care and emergency settings. The science and technology of

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nursing has advanced, as reflected in the more complex equipment and computers that patients and visitors observe at hospitals.

Reflecting the advanced complexity of nursing practice, the BRN now regulates eight specialized certification categories for RNs. Many advanced RNs practice very independently in areas where the consequences of errors can be very grave. Therefore, the BRN must be vigilant to set safe standards for entry into practice and must remove unsafe practitioners through an effective enforcement program.

This increased complexity and seriousness of outcomes has resulted in more difficult and complex enforcement cases. The BRN has responded by more than doubling its enforcement budget and staffing over the past 10 years.

Serious enforcement cases

The health and safety impact of the Board of Registered Nursing is significant, with violations of RNs resulting in the death, potential death, or harm of patients. In severe cases that pose immediate public threats, the BRN intervenes immediately through an Interim Suspension Order or through a legal intervention during the criminal proceeding, if the case is in criminal court. The Board investigates approximately 1,000 serious complaints each year and takes disciplinary action in 150 or more cases. Currently, the Board has over 200 probationers that it is monitoring due to health and safety issues for the consumer.

The following examples of offenses that led to revocation help demonstrate the health and safety role of the BRN:

- Failed to initiate CPR or other lifesaving measures during patient emergency, resulting in patient death or harm.
- Convicted of abuse of elder resulting in serious pain and suffering.
- Falsified records, failed to provide nursing care, and failed to make home visits to patients.
- Administered dangerous drug to patient without a physician order when contraindicated, resulting in patient harm.
- Convicted of theft from elderly.
- Sexually abused patients and convicted of battery.
- Caused patient death by administering medication by wrong route.
- Overmedicated patients with controlled substances.
- Unable to practice safely due to severe mental illness.
- Failed to adequately evaluate and recognize a patient as high-risk, placing the patient in danger.
- Gross negligence and unlicensed practice of medicine in liposuction procedures, resulting in death and harm to patients.
- Convicted of lewd, lascivious acts with child.
- Deprived elderly patients of safety, hygiene, and disease protection as owner of residential care facility.
- Approximately 60% of BRN enforcement cases involve diversion of drugs for self-use by RNs. This results in impairment of their ability to practice safely, and in the most serious cases, the drug diversion also results in depriving a patient of needed pain relief.

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Diversion Program

One of the best tools that the Board of Registered Nursing employs to protect the health and safety of consumers is its Diversion Program. Through the Diversion Program, the Board can intervene immediately to remove a chemically dependent or mentally ill nurse from practice. (RNs can only qualify for the Diversion Program if there has been no patient harm or sale of drugs.) Upon receiving a complaint, the Board writes the RN and informs them of the availability of the Diversion Program. If they voluntarily enter the program, suspend their practice, seek treatment, and submit to monitoring, they can avoid disciplinary action against their license. Within only two weeks of a complaint, the RN can be out of practice and in treatment, providing immediate consumer protection. By comparison, if the same case goes through the enforcement process, intervention and practice limits will take an average of 18 months due to the legal requirement for formal investigation and hearings.

Currently, the Board is monitoring 400 RNs in its Diversion Program. This program directly affects public safety and health by removing potentially unsafe RNs from practice and monitoring them while they undergo rehabilitation for chemical dependency or mental illness. They do not re-enter nursing practice until deemed safe by a panel of experts. Through such immediate intervention, the Board can help prevent unsafe practice while the RN is impaired.

Fingerprint Program

Since 1991, the BRN has required fingerprints from RN applicants to identify any criminal history. In addition, the fingerprints remain on an active status with the Department of Justice so that the BRN is alerted of any subsequent arrests and convictions after licensure. Annually, this program yields approximately 400 reports of convictions that the Board investigates to determine if the RN is safe to practice in light of the underlying facts of the conviction. The public health and safety is protected through this program in light of the serious crimes that are identified, such as murder, manslaughter, assault, child abuse, sexual offenses, grand theft, fraud, and other crimes that are substantially related to nursing.

Board Complexity and Visibility

The complexity and visibility of the Board of Registered Nursing have been addressed in part by the preceding sections of this report and in the report of August 1999. The complex nature of registered nursing practice and its impact on all the consumers of California make the issues facing the Board difficult and subject to broad scrutiny by many groups.

Educational oversight

One of the Board's most far-reaching impacts is with the 126 educational programs that it regulates. Registered nursing programs are subject to the oversight and approval of the Board of Registered Nursing, and advanced practice programs seek the Board's approval to ensure that they meet BRN standards.

The Board has the authority to take enforcement action to warn schools about deficiencies and order action to come into compliance. If the school fails to come into compliance, the Board has the authority, with warning, to close the program. This authority extends to the CSU, UC, community college, and private college systems. Therefore, the deans and directors of nursing school programs work very closely with the Board to ensure compliance.

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Because of the Board's strong role in evaluating nursing programs, many entities rely on the Board's expertise. For example, national accrediting bodies seek the Board's counsel on accrediting standards at a federal level.

Other visibility considerations

The Executive Officer must represent the Board to the public, including Executive and legislative leaders and 50-60 advocacy groups representing the nursing profession, consumers, and employers of RNs. This liaison role is especially significant in light of the fact that there are over a quarter of a million licensees and millions of patients in California. The Board takes seriously its responsibility to be responsive to its numerous stakeholders.

As described previously, 200-1,000 members of the public attend and monitor board actions and decisions. In addition, board issues and cases generate much media interest.

No other public or private entity duplicates the roles of the Board of Registered Nursing. The Board serves a unique, far-reaching role in consumer protection that is widely recognized by the diverse, numerous groups that it serves.

MEDIUM BOARDS (CURRENT LEVEL M) – BEHAVIORAL SCIENCE, PSYCHOLOGY, STRUCTURAL PEST, ATHLETIC COMMISSION

In 1985, Structural Pest and the Athletic Commission were allocated to level M and categorized as “medium” boards with complex, sensitive programs and small to moderate professional staff. Behavioral Science was assigned level O and Psychology level P2. Currently, all of these boards, with the exception of the Athletic Commission meet or exceed the 1985 criteria for “large” boards in staffing and budget levels. The complexity of the licensing and examination programs for the Structural Pest Control Board and program sensitivity and the professional level of licensees of the Board of Psychology and the Board of Behavioral Science warrant increased levels for the Executive Officers of these boards.

Board of Behavioral Science

Quantitative Data (additional comprehensive data is attached)

	1989-90	1998-99	% Change	2000-01
Authorized Positions	23	35.9	+56	35.9
Budget	\$2,198,000	\$4,664,000	+112.2	\$4.5M

Note: 2,921 Licenses or Registrations were renewed and 5,750 licensure examinations were scheduled in 1998-99.

Qualitative Factors

Public Interest – High

Internet Website

In June 1996, the Board established an Internet website that provides information about all program areas the Board oversees. Consumer information for filing complaints, public disclosure, and a listing of recent disciplinary actions is available along with licensee forms and information. The website receives approximately 4,000 hits monthly.

MFCC Group Advertising and Referral Services

Effective May 19, 1997, the MFCC Group Advertising and Referral Services Program was established and was then legal to operate, provided they first register with the Board. The Board implemented specific registration, advertising and referral requirements for these services with a free, one-time registration. Referral service registration remains valid until revoked, or until the referral service requests that it be discontinued.

Outreach Efforts

Since 1994, the Board has taken several steps in pursuing outreach efforts to consumers, licensees, professional associations and educational institutions. These efforts include the following:

- Establishment of “Answers to Frequently Asked Questions” brochure
- Board’s semi-annual Newsletter
- Establishment of a consumer guide, “What the Board of Behavioral Sciences Can Do For You”
- Establishment of “How to File a Complaint with the Board of Behavioral Sciences” brochure
- Update of the “Professional Therapy Never Includes Sex” brochure
- Establishment of “Board of Behavioral Sciences Expert Guidelines”

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Complexity and Visibility

Citation and Fine:

In 1996, the Board was given the authority to cite and fine licensees for offenses that do not rise to the level of requiring formal discipline. This program allows the Board to cite and fine unlicensed individuals for violating the Business and Professions Code. The Board developed regulations and obtained a BCP to implement this program in 1998. As part of this program the Executive Officer is personally responsible for the informal hearing process. This hearing is the opportunity for the subject of the citation to dispute the circumstances and the amount of the fine. This hearing process is an additional task performed by the Executive Officer with a high level of responsibility.

The citation and fine program greatly enhances the Board's enforcement program and in addition serves to assist in the detection and curtailment of unlicensed practice, which currently can only be prosecuted by a District Attorney.

Cost Recovery

In 1996, the Board implemented a cost recovery program to recover the cost of investigation and attorney fees to offset the Board's enforcement costs. This program has resulted in the actual award and recovery of \$36,520 in FY 1997/98 and \$26,596 in FY 1998/99 to date.

Continuing Education

Established through regulations, effective May 19, 1997, the continuing education program is another method for maintaining quality consumer services. After January 1, 1999, MFCC and LCSW license renewal was contingent upon the completion of 36 hours of continuing education. Licensees have the flexibility to take courses they think are pertinent to their practice, providing the courses are related to their scope of practice. Many county departments and health facilities are approved providers of continuing education, and offer free training to their employees. The Board's approval of providers is a two-year blanket approval covering any qualified course offered. This reduces obstacles to course planning, making the continuing education program user-friendly for providers.

Examination Enhancements

Examination is a primary means of ensuring public safety. The Board continually evaluates and strengthens the criteria for selecting subject matter experts to ensure the quality of examination development workshops. In April 1995, Lead Oral Examiners were hired to monitor and enhance the performance of oral examiners. Project planning, implemented in October 1995, for examination development and administration is intended to ensure accomplishment of the Board's goals and deadlines. In September 1995, the cost of the oral examination administration was reduced and in January 1996, the Board augmented oral examiner training sessions by preparing training programs and content outlines for participants.

Enforcement Enhancements

A staffing reorganization in 1995 has resulted in numerous improvements in the Board's Enforcement Program. There has been a decrease in the backlog of enforcement complaints and cases, and an improvement in the case processing time. In addition, there is a new probation monitor position to facilitate and enhance oversight of licensees and registrants who have been placed on probation. In February 1997, the Board added regulations for citations and fines, a much-needed alternative to the discipline options.

Recognition

In 1997, the Board received the American Association of State Social Work Boards award for *Superior Consumer Publications in the Interest of Protection of the Public*.

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Board of Psychology

Quantitative Data (additional comprehensive data is attached)

	1989-90	1998-99	% Change	2000-01
Authorized Positions	8.5	12.3	+44.7	13
Budget	\$1,300,000	\$2,900,000	+119.2	\$3.1M

Note: 7,117 Licenses or Registrations were renewed and 1,741 licensure examinations were scheduled in 1998-99.

Qualitative Factors

Public Interest – High

The Board of Psychology has historically attracted an extremely high level of public interest. Primarily, this can be attributed to the intimate nature of the consumer issues that come before the Board. Over the past decade Board disciplinary cases have involved discipline against psychologists involved in the cases of the Menendez brothers and O. J. Simpson. The Board has handled numerous cases against celebrities which pique the interest of the public, such as the complaint filed by Monica Lewinski against her psychologist and the highly publicized revocation of Brian Wilson's (Beach Boys) psychologist after requests for the assistance of the Board by his family and members of the band. The Board is often confronted with high profile non-celebrity cases such as the revocation of psychologist Richard Boylan. This case received national attention as it involved a psychologist renown for treating individuals who had been "abducted by aliens". This particular psychologist included "nude hot tubbing" as part of his treatment for women who claim to have been abducted by extra-terrestirals. This case raised the attention of the Board to issues of the safety of the personal safety of its staff and members which resulted in the installation of a full bullet-resistant glass entrance. Board staff has consulted with the motion picture industry during the making of the movies *Mumford* and *The Final Analysis*.

The California Board of Psychology has been the leader across North America in promoting a zero tolerance policy for sexual misconduct with patients. The Board was the first jurisdiction to pass legislation which mandates revocation of a license of a psychologist found guilty of sexual misconduct with a patient. Most other jurisdictions have since passed similar legislation. Additionally, the Board successfully pursued legislation which prohibits registered sex offenders from being able to enter the field of psychology.

Legislative Interest – High

Several issues related t the Board are currently at the height of the Legislature's interest. Currently, in response to SB 433 (Johnson), the Board is working with the California Judicial Counsel in its efforts to develop mandated guidelines for establishing qualifications of individuals who perform child custody evaluations for the Family Courts throughout California. This work will most assuredly result in clean-up legislation in the coming years. Child custody issues in general will continue to be a legislative topic in the focus of public attention for years to come simply because of the potential effects this issue has on the family structure.

Managed care is a major legislative issue about which the Board must be in the forefront. The Board's concerns are focused on unqualified, unlicensed individuals within HMOs making decisions about consumers' mental health needs.

Prescription privileges for psychologist is also an issue in the forefront of the legislative efforts of the profession through its professional associations. This is an issue the Board must be on top

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of and provide because of the obvious public health issues. In response to this eventual possibility, the Board has once again come to the forefront and developed a "Medication Statement" and has published guidelines for those licensees whose practices may include patients who are concurrently under the care and treatment of a physician. Both of these documents are posted on the Board's website to educate the public in these areas.

Program Sensitivity – High

Child custody issues, patient confidentiality, sexual misconduct, celebrity cases – all of these topics generate an immense amount of media interest. The Board of Psychology was the first Board in the Department of Consumer Affairs to issue press releases on all final disciplinary cases. It is also the first board to post all of its disciplinary cases on its website. This public outreach has resulted in media attention including staff appearances on national news magazines such as *Prime Time Live* with Diane Sawyer as well as numerous in-person interviews with news stations across the state.

The Board must appropriately and sensitively handle issues relating to Family Court and child custody cases. One third of the Board's complaints involve issues of psychologists performing services for Family Court. Such cases are ultra-sensitive inasmuch as, regardless of the outcome, at least one of the parties will be upset (and often violently so) at the outcome of the case. Very often, the Board is used as a means to resolve the upset party's frustration with the decision of the Family Court. This is one areas in which the staff routinely works with an outside expert in the Family Court to review and appropriately act upon these hyper-sensitive and often volatile cases.

Health and Safety Issues

As described above, the most sensitive issues facing the Board are those involving psychologist-patient boundaries and sexual intimacies, child custody and Family Court matters, and matters involving patient confidentiality, such as in the Menendez brothers case. These issues exist for the Board obviously as a result of the nature of the practice of psychology. This practice involves intimate issues of the human psyche and therefore will produce extreme concerns and risks regarding the public's health and safety of which the Board must be acutely aware and prepared to appropriately handle.

Complexity and Visibility

Interest in the Board of Psychology has also been heightened by the Board's unprecedented efforts in licensing examination validation. The Board is the only psychology board in North America which has independently validated the national written licensing examination. Many other jurisdictions have benefited from the Board's efforts in this regard. Additionally, the Board's oral licensing examination has been similarly validated and has withstood all legal challenges files against it to date. The Board's oral examination is so well respected that it was recently published as the national model for oral licensing examinations in Oral Examination Guidelines published in 1999 by the Associate of State and Provincial Psychology Boards. It is not an overstatement to assert that the California Board of Psychology leads the profession in issues of psychology licensing examination defensibility and validation.

The California Board of Psychology is the largest regulator of the profession of psychology in the world. The globalization of the psychology profession has put the Board's efforts in the forefront of the 21st century regulation of the practice. The Board must be represented effectively and admirably around the world by its Executive Officer. Representatives from Germany and Australia have visited the Board's offices and continue dialogue via email to consult with the Board's Executive Officer as those countries develop a model of regulation of the profession which places the consumer in the forefront of concern. The Board's Executive Officer has been invited to attend the Second International Congress on Licensure, Certification

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and Credentialing of Psychologists in Oslo, Norway in July 2000 specifically to participate in discussions focused on enforcement policy and licensing, oral examination development, administration and validation.

Continuing Education

The largest program change has been the implementation of the Board's continuing education program. This program is the most innovative and unique of any continuing education program in the Department of Consumer Affairs. First, this program is quality centered. The Board ensures the quality and appropriateness of each continuing education course. This requires individual course review of the thousands of courses that are offered nationally each year. Continuing education programs at other boards review only providers, which is a much simpler task, but one that ignores the quality of each offering. The Board accomplishes this course review by overseeing the accrediting agency of the California Psychology Association (CPA). The Board's Executive Officer oversees the work of the CPA staff and provides consultation with the CPA Education Committee staff regarding policy and guidelines of course review. No other Executive Officer works in such a capacity to ensure quality of continuing education offerings. Additionally, the Executive Officer oversees an annual audit of the CPA, which involves board members and staff. Finally, since 1996 the continuing education program has required the Board to put into place the Continuing Education Committee.

Cost Recovery

As part of resolving enforcement issues, a cost recovery program has been implemented. During the 1996/97 fiscal year, total cost recoveries ordered to the Board were \$128,000 and \$79,000 restitution to consumers. During the 1997/98 fiscal year, total cost recoveries ordered to the Board were \$108,000.

Cite and Fine Program

In 1996, the Board was given the authority to cite and fine licensees for offenses that do not rise to the level of requiring formal license discipline. Additionally, this program allows the Board to cite and fine unlicensed individuals for violating the Business and Professions Code.

If the subject of a citation and fine wishes to dispute the citation or the amount of the fine, the subject can request a hearing before the Board Executive Officer. This is an opportunity for the subject of the citation to dispute the circumstances and the amount of the fine before the Board's Executive Officer. In fiscal year 1997/98, the Executive Officer presided over five such hearings.

Consumer Education

In 1995, to address the need to disseminate regulatory information to consumers and to applicants and licensees, the Board formed yet another committee - the Consumer Education Committee. The Executive Officer serves as chairperson of this public relations committee. This committee oversees approximately 20 public presentations each year, most of which are performed by the Executive Officer. The committee focuses on personally delivering information about the regulation of the profession. Additionally, since 1995, the committee, under the direction of the Executive Officer has developed 4 brochures to assist both consumers of psychological services as well as licensees.

Since 1995, the Board has produced 6 "BOP" updates (Board's newsletter). These publications have received international recognition.

The Board's Executive Officer, with the assistance of the DCA Internet Team, has developed a web site. This premier web site sets an example and standard of excellence for all board publications, licensing information, recent updates, etc. It is the first and only board web site to

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offer an interactive complaint form for consumers to file complaints over the Internet. Current enhancement efforts are ongoing to offer on-line verifications of licenses and on-line access to all board application forms by the third quarter of 1999.

Liaison to National Organizations

The Board's Executive Officer has been asked to serve on several national committees. He has served on the following committees in capacities that have never been served by a non-psychologist:

Association of State and Provincial Psychology

- Committee on Computerization of the Administration of the Examination for Professional Practices in Psychology (1994 to 1997)
- Board Administrator's Task Force (1994 to 1997)
- Committee on Education and Training for Credentialing (1996 to present)

American Psychological Association

- Sponsor approval Review System (1996 to present)

The Committee on Education and Training for Credentialing is especially noteworthy as this committee is developing a national oral examination for the licensure of psychologists using California's oral examination as a model.

Structural Pest Control Board

Quantitative Data (additional comprehensive data is attached)

	1989-90	1998-99	% Change	2000-01
Authorized Positions	26.7	29.6	+10.9	31.5
Budget	\$2,265,000	\$3,285,205	+45	\$3.5M

Note: 2,536 Licenses or Registrations were renewed and 10,410 licensure examinations were scheduled in 1998-99.

Qualitative Factors

Health and Safety Issues

The pest control industry reaches into nearly facet of everyday life. Childcare centers, schools, hospitals, convalescent and nursing homes, residential care facilities avail themselves of pest control. Every restaurant, food supplier, service station, state building, sports facility, ships, planes and trains, etc., have need of the pest control industry on a regular or frequent basis.

Since 1976 according to records, 40 deaths have resulted from pesticide fumigations. In 1969, a natural gas blast resulting from an improperly conducted fumigation leveled a 32 square block area of San Jose. In 1996, a similar blast leveled one building and damaged several other buildings in Santa Clara. Inadequate regulation of the pest control industry can be catastrophic and potentially deadly. When a termite inspector fails to identify termite infestation, fungus decay or damage to a structure, a house can collapse, a deck fail, or a balcony fall.

The average consumers are not entomologists, they don't know how to understand label requirements or handle pesticides and they often don't know what can happen to a home when termites, fungus and wood boring beetles go unabated.

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Complexity and Visibility

The Board is unique in that it has 10 licensing categories and conducts 10 different exams every month. The Board responds to approximately 19,000 inquiries per year. Nearly 1300 complaints per year are mediated or investigated for compliance with the Structural Pest Control Act.

Nearly every real-estate transaction in the State of California will involve a "termite inspection" done on the property. The result is that over 8000 addresses per day (where "inspections" have been done) are filed by the pest control companies and processed by the Board. This information is made available to the public upon request.

The Board also negotiates and signs an inter-agency agreement each year with the Department of Pesticide Regulation. This agreement allows the county agricultural commissioners to act as agents of the Board with regard to pesticide applications misuse and violations.

ATHLETIC COMMISSION

Quantitative Data (additional comprehensive data is attached)

	1989-90	1998-1999	% Change	2000-01
Authorized Positions	13.9	15.3	+10	15.3
Budget	\$ 789,000	\$ 798,932	+1	\$0.9M

Note: 1,227 Licenses or Registrations were renewed in 1998-99.

Qualitative Issues

Public Interest – High

Boxing as a sport has been practiced for centuries. The public is intrigued with the concept of two unarmed combatants entering a ring with only one emerging as the victor. This is not a team sport, it is a brutal one-on-one sport where one competitor tries to render the other competitor unconscious and this is one facet of the sport that attracts public interest. The public pays millions of dollars annually to watch pay-per-view boxing events on television and it is not uncommon for boxers to be paid millions of dollars based upon pay-per-view sales. Approximately 100,000 people attend live boxing events annually in California.

Legislative Interest - High

Both the California Legislature and the Federal Government have a high interest in boxing. Both entities realize that boxing is one profession that attracts participants from various socio-economic levels of society and persons from "third world" countries. Boxing is one of the few means that these individuals have to advance their standard of living. Knowing the type of individuals that make boxing their profession, the California Legislature created the California Professional Boxers' Pension Plan in 1981 to afford boxers a guaranteed retirement income. Based upon the nature of the sport the California Legislature is concerned with the health and safety of boxers. A few examples of this issue is the required neurological testing and HIV/HBV testing as a condition of licensure and continuous training for ringside physicians and officials.

In 1996 the Federal Government enacted the Professional Boxing Safety Act. This Act outlines prescribed safety standards, regulation of boxing matches held in states without athletic (boxing) commissions and conflicts of interest for employees/members of athletic commissions.

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Program Sensitivity - High

The California State Athletic Commission has sole authority and jurisdiction over all boxing and full-contact martial arts events held in this state.

Unfortunately death can be a result of a boxing or martial arts matches. Generally there is one boxing related death per year in the United States. California's last ring death was in 1998 (professional martial arts) and before that in 1988 (professional boxing).

The sport as well as the Athletic Commission is under constant scrutiny by the media. The print media as well as television continually interviews the Executive Officer relative to the status, impact and vulnerability of the sport.

Currently there are several Federal investigations into the sport of boxing. These investigations range from racketeering to corruption within the industry. The commission has implemented major procedures to prevent these activities which are viewed as inherent to the sport. This commission takes pride in its integrity and being above board when dealing with complex issues and individuals involved in the sport of boxing.

Health and Safety Issues

The California Athletic Commission is one of the few state commissions that does not require pregnancy testing for female boxers. To date, we have been unsuccessful in our legislative attempts to implement pregnancy testing. It is not a question if a tragedy will happen but when it will happen. We view this as a major potential liability.

Another health and safety issue is the unknown and unpredictable consequences of long term blunt force head trauma.

Complexity and Visibility

The Athletic Commission has a high degree of visibility in that it regulates and supervises more events than any other state commission. California often quadruples the number of boxing events held in other states. An average year can produce 85-140 professional boxing events, 30-60 amateur/professional full-contact martial arts events and approximately 200 amateur boxing events. It should be noted that each individual bout or match requires commission approval based upon the competitor's ability, experience, etc.

- The intake of applicable revenue is affected by boxing matches being staged on Indian Reservations. The issue of sovereignty has placed the commission in an awkward position.
- The commission is one of the major focal points of the media based upon sheer volume of events alone.
- Other state and foreign commission's rely on input from this commission regarding health, safety and welfare of the participants.

The commission is required to conduct training clinics for officials and physicians to ensure that only the most highly qualified individuals are a part of protecting the health, safety, and welfare of licensees.

A new form of full-contact martial arts known as mixed martial arts or submission fighting has evolved which falls under the auspices of the commission. This sport involves the use of choke holds and joint manipulation to force an opponent to submit.

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While this commission does serve to protect the consumer, it is without a doubt the only agency that must also protect its licensees from one another.

SMALL BOARDS (CURRENT LEVEL O) – RESPIRATORY CARE, VETERINARY MEDICINE

In 1985, the Respiratory Care Board (RCB) was categorized as a “smallest” board and assigned level P2; subsequently, in 1989, the Executive Officer level was upgraded to level O, equivalent to that of Veterinary Medicine. Since that time, the staff, budget, and licensee population for RCB have grown to levels which meet or exceed the 1985 criteria for “medium” boards. In addition, the complexity has also increased greatly, with the addition of additional programs such as the assumption of the Probation Program, duties which were previously performed by the Medical Board and DCA’s Division of Investigations. As in 1985, the multiple program responsibilities, program complexity and professional level of the licensees in addition to the increased staffing and budget levels, supports a level increase for the Board of Veterinary Medicine.

Respiratory Care Board

Quantitative Data (additional comprehensive data is attached)

	1989-90	1998-99	% Change	2000-01
Authorized Positions	6	16.9	+181.6	24.9 (13 prof)
Budget	\$ 745,224	\$1,791,081	+140.4	\$2.4M

Note: 6,373 Licenses or Registrations were renewed and 749 licensure examinations were scheduled in 1998-99.

Qualitative Issues

Public Interest – High

The RCB was placed in the national and international spotlight due to the Efren Saldivar, “Angel of Death” case in 1998. Saldivar is alleged to have killed up to 50 terminally ill patients. As part of the investigation, bodies have been exhumed and the possibility of criminal charges is pending. The spotlight also continues because there is a civil suit filed against Saldivar by some of the families of the patients who he is believed to have killed.

The RCB’s Executive Officer, (Cathleen McCoy), has received a national consumer protection award (FARB) and an international award (CLEAR). The Executive Officer is also a nominee for the Woman In Government Award sponsored by the Center for the American Woman and Politics and *Good Housekeeping* magazine.

Legislative Interest – Medium

Due to the “Angel of Death,” employer and licensee mandatory reporting legislation flew through the legislature which enabled the following changes:

- A statute of limitations was placed on filing accusations.
- The education requirements have been raised effective 7/1/00.
- Day care providers were granted an exemption to provide nebulizer treatments to children only after formal training by an RCP or other designated health professional.
- The ceiling on Continuing Education Units (CEU) was raised from 15 to 30 biennially (regulations will have to be promulgated to change current number required.)
- The RCB raised the rates to register CEU providers to match that charged by the DCA’s Bureau for Private Postsecondary and Vocational Education.

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Program Sensitivity - High

Except for stabbing a needle directly into the heart, the fastest absorption of pharmaceuticals is through inhalation. It is why the adverse reactions are instantaneous and the consequences dire from a few minutes of oxygen deprivation. Patients are fragile because respiratory disease is debilitating and affects and compromises every major organ of the body.

There is great controversy in all health professions regarding placing of licensees in a "diversion program." The RCB, like the Center for Public Interest Law (CPIL), is opposed to placing licensees in a Board run diversion program in lieu of discipline. Instead, licensees with substance abuse problems are placed on probation and, through a probation order, directed into treatment programs of their own choice and in their community [in diversion you are forced into one program with only one method of rehabilitation].

The RCB runs its own probation program with 170 active probationers, 60% who are on for substance abuse. The program encompasses the entire State, and involves 5 designated staff and 5 vehicles. Previously, the program had been run by the Medical Board or Division of Investigation. Since the RCB took over the program in July 1998, the number of positive drug tests has increase 75%. The split-second decisions necessary in the respiratory profession, allow no room for hesitation because a licensee is using alcohol or controlled substances while on duty. The RCB adopted a policy of vigorous probation monitoring for the protection of consumers.

Health and Safety Issues

Currently, the Deputy Attorney General Liaison to the RCB is researching whether the RCB can disclose positive drug tests, while on the job, to the employer in light of patient safety versus right to privacy prior to the filing of an Accusation and Petition to Revoke Probation.

RCP's must practice under the direction of a Medical Director (physician and surgeon) via a prescription. Large companies now often have the RCP in California but the Medical Director in their home office (i.e., New Jersey, New York, etc.). Patient safety is at issue.

Other health and safety issues:

- Hepatitis C, a very easily transmitted disease and Center for Disease Control precaution and patients right to know.
- The nationwide increase of antibiotic resistant tuberculosis as a result of a larger immigrant (legal and illegal) population and large numbers of Americans who do not obtain regular health screening and do not follow treatment regimens or cannot afford them.
- Asthma medications and the move from prescription drugs to over-the-counter.
- The onslaught of practice, negligence and patient molestation complaints as a result of the mandatory reporting legislation.
- Gathering of evidence to file an Accusation prior to the statute of limitations deadline.

Complexity and Visibility

The California RCB will be the first state to implement higher education requirements effective 7/1/00 (this change will not occur nationally until 2004). This was necessary due to the current and emerging technological advances in the actual practice and procedures, medications utilized, and settings wherein practice occurs.

To be able to meet the new technology standards, the education criteria were raised to require specific core courses, a grade of "C" or better in each course, a minimum of 800 clinical hours, and that an Associate Degree be obtained.

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Each and every transcript (especially those from out-of-state) will have to be reviewed to ensure compliance with the new mandate.

The RCB had a "national" exam contract through December 31, 1999. It was the intent of the RCB, who since April 1999 attempted to negotiate in good faith with the national vendor for use of two national exams that would meet entry-level and competency exam requirements. The vendor, in public meetings, stated it would cooperate with the RCB and allow the RCB to purchase these exams. However, in scathing correspondence to the RCB, the vendor retracted these public statements. The Department of Consumer Affairs (DCA) Deputy Director, Lynn Morris, became involved in November 1999 when a contract had not been signed. In fact, to date, the RCB has no contract for exam services through June 30, 2000, much less an examination that will meet the minimum Associate Degree education requirement.

As a result of mandatory reporting and reports of negligence, incompetence, or patient death, the RCB utilizes, as tool, a competency examination. It is now used, because of increased reporting, more regularly requiring immediate update and additional versions to be developed.

The RCB has always had the authority to review and register CEU providers. To date it has not implemented that authority. Effective 7/1/00 the RCB will implement a comprehensive program to determine and register all providers. The RCB is also reviewing courses offered and has intentions on limiting and enforcing the CEU regulations that two thirds of the CEUs must be clinically relevant. The RCB sent out a comprehensive survey last June getting input from licensees on how to phase in the new requirements.

Veterinary Medical Board

Quantitative Data (additional comprehensive data is attached)

	1989-90	1998-99	% Change	2000-01
Authorized Positions	6.8	12.1	+77.9	12.0
Budget	\$993,000	\$1,537,000	+54.8	\$1,851,000

Note: 1,220 licensure examinations were scheduled in 1998-99.

Qualitative Factors

Public Interest – High

Internet Web Site

The Board established its web site in May of 1997. The site provides information about all program areas the Board oversees. Consumer information for filing complaints, public disclosure and a listing of recent disciplinary actions is available along with the applications forms for examinations and licensure. The Board recently added a license look-up feature. The web site receives approximately 1,132 hits monthly.

Outreach Efforts

Since 1994, the Board has made consumer outreach efforts to consumers, licensees, professional associations and educational institutions a priority. These efforts include:

- Establishing a Consumer Rights brochure
- Converting the Board's newsletter from an annual to a quarterly publication
- Adding information on "How to File a Complaint" to its written information with the form and to its web site.
- Developing "Expert Witness and Consultant Guidelines."

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- Developing a handout on "Knowing the Licensing Laws in California" and authorizing its Executive Officer to attend local association and consumer group meetings to provide this information to the public and to answer questions regarding other issues involving veterinary medicine and the laws in California

Legislative Interest – High

Legislative interest in issues related to veterinary medicine has been high in the last five years. Topics of interest include animal rights, continuing education, reciprocity, and school accreditation.

The Board has several proposed legislative packets for 2000/2001 including:

- Modifying the Selection Process for Veterinary Consultants
- Amending the mandatory status of its Diversion Program
- Amending the fee authority to allow for collection of fees for each renewal period in which a licensee is delinquent.
- Creating an alternative method of qualifying for licensure via reciprocity

Regulations

The Board has implemented ten rulemaking files in the last three fiscal years:

- Musculoskeletal Manipulation
- Euthanasia Training Guidelines
- Minimum Standards of Practice
- Continuing Education
- Temporary Licensure -- Interns & Residents
- Temporary Licensure -- Reciprocity (3 separate rulemaking files)
- Examination Fees
- North American Veterinary Licensing Examination

One of the major regulatory changes was to the minimum standards of practice. The California Veterinary Medical Board was the first board in the nation to implement minimum practice standards for veterinary hospitals back in 1979 and the standards had not been changed since that time. Over the last five years, the Board met with representatives from the professional associations, individual veterinarians, representatives from other states, and its legal counsel, to review and update those standards to reflect current practice techniques. The standards were changed from fixed premise standards to actual practice standards and were divided into different practice types:

1. Core standards – apply to all veterinary practices
2. Small animal – fixed practices (traditional veterinary hospital)
3. Small animal – mobile practice

The Board is currently working on specific standards for food animal and equine practices. This project has taken over five years to complete.

Health and Safety Issues

Veterinary medicine is the cornerstone in the food animal industry for health and safety. Drug residues in the food animal chain are a problem that touches each and every consumer in California and the world. Each day Californians are protected by the veterinary profession that is responsible for the safety of food of animal origin and control of disease spread from animals to people. The professional provides health care to the state's population of livestock, poultry, and pets from birds, fish, rabbits, hamsters, and snakes to dogs, cats, goats, pigs, horses, and llamas.

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The services veterinarians provide to the agriculture, insurance, pharmaceutical, research, and horse racing, and pet care industries have a major impact on the state's economy. According to the 1996 American Veterinary Medical Association (AVMA) directory veterinary services constitute a \$1.2 billion industry in the state.

The quality of health care provided is on a par with that of human medicine, including 20 recognized specialties such as surgery, internal medicine, pathology, and ophthalmology. Drugs and procedures are shared between human and animal medicine and frequently techniques are pioneered in veterinary research.

The Board's facility inspection program is critical because the VMB has sole oversight responsibility for controlled substance storage and sanitation. *When 1/3 of an ounce of Ketamine, a frequently used prescription for veterinary anesthesia, brings \$900 on the street, the need for secure storage of dangerous drugs and proper record keeping is apparent and critical.*

The enactment of the North American Free Trade Agreement (NAFTA) makes the possible danger of importing or exporting contaminated food or sick animals startlingly visible. Only veterinarians who are licensed in California and accredited by the U.S. Department of Agriculture (USDA) can issue health certificates for interstate and international movement, can vaccinate and test in official disease eradication programs, and report the health status of herds or flocks where meat or other animal by-products are going to be exported.

Early recognition of symptoms, aggressive vaccination campaigns, and accompanying education by veterinarians have significantly reduced the public health threat of the most well-known diseases that is transmitted between animals and people: rabies. The low incidence of other diseases such as tuberculosis, brucellosis, and eastern and western encephalomyelitis is due to the competency of veterinarians who diagnose and who supervise preventive medicine programs.

Complexity and Visibility

Continuing Education

The largest program change has been the implementation of the Board's continuing education program. This program is modeled after the program administered by the Psychology Board, one of the most innovative and unique of any continuing education program in the Department of Consumer Affairs. The Board's program is also quality centered and ensures the quality and appropriateness of continuing education offerings with review and pre-approval of not only the providers, but each course offering. The Board accomplishes this course review by overseeing the accrediting agency, the American Association of Veterinary State Boards and its Registry of Approved Continuing Education. The program is new this year, but the Executive Officer worked closely with the Executive Director of the AAVSB to implement the program and will be working with Board members and staff to oversee audits of the accrediting agency. The Board has established its Continuing Education Committee and will be ratifying that committee at its meeting in July 2000.

Cost Recovery

As a part of resolving enforcement issues, the Board is very active in collecting cost recovery. During the last three years, the Board has collected \$57,361 out of \$89,798 that was ordered.

Citation and Fine Program.

The Board implemented its Citation and Fine Program in 1990. Since then, the Board has been very aggressive in applying its authority to cite and fine licensees and unlicensed persons for

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violations of the practice act. Prior to 1990, the Board had no authority to pursue unlicensed activity cases other than to refer the cases to local district attorneys.

If the subject of a citation and fine wishes to dispute the citation or the amount of the fine, the subject can request a hearing before the Board's Executive Officer. This is an opportunity for the subject of the citation to dispute the circumstances and the amount of the fine before the Board's Executive Officer. In the last three fiscal years, the Board has issued 107 citations and collected over \$45,000 in fines.

Other – Program Changes

Enforcement Enhancements

A staffing reorganization in 1999 has resulted in numerous improvements in the Board's Enforcement Program, including a decrease in the backlog of complaints and cases and a dramatic improvement in case processing time.

Staffing

Civil service staff for the Board has increased 78% over the past ten years. Moreover, the Board contracts with two veterinarian consultants who review all complaints, four regional veterinarians who conduct over 300 hospital inspections annually, and over fifty veterinarians who assist with the State Board Exam development and the Complaint Review Committee.

SMALLEST BOARDS (CURRENT LEVEL P2) – ACUPUNCTURE, PHYSICAL THERAPY, OPTOMETRY, PODIATRIC MEDICINE, GEOLOGY, PHYSICIAN ASSISTANT, SPEECH-LANGUAGE PATHOLOGY, DENTAL AUXILIARIES, COURT REPORTERS

In 1985, these boards were categorized as "smallest" and reallocated (from P4) to the P2 Exempt Level, equivalent to Staff Services Manager I, as "non-supervisory staff specialist" positions. Considering the growth in staff, the overlap in budget levels between the "small" boards and the relative complexity and sensitivity, the distinction between "smallest" (P2) and "small" appears to be unsupported. Analysis of the Executive Officers positions at this level show they are all performing comparable duties to the Executive Officers at Level O.

Comparable Boards - In 1985, a comparison was made to the positions of Executive Secretary, Board of Chiropractic Examiners (BCE) and Executive Director, Osteopathic Medical Board (OMB) as performing duties at a similar level of responsibility. Those two positions are currently allocated to Exempt Level O. The BCE has a FY 2000-01 staff of 12.0 and a \$1.85M budget; OMB has 4.1 staff and a \$0.91M budget, so the DCA boards compare very favorably.

Acupuncture Board

Quantitative Data (additional comprehensive data is attached)

	1989-90	1998-99	% Change	2000-01
Authorized Positions	6	8	+33.3	10.5
Budget	\$561,000	1,489,603	+165.5	\$1.8M

Note: 2,269 Licenses or Registrations were renewed and 1,643 licensure examinations were scheduled in 1998-99.

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Qualitative Factors

Public Interest – High

California continues to lead the nation in establishing the standards for the acupuncture profession in the United States. The rising popularity of acupuncture as a complement or alternative to mainstream medicine has been evidenced by major media coverage, including articles in major magazines, newspapers and journals. Within the last five years, acupuncture has become an accepted aspect of American health care and is increasingly covered by HMOs and insurance companies. In additions acupuncture has been added to many hospital programs. The number of exam applicants has doubled in the last three years, which translates to a larger number of exam candidates and licensees to regulate, oversee and enforce as primary health care professionals.

Legislative Interest – High

The profile for acupuncture legislatively is consistent with the public emergence and elevation of this profession as a complementary treatment modality. More legislative bills relating to acupuncture have been filed within the last four years than ever before. Over the past three years, the number of legislative hearings in which the Executive Officer has testified has been progressively increasing. Accordingly, legislative inquiries, support and endorsement for the acupuncture profession are rising. The profession is becoming increasingly sophisticated in interfacing with the legislative and regulatory processes, including the retention of numbers of lobbyists. All of these factors have increased the number and complexity of communications and contacts with the Executive Officer.

Program Sensitivity

Nationwide polling consistently shows health care is one of the top five issues in the minds of Americans. A licensed acupuncturist may be a primary health care professional, holding the highest responsibilities of providing for the health and safety of their patients. Any incident compromising that safety is critical. The Board establishes the educational standards for entry into the profession. Currently a Masters Degree is required for graduation and a proposed 4,000-hour Doctorate program is being introduced nationally for implementation within two years. The Board is responsible for approving acupuncture schools and monitoring approved schools, tutorial programs and continuing education providers. Currently, the Board has approved 24 schools, 14 of which are in California. Five new school applications were submitted to the Board in 1999, compared to two submissions per year the previous three years. In addition, the Board's legal responsibility is to ensure a quality examination that adequately tests the knowledge, skills and abilities of an entry-level acupuncturist and to provide the public with the confidence they will be receiving healthy and safe treatments.

Health and Safety Issues

The ethnic diversity of the profession often brings about language barriers and accepted practices varying between the various ethnicities. Eastern and Western medicine continue to integrate and it has been a challenge to the Board to educate the profession about acceptable ethic practice in the West, as well as advancing the esteem and acceptance of the profession while maintaining the historical integrity of the various Eastern disciplines. The accelerating "mainstreaming" of alternative medicines, particularly acupuncture, has added to workload responsibilities and challenges. Acupuncture is used extensively in pain management, drug and alcohol detoxification and treatment of HIV patients and cancer patients to mitigate the impact of chemotherapy. The majority of enforcement cases, which are on the rise, are cases relating to ethical issues, practice management issues and sexual misconduct. The Board has been challenged as to how to get the message to the public of what to expect from the acupuncturists, in addition to informing licensees regarding what constitutes proper practice

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protocol. In the current budget year, the Board has secured the funding for and has commenced drafting the first ever brochures for the consumer and the licensees.

Complexity and Visibility

During Fiscal Year 1997-98 the Acupuncture Committee went through the sunset process and was elevated to the status of a Board in 1999. The Acupuncture licensing exam is administered in three languages: English, Chinese and Korean. The Board is in the process of finalizing a Master Service Agreement to commence computer-based testing with Experior, a computer testing company. The Board and DCA's Office of Examination Resources are also investigating the use of advanced technology to incorporate a clinical component into the exam process. Dimensional figures would allow for the testing of actual locations of acupuncture points and a scanning process would provide quality face/tongue pictures to test the candidate's diagnostic skills in a situation more closely simulating a clinical environment.

Physical Therapy Board

Quantitative Data (additional comprehensive data is attached)

	1989-90	1998-99	% Change	2000-01
Authorized Positions	2.4	7.3	+204.2	8.8
Budget	\$416,000	\$1,856,000	+346.2	\$2.0M

Note: 9,080 Licenses or Registrations were renewed and 1,484 licensure examinations were scheduled in 1998-99.

Qualitative Factors

Public Interest - High

Rating the public and legislative interest in the Physical Therapy Board of California is a challenge. It is not for the number of inquiries that this rating is given, but the sensitivity of the issues that result in the interest.

The public is primarily interested in the Board when they feel they have been injured by a licensee. The Board has delegated to the Executive Officer the authority to determine which complaints should be investigated and to file accusations against licensees. Consequently, one of the most sensitive issues with the public is when the investigative findings do not support a disciplinary action against the licensee. When disciplinary action is not filed it is common for the consumer to seek assistance from a legislator.

Legislative Interest – High

The Executive Officer represents the board before the legislature during the Sunset Review Process, when a statutory change are sought and whenever a legislator has a concern. One recent example is the special report on the necessity of continuing one of the licensing categories of the Board that was submitted in 1999.

Program Sensitivity – High

The Board's mission is consumer protection. To complete this mission the Board makes decisions to grant or deny licenses and whether or not to revoke or place disciplinary terms on a license. These decisions directly impact physical therapists and physical therapist assistants and the patients who are treated by them. The Board is also involved in the only higher level of sensitivity, the criminal justice system where a persons liberty is effected, since it seeks the filing of criminal charges when a violation is of that magnitude.

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Health and Safety Issues

- Investigation of consumer complaints and resulting disciplinary action against licensees.
- The sunseting of the authority for physical therapists to be certified to perform electromyography.

Complexity and Visibility

Insurance Fraud - The Executive Officer testified in two cases in 1999 regarding the statutes and regulations authorizing persons to perform physical therapy. The issue of persons seeking payment for services that were provided illegally is a significant issue in the area of workers compensation insurance.

Optometry Board

Quantitative Data (additional comprehensive data is attached)

	1989-90	1998-99	% Change	2000-01
Authorized Positions	4.7	7.1	+51	7.1
Budget	\$482,000	\$1,140,000	+136.5	\$1.17M

Note: 3,116 Licenses or Registrations were renewed and 580 licensure examinations were scheduled in 1998-99.

Qualitative Factors

Public Interest - High

According to the American Public Health Association, more than one-third of all residents of the United States have eye problems. Historically, the greatest demand on health care services comes from the aging generation. With the baby boomer generation entering middle and old age over the next 20 years, the demand for vision care services will increase dramatically. With optometrist providing more than two-thirds of the primary eye care services in the United States, the public risk of serious physical and/or financial harm at the hands of an incompetent or unethical practitioner is significant.

Legislative Interest – High

Over the past seven years, the optometric profession has been engaged in legislative efforts to expand its scope of practice. In 1996, legislation amended the scope of practice to allow optometrists meeting specific requirements to be eligible for certification authorizing them to diagnose and treat diseases of the human eye. Throughout the legislative process, input from the Board was sought by the Legislature and ultimately the Board was charged with implementing the provisions of the new law. New legislation has been introduced this session to further expand the optometric scope of practice. The Board continues to play a key role in this legislative effort.

In accordance with Chapter 908, 1994, the Board undertook a comprehensive self-review of its efficiency and effectiveness as the regulatory agency for the optometric profession. In 1997 the Board submitted a detailed report on the organization and functions of the Board to the Joint Legislative Sunset Review Committee. This Board is required to conduct this review and report to the Legislature again in 2001 and on a periodic basis thereafter.

Health and Safety Issues

An incompetent or unethical optometrist can cause serious and permanent harm, both physically and financially, to the unsuspecting public. The unqualified practitioner who fails to detect serious pathological conditions manifesting in the eye can, through his or her omission, cause permanent vision loss and, in extreme cases, death. Many procedures performed by

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optometrists involve direct contact with the eye, a sensitive and critical organ of the body. Partial or permanent vision loss due to an optometrist's negligent acts or incompetent practice has severe and dramatic consequences, including serious diminution of the patient's quality of life, for which they can never be fully compensated. The average consumer is not able to access the qualifications of an optometrist or, for that matter, determine what qualifications are necessary for safe practice. Further, most consumers do not have the ability to fully judge the quality of the service received and whether it is adequate for maintaining good ocular health. The Board must ensure appropriate regulatory measures are in place to adequately protect the public health and safety and reduce the risk of serious harm.

Complexity and Visibility

As with most professions within the health care industry, there are many overlapping areas both within the disciplines and the delivery of health care services. This requires the Board coordinate its licensing and enforcement efforts with other organizations, both public and private. For example, with the advent of laser eye surgery, a medical procedure performed by ophthalmologists who are licensed by the Medical Board of California (MBC) and co-managed by licensed optometrists, the Board continues to collaborate with the MBC to ensure these co-management arrangements are within the confines of the law and that patient care remains the primary concern.

The Board also participates in joint enforcement actions with third party payers of health care services, such as MediCal and MediCare on issues involving fraudulent billing practices. In many of these cases, the Board assumes the lead investigative role.

Board of Podiatric Medicine

Quantitative Data (additional comprehensive data is attached)

	1989-90	1998-99	% Change	2000-01
Authorized Positions	3.9	5.2	+33.3	5.2
Budget	\$744,000	\$1,004,229	+34.9	\$1.04M

Note: 838 Licenses or Registrations were renewed and 109 licensure examinations were scheduled in 1998-99.

Qualitative Factors

Public Interest - High

Julie D'Angelo Fellmeth, JD of the Center for Public Interest Law and Catherine Dower, JD of the UCSF Center for the Health Professions/Pew Health Professions Commission are two of the leading observers of licensing boards. They testified before the Legislature in November 1997 and before the Board of Podiatric Medicine (BPM) in February 2000 that:

- BPM is a "model board"
- BPM's continuing competency law is the first such program for doctors within the entire U.S.
- BPM is being watched by observers nationwide because of how it is dealing with continuing competence and other complex, controversial issues

Legislative Interest - High

BPM helped define many of the issues before the Legislature during the 1997/98 Sunset Review by championing continuing competence and majority public membership for state health regulatory boards. Even before this time, Legislative interest in BPM was high as reflected in then Assemblymember Jackie Speier attending one of its meetings and in Senator Robert

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Presley joining BPM and leading it for two years as President prior to joining the Governor's Cabinet as Secretary of Corrections.

Program Sensitivity - High

BPM is engaged against the small but aggressive criminal element in podiatric medicine. After several years of effort, in which BPM worked with the local police and district attorney almost on a daily basis, William Moalem, DPM was convicted in 1999 for contracting for the professional execution-style murder of his partner for insurance money in 1976.

At the time of his arrest, Moalem was vice president of Dr. Garey Lee Weber's multi-million dollar surgical and insurance "mill operation" in southern California. BPM won a court order imposing permanent injunctions and over half a million dollars in cost recovery against Weber in 1990. Both Garey Lee and Bennie Bud Weber are now on probation with petitions pending to revoke them. The Webers are hostile, litigious, and widely regarded as questionable in their medical and billing procedures. One potentially key witness (another doctor working for Weber) and his wife were professionally murdered execution-style in Orange County in late 1999. Weber's legal representative has attempted unsuccessfully to influence the Board with both payoff offers and intimidation through harassment suits.

Health and Safety Issues

Though a small board, BPM fulfills all the functions of larger agencies such as the Medical Board with a smaller immediate staff. It accomplishes this by employing hundreds of Medical Board and Attorney General personnel through shared services and contractual arrangements.

DPMs and MDs are the only two professions licensed under the State Medical Practice Act (Business and Professions Code). While DPMs' practice of medicine is restricted to the foot and ankle, they are the only independent practitioners of medicine other than MDs and DOs. They independently diagnose, treat, prescribe, and perform surgery.

Podiatric medical cases can and do result in loss of life, limb, and quality of life to an extent confronted by few other boards.

Complexity and Visibility

The Department of Personnel Administration's Exempt Programs Specialist commented in her October 27, 1993 memorandum that "the Board of Psychology and Board of Podiatric Medicine are both under the overall authority of the Medical Board and are thus not considered completely independent boards."

BPM has its own board of seven members appointed by the Governor and the Legislature. It hires its own Executive Officer. The Medical Board plays no role in hiring or supervising BPM's staff. MBC's only control over BPM is the power to disapprove proposed regulations, an authority it is not known to have exercised within the last decade.

Nevertheless, the relationship with the Medical Board complicates BPM's operations, as it is yet another constituency with which the Executive Officer must interact, at both staff and board member levels. It is noteworthy that the current president of the Medical Board is a former public member and president of BPM.

Not only does the Medical Board present as another constituency, so do the California Medical Association (CMA) and California Orthopedic Association (COA). Both remain constantly interested in BPM operations and the effects of such on DPMs, orthopedists, other MDs, and the competition between them. Having to deal with these powerful associations, in addition to

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the CPMA and other entities of podiatric medicine, makes BPM a more complex Executive Officer assignment than exists with some other state licensing boards.

BPM's professional renewal fee, currently \$900 biennially, is the highest in the state. This intensifies the concern and controversy surrounding all Board programs and initiatives, as licensees have a higher vested interest.

Unlike other boards licensing doctors in California, BPM also:

- requires all podiatric medical schools in the U.S. to apply annually for approval
- requires all podiatric residencies in California to apply annually for approval
- licenses all postgraduate residents practicing podiatric medicine in the state

The citation and fine program and the approval of schools and residencies, like the newer approval process for podiatric medical certifying boards, are new initiatives since the BPM Executive Officer position was last upgraded in 1985.

Board of Registration for Geologists and Geophysicists

Quantitative Data (additional comprehensive data is attached)

	1989-90	1998-99	% Change
Authorized Positions	3.9	10.3	+164
Budget	\$270,223	\$929,118	+244

Note: 2,139 Licenses or Registrations were renewed and 340 licensure examinations were scheduled in 1998-99.

Qualitative Factors

Public Interest - High

The contributions that geologists make to ensuring that schools, hospitals, government and private sector service providers are not located where geological events may affect them has provided immeasurable benefit to our communities. Licensing and enforcement by the Board provides a level of assurance in the competency of geologic and geophysical professionals. Licensing ensures geologists and geophysicists are competent to practice in the state and the Board's enforcement activity ensures proactive monitoring of the professional activities of its licensees.

Legislative Interest – High

The Board and its Technical Advisory Committee held several public forums in 1999 to address the issue of the role of Registered Geologists in preparing real estate disclosure reports. The Legislative Counsel issues a June 1999 opinion regarding the completion of Natural Hazard Disclosure documents by Registered Geologists. The Legislature again raised the issue of Natural Hazard Disclosure documents during the Board's current review by the Joint Legislative Sunset Review Committee.

Health and Safety Issues

California geologists and geophysicists impact the health, safety and welfare of the public by actively reducing potential economic and personal loss resulting from catastrophic events of nature including earthquakes, flooding, volcanoes and tsunamis. Geologists and Geophysicists also contribute to the economy through exploration and development of the state's natural resources and mitigate man-made disasters such as contaminated drinking water, landslides and erosion of wildlife habitats that resulted from poor planning by forestry, oil and other

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industries. The role of the Board is to ensure people with proven competence carry out these critical functions.

In the worst recent California earthquake, in Northridge in 1994, an estimated \$25-30 billion in damage was sustained, 114,000 residential and commercial structures were damaged and 72 people died. The United States Geological Service (USGS) classified the 6.7 magnitude Northridge quake as "moderate". The Loma Prieta earthquake in Northern California, which caused \$5.9 billion in damage and killed 63 people was also ranked as "moderate".

Today, with a significant increase in population and a large percentage of the population living in complex structures, a major event could cause a catastrophic loss of life. The USGA states, "We are certain that more earthquakes will occur. The next moderate-to-strong damaging earthquake to affect our country may hit Los Angeles again, or it could happen in San Francisco...or in many other urban areas that sit close to potentially active faults." The Environmental Adaption Resource Group of Canada calculates that there is "a 67% chance that a major earthquake could occur before 2020 along one of the faults in the (San Francisco) Bay Area.

Physician Assistant Committee

Quantitative Data (additional comprehensive data is attached)

	1989-90	1998-99	% Change	2000-01
Authorized Positions	2.4	4.7	+95.8	5.3
Budget	\$ 494,000	\$ 812,199	+64.4	\$0.89M

Note: 5,402 Licenses or Registrations were renewed in 1998-99.

Qualitative Factors

Program Sensitivity – High

Physician Assistants (PAs) provide extensive medical care and surgical services to patients on behalf of their supervising physicians, usually without direct supervision and often at locations remote from the physician. In the past year alone two physician assistants were convicted of rape of several of their patients while in a medical facility. Several other PAs were investigated by the PAC for alleged clinical incompetence or misuse of drugs. It is the duty of the Physician Assistant Committee (PAC) to ensure that only qualified and safe individuals are licensed to practice in California as a PA. The committee's disciplinary actions that are taken against such licensees receives wide attention by local newspapers and television stations. All related inquiries were addressed by the Committee's Executive Officer.

Health and Safety Issues

California Physician Assistants (PAs) recently received legal authority to issue written prescriptions for controlled and dangerous drugs and devices, if so authorized by their supervising physician, and to obtain federal DEA control numbers. The Physician Assistant Committee (PAC) worked with the bill's author and the sponsoring organization in crafting the language of this bill to ensure adequate protection of consumers. The committee works with federal and state law enforcement agencies to verify the license status of all applicants for DEA numbers to ensure that an individual who has been convicted for drug related offenses is not issued a DEA number. The PAC also actively investigates every complaint of alleged misuse of drugs, inappropriate prescribing, and excessive use of alcohol by its licensees.

The HIV and hepatitis epidemics continue to increase in numbers of new infections in California. The PAC works with PA training programs and through its own educational efforts to inform

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licensees on the risks of blood borne pathogens, on ways to prevent their spread, and on sources of information about current treatment modalities.

Complexity and Visibility

International medical school graduates (IMGs) who can not obtain licensure as a physician and surgeon often apply for licensure as a physician assistant. The clinical knowledge and skills possessed by most IMGs who seek PA training has been found by many studies to be significantly below the minimally acceptable level required to practice as a PA in California. Yet, IMGs have sued the committee to obtain licensure even though the IMGs did not possess the minimum level of education required by the applicable California laws. IMGs are currently seeking to obtain a change in law that would create a different and lesser standard for their licensure. The PAC is opposed to lowering of the standards required for licensure. The PAC Executive Officer is expected to keep legislators and others informed about the committee's licensing requirements and procedures and is expected to testify on behalf of the PAC at related legislative hearings.

Current law requires the PAC to ensure an alcohol and drug diversion program is available to its licensees. Addiction is viewed by the Committee as an illness that can respond to treatment and can be cured. The PAC monitors performance of its licensees who are known to us to be in a drug or alcohol rehabilitation treatment program. When recommended by the Executive Officer the PAC takes action to temporarily remove the PA from practice or to revoke the license of an individual who is perceived to be a threat to the public because of the licensee's addiction to drugs or alcohol.

SPEECH-LANGUAGE PATHOLOGY AND AUDIOLOGY BOARD

Quantitative Data (additional comprehensive data is attached)

	1989-90	1998-99	% Change	2000-01
Authorized Positions	3	4	+33.3	5.2
Budget	\$268,370	\$367,714	+37	\$0.6M

Note: 9,689 Licenses or Registrations were renewed in 1998-99.

Qualitative Factors

Public Interest – High

When new legislation was enacted and regulations promulgated in 1999 to mandate continuing education ("continuing professional development") for all speech-language pathologists and audiologists, this resulted in considerable public interest exemplified by the numerous inquiries to the Board and to board members at meetings and public forums.

When litigation was enacted in 1998 to allow for the licensing of speech-language pathology assistants, a working group consisting of board members and representatives of various professional organizations assisted staff in developing the implementing regulations. The regulations, which were heard at a public hearing in April, generated considerable public interest and comment.

Legislative Interest – High

Over the past two years, since the Speech-Language Pathology and Audiology Board (SLPAB) and the Hearing Aid Dispensers Examining Committee (HADEC) went through the legislative sunset review process, legislation has been unsuccessfully introduced to merge both agencies into one board (as recommended by the Joint Legislative Sunset review Committee and opposed by the association representing hearing aid dispensers). Separate bills were

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successfully enacted in 1999 to restore the SLPAB as a board and to replace the HADEC with a Hearing Aid Dispensers Advisory Commission within DCA. Due to the high percentage of audiologists who are also licensed as hearing aid dispensers, the issue of merging the two agencies and eliminating dual licensure continues to be an area of legislative interest.

Health and Safety Issues

The SLPAB has discussed adding certain language to the Business and Professions Code to expand the scope of practice of speech-language pathology, such as the use of an endoscope. This procedure is currently not addressed by the national certifying organization, the American Speech-Language-Hearing Association, to be within the scope of practice of speech-language pathology. Use of an endoscope by a speech-language pathologist who is not trained in the procedure could cause harm or damage to the patient's vocal folds.

Other Issues

Although the SLPAB was restored to board status by the enactment of legislation in 1999 which became effective as of January 1, 2000, as of the present, no Executive Officer or board members have been appointed. The last meeting of the prior Board was in June 1999. Due to the lack of an Executive Officer and nine-member board, policy setting and decisions on regulatory and enforcement actions against licensees are pending.

Committee on Dental Auxiliaries

Quantitative Data (additional comprehensive data is attached)

	1989-90	1998-99	% Change	2000-01
Authorized Positions	7.5	8.5	+52.4	9.0
Budget	\$890,000	\$1,445,288	+23.9	\$1.8M

Note: 20,752 Licenses or Registrations were renewed and 6,175 licensure examinations were scheduled in 1998-99.

Qualitative Factors

Legislative Interest - High

The Committee on Dental Auxiliaries (COMDA) examines and licenses five different categories of dental auxiliaries, as a statutory committee within the California Dental Board. At the same time, COMDA is comprised of members separately appointed by the Governor, conducts its own meetings, and maintains separate offices, staffing, and budget from that of the Board.

Since the late 1970's, many legislative bills have been introduced by auxiliary groups to allow certain auxiliaries to practice independently, all of which were intensely opposed by both the California Dental Association and the California Dental Board.

Despite such opposition, AB560 was enacted in 1998, which established a separate Registered Dental Hygienist in Alternative Practice category of licensure. In 1999, another bill was introduced to establish COMDA as a regulatory board separate from the California Dental Board, which is currently on hold until completion of Sunset Review of COMDA and the Dental Board during 2000.

Following the 1996 Sunset Review process, the Joint Legislative Sunset Review Committee sponsored successful legislation which granted COMDA additional statutory powers with regard to examination and licensing, and gave COMDA the power to require that the California Dental Board place its reasons in writing for rejecting any recommendation of COMDA. The Joint

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Legislative Sunset Review Committee will again examine the issues of auxiliary scopes of practice and the independence of COMDA this Fall.

This type of legislative interest is particularly difficult to manage since COMDA is, statutorily, an adjunct of, rather than separate from, the California Dental Board, while auxiliary groups and the Legislature often expect COMDA to take positions on such issues independently.

Health and Safety Issues

COMDA's oversight of the qualification and examination standards, as well as scopes of practice and supervision levels, affect the public's health and safety by assuring auxiliary competence when performing dental procedures. These include such duties as anesthesia, root planning, placing temporary fillings, taking x-rays, etc., while assuring the use of proper infection control procedures to prevent the transmission of diseases such as AIDS, tuberculosis, hepatitis, etc.

Complexity and Visibility

In addition to the unusual statutory relationship between COMDA and the Dental Board, the management of COMDA is complex due to the many and complicated categories of qualification and licensure that it oversees. To assist it in completing its duties, COMDA utilizes 5 separate subcommittees of outside subject matter experts, each of which meet from 2 to 4 times per year.

- Unlicensed dental assistants who wish to take dental x-rays must first take a program approved by the Board. COMDA employs staff and consultants to conduct curriculum and on-site reviews of programs seeking approval, and reviews approved programs every five years. There are currently about 75 such individual programs, and COMDA maintains a database of over 48,000 individuals who hold x-ray certifications.
- Those who wish to perform more invasive dental procedures must first receive an RDA license from COMDA. Most applicants qualify for examination by successfully completing an approximate 8-month program approved by the Board, programs which are initially and continually reviewed by COMDA in the same manner as the x-ray programs referred to above. Each applicant must then take both a 3-hour written examination, constructed by COMDA members, staff, and 6 consultants, and a practical, hands-on examination, also constructed and administered by COMDA members, staff, and more than 20 examiner consultants. About 5,000 applicants are tested each year.
- Licensed RDA's who wish to perform the additional functions of coronal polishing and ultrasonic scaling must first complete programs approved by the Board. These programs are evaluated and monitored by COMDA members, staff, and consultants in the same manner as x-ray programs.
- Those who wish to perform more invasive procedures than RDA's may seek a Registered Dental Hygienist (RDH) license from COMDA. In addition to educational requirements, applicants must successfully pass a clinical examination performed on patients. This examination is overseen and administered by COMDA members, staff, and approximately 100 consultants and contracted exam personnel.
- Licensed RDA's and RDH's who wish to perform "Extended Functions" must apply for an EF license, after completing an additional approved educational program. They must successfully pass a clinical examination performed on patients, which is overseen and administered by COMDA members, staff, and 12 consultants.
- COMDA is currently constructing the written examination that will be required of the new Hygiene independent practice license applicant, using an additional 6 examiner and subject matter expert consultants.

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- COMDA began to do exhaustive occupational analyses and related test validation studies of its exams beginning in 1993, utilizing large number of subject matter experts and licensee surveys, prior to the recent interest in and mandate of such studies by the Legislature.
- Last, but certainly not least in terms of complexity, sensitivity, and the impact on Californians, COMDA proactively addresses, and reacts to, "scope of practice" issues related to all of the above license categories. COMDA continually reviews all of the regulations which define the duties that each category is allowed to perform to determine whether scopes of practice and supervision levels are those which provide the most access to dental care by Californians, consistent with their health and safety.

COMDA's support of or opposition to the concept of a separate board, or even additional regulatory duties, would not contribute to a meaningful discussion of the issue(s), since any position could be seen as self-serving.

Court Reporters Board

Quantitative Data (additional comprehensive data is attached)

	1989-90	1998-99	% Change	2000-01
Authorized Positions	4.7	5.1	8.5	5.1
Budget	\$0.586	\$1.0	69.3	\$1.1

Note: 7,919 Licenses or Registrations were renewed and 1,377 licensure examinations were scheduled in 1998-99.

Qualitative Factors

Legislative Interest – High

The Board experiences moderate to high levels of legislative interest, especially through the Sunset Review process. The Board also reviews proposed legislation in terms of consumer protection and makes their decision to support, oppose or remain neutral. The Board itself introduces a substantial number of legislative proposals each year, ranging in content from technological changes to code of conduct or examination administration amendments and to school requirements. In addition, the Board's legislative interest is triggered by other agencies, including DCA, and by regulatory changes.

Complexity and Visibility

Consumer protection for the Court Reporter's Board is defined in terms of securing welfare for the millions of consumers, including attorneys, judges and citizens, who depend on competent and timely verbatim reports of legal proceedings provided by reporters to uphold their documentation of due process guaranteed by law. These proceeding may involve the finances of individuals and organizations, both public and private, as well as any and all aspects of their lives and livelihoods. Many of the situations licensees face are not specifically addressed in law or regulation. Thus, licensees seek guidance from the Board in these unusual situations. In addition, consumers turn to the Board when they encounter problems with reporters or their work product.

As technology changes in this profession, the services provided by reporters are also expanded. Many of these services, as well as the rights of the consumers and the responsibilities of the licensee, are not addressed in law or in regulation. In these instances, the Board provides interpretation and guidance.

Problems created through mergers and globalization are particularly problematic for the Board, as it has no authority to regulate businesses offering court reporting services; its authority is

EXECUTIVE OFFICER EXEMPT LEVEL STUDY

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limited to individual licensees. Thus, problems created by firms often cannot be addressed directly by our licensees, who often come to the Board to mediate complaints with employers.

CONCLUSION

The Department of Consumer Affairs has reviewed both the qualitative and quantitative data in an attempt to develop a structure which would appropriately allocate the Executive Officer Exempt Levels. All Executive Officer positions are similar in the degree of authority and the types of functions they oversee. All have supervisory, managerial, legislative, regulatory, industry and stakeholder (licensee) responsibilities which far exceed those of a Staff Services Manager in a department, who may report to a Division Chief or Director. Each board is an independent entity, with the Executive Officer serving in the position of a director. The determining factors for the appropriate level have historically been linked to the number of staff and the budget of each board, rather than considering the similarities in authority and the far reaching responsibilities these positions hold. Obviously, all Executive Officers cannot be allocated to the exempt equivalent of CEAs, although CEA equivalent exempt levels may be a more appropriate comparison than the SSM equivalents, as all exceed the CEA Criteria 1A, "Division Chief with program of average responsibility and complexity". Therefore, the qualitative factors - relative sensitivity and complexity of the programs, the professional level of the licensee population, the special requirements that the Executive Officer have professional licensure, etc. - must be given additional consideration in determining the appropriate differences between the Executive Officer levels. The DCA proposes a new structure of categories and levels from Exempt Level O (SSM II) to Exempt Level F (CEA 4), with the majority of the upgrades proposed at the lowest level to recognize the authority and responsibility of these positions, even in the smallest boards. Of the twenty-five (24) total Executive Officer positions, eighteen (18) upgrades are proposed. The remaining five (6) positions are recommended to remain at their present levels.

RECOMMENDATION

The Department of Consumer Affairs recommends the following revisions to the general allocation criteria for the Exempt Levels for the Executive Officers of the boards:

SMALL DEPARTMENT – EXEMPT LEVEL F (CEA 4)

Positions	Budget
350+	\$35M+

Contractors State License Board – No change
Medical Board of California – No change

LARGEST BOARDS – EXEMPT LEVEL H (CEA 3)

Positions	Budget
80 – 349	\$9M+

Board of Registered Nursing (+)
Board of Accountancy (+)

LARGE BOARDS – EXEMPT LEVEL J (CEA 2)

Positions	Budget
40 – 79	\$5 - 9M+

Board of Professional Engineers and Land Surveyors (+)
Board of Pharmacy (+)
California Dental Board (+)
Board of Vocational Nursing and Psychiatric Technicians (+)

MEDIUM BOARDS – EXEMPT LEVEL L (CEA 1)

Positions	Budget
30 – 39	\$2.5 – 5M

Board of Behavioral Sciences (+)
Board of Architectural Examiners and Landscape Architects Technical Committee – No change
Structural Pest Control Board (+)

SMALL/ MEDIUM BOARDS – EXEMPT LEVEL M (SSM III)

Positions	Budget
13 – 29	\$1 – 2.5M

Respiratory Care Board (+)
Athletic Commission – No change (Exceptional allocation)
Board of Psychology – No change

SMALL BOARDS – EXEMPT LEVEL O (SSM II)

Positions	Budget
5-12	\$0.5 – 2M

Veterinary Medical Board – No change
Acupuncture Board (+)
Board of Registration for Geologists and Geophysicists (+)
Dental Auxiliaries (+)
Physical Therapy Board (+)
Board of Optometry (+)
Board of Podiatric Medicine (+)
Physician Assistant Examining Committee (+)
Speech-Language Pathology and Audiology Board (+)
Court Reporters Board (+)

ATTACHMENTS

Attached are charts showing the quantitative data used to prepare this study.

Exempt Salary Schedule

October 2016

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PUBLISHED BY
State of California
Department of Human Resources
Sacramento, California

Preface

The Exempt Salary Schedule provides salary information on elected state officers whose salaries are established by the California Citizens Compensation Commission, on "statutory" exempt state officers in the Executive Branch whose salaries are fixed by law, and on "non-statutory" exempt positions whose salaries are recommended by the appointing power and approved by the Department of Human Resources under the authority of Government Code §19825. (See the section entitled "Salary Setting in the Executive Branch.")

Many of the salaries published here are subject to change as the duties, responsibilities, and organizational relationships of many of the positions listed may change. Personnel Offices are notified via the Exempt Pay Letter whenever the salaries of exempt positions assigned to their department are changed and approved by the Department of Human Resources. State personnel staff may review the latest information through the State Controller's California State Pay (CSP) screen in the automated payroll system or through the Human Resources Network (HR Net) on the CalHR web site.

If you have any questions, please contact:

The Exempt Program
Department of Human Resources
1515 "S" Street, North Building, Suite 400
Sacramento, CA 95811-7258
(916) 324-9381
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Salary-setting in the Executive Branch (Non-civil service)

The Government of the State of California has several salary-setting mechanisms that establish the salaries of elected and appointed officials who are not in the Civil Service.

Elected Officials

The California Citizens Compensation Commission meets annually in the spring to review and establish salaries and benefits for elected officials in the Executive and Legislative branches. The Commission consists of seven members appointed by the Governor, three representing the public and two each the business community and labor organizations. Salaries become effective the first day of the new legislative session — the first Monday of December. The Department of Human Resources provides staff support to the Commission.

Appointed State Officers

The salaries of most top level state officers (Agency Secretaries and Department Directors) who are appointed by the Governor are set in Chapter 6, Part 1, Division 3, of Title 2 of the Government Code. Each section in this chapter lists a salary and the positions that are to receive that salary. (The State Senate must confirm any appointee to a position listed in this chapter.)

Chapter 6 also includes provisions that most of the salaries listed will increase in any fiscal year in which a general salary increase is provided for state employees. The amount of the increase shall be comparable to, but shall not exceed, the percentage of the general salary increases provided for state employees. The Department of Human Resources reports the amount of the increase to the State Controller (who administers the payroll system) to implement the increase.

Department of Human Resources (CalHR) Exempts

The Constitution of the State of California provides that members of boards and commissions, appointees of the Governor and one appointee of each Governor's appointee shall be exempt from civil service. All those that do not fall under the categories of appointed state officer or elected state official (above) come under the salary approval authority of the Department of Human Resources (CalHR). For these employees, CalHR approves the salary range for each position and determines any annual increase. These positions normally receive the same increase provided comparable civil service employees.

Please see “Exempt Authority” in the [Explanatory Notes](#) below for an explanation of the various exempt appointments.

Exempt v. Excluded Employees

The term “exempt” often is confused with “excluded”, however they are different. An excluded employee is excluded from collective bargaining (the Dills Act). An exempt employee is exempt from the civil service law and rules. Most exempt employees are excluded from collective

bargaining because they are management level positions but some are not. The terms are not interchangeable.

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Work Week Group Definitions

Work Week Group 2:

(Effective 10/1/85)

Overtime for employees in classes not eligible for exemption under Section 7K of the Fair Labor Standards Act (FLSA) is defined as all hours worked in excess of 40 hours in a period of 168 hours or seven consecutive 24-hour periods.

Hours Worked

For the purpose of identifying hours worked under the provisions of the FLSA, only the time that is controlled or required by the State and pursued for the benefit of the State need be counted. Thus paid leave such as vacation, sick leave, holidays, compensating time off, etc., need not be included when determining if overtime hours have been worked under the FLSA. However, under applicable State regulations, paid leave is considered time worked and when an employee works more than 40 hours in a week that includes paid leave, an overtime payment obligation is incurred.

Work Periods

A work period for WWG 2 employees is defined as a fixed and regularly occurring period of 168 hours - seven consecutive 24-hour periods. The appointing power determines the work week which may begin on any day at any hour. Once the beginning time of an employee's work week is established and noted in the records, it remains fixed regardless of the schedule of hours worked. The beginning of a work week may be changed if the change is intended to be permanent and it is not designed to evade the overtime provision of the FLSA.

In order to qualify for the Section 7K exemption, the employer must note in records applicable to each employee affected the 7K exemption is claimed and indicate the length of the work period, the starting day of the work period and the starting time of the day.

Overtime Authorization

An employee shall not work overtime unless ordered to do so by his supervisor. A supervisor shall not allow an employee to perform overtime work without prior authorization and shall take affirmative steps to prevent unauthorized overtime from being worked.

Overtime Credit

Overtime will be credited on a one-quarter of an hour basis with a full quarter hour credit to be granted if half or more of the period is worked. Smaller fractional units will not be accumulated; however, if an employee regularly works overtime in increments of less than 7 1/2 minutes, periodic adjustments shall be made so that, over a period of time, the employee will be compensated for all hours actually worked.

Overtime Compensations

The method of compensation (cash or compensating time off) for FLSA overtime worked shall be at the discretion of the appointing power in accordance with the following:

- Compensating time off on a one and one-half time basis may be authorized in lieu of cash compensation if granted within the pay period.
- Cash compensation may be authorized and the rate of cash compensation paid for overtime shall be one and one-half times the hourly equivalent of the employee's salary as of the time the overtime was worked. Fair Labor Standards Act overtime remaining at the end of the pay period shall be compensated for in cash.

Determination of Coverage under FLSA

The provisions of Work Week Group 2 are made applicable to all classes that are determined by the Director of the Department of Human Resources to include positions subject to the Fair Labor Standards Act.

Work Week Group "E"

Work Week Group "E" includes classes that are exempted from coverage under the FLSA because of the "white-collar" (administrative, executive, professional) exemptions. To be eligible for this exemption a position must meet both the "salary basis" and the "duties" test.

Exempt (WWG E) employees are paid on a "salaried" basis and the regular rate of pay is full compensation for all hours worked to perform assigned duties. However, these employees shall receive up to 8 hours holiday credit when authorized to work on a holiday. Work Week Group E employees shall not receive any form of additional compensation, whether formal or informal, unless otherwise provided by the provisions of this work week group.

Consistent with the "salaried" nature of such a position, an exempt employee:

- Shall not be charged any paid leave for absences in less than whole day increments;
- Shall not be docked for absences of less than a work period.
- Shall not be subject to a disciplinary action suspension of less than full work week increments unless there is a violation of a major safety rule; and
- Shall not be required to document hours worked for payroll purposes.

Work Week Group "SE" (Physicians, Attorneys, Teachers)

Work Week Group "SE" applies to classes and positions with an average work week of 40 hours. The regular rate of pay is full compensation for all time that is required for the employee to perform the duties of the position. However, these employees shall receive up to eight hours of holiday credit when ordered to work on a holiday. Hours of work in excess of the average work week are not compensable, and shall not be deemed overtime. If an employee in this subgroup is not required by the appointing power to work a normal workday or part thereof, the employee nevertheless shall receive the regular rate of pay without deduction for the entire pay period.

Consistent with the “salaried” nature of such a position, an exempt employee:

- Shall not be charged any paid leave for absences in less than whole day increments;
- Shall not be docked for absences of less than a work period.
- Shall not be subject to a disciplinary action suspension of less than full work week increments unless there is a violation of a major safety rule; and
- Shall not be required to document hours worked for payroll purposes.
- For rank and file employees, refer to the appropriate collective bargaining agreement for specific provisions that may otherwise be addressed and not contained in the above work week group definition.

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The Exempt Position Request

The Exempt Position Request (EPR) was designed to provide the Governor's Office and CalHR with the information needed to process the paperwork associated with an exempt appointment, the establishment or abolishment of an exempt classification, and salary changes to those classifications. Part 1 is filled out by the requesting department and includes:

1. a. Appointee Information:

- Proposed Appointee
- Proposed Effective Date, Salary, Salary Range & Level

If appointee is a current State employee, fill in the following:

- Class Code, Monthly Salary & Current Class & Employing Department

1. b. Exempt Pay Scale Information:

- Current Schem Code, Class Code & Title
- Fill in "Current": If no changes to Class Code
- Fill in "Proposed": If changes are being made to Class Code

A duty statement and organization chart must be attached as part of the package. If an existing exempt classification is being used, it often must be revised to reflect new duties and responsibilities. This often includes salary and other changes that must be made in the Exempt Pay Scale. If a new classification is being created for a new entitlement, only the proposed information should be filled out and the appropriate "new exempt class" box should be checked.

- The EPR should be signed and sent forward to the department's Agency for approval (if the department reports to an Agency) and then to the Governor's Appointments Unit.
- A copy of the package must also be sent to the CalHR Exempt Program (EPR@calhr.ca.gov) at this time.
- Departments and Agencies reporting directly to the Governor's Office should forward the EPR to the Governor's Appointments Unit. Independent agencies such as Constitutional Officer's departments, or Boards and Commissions should forward the EPR directly to CalHR.
- Upon review and approval by CalHR, a pay letter will be forwarded to SCO for processing.

A copy of the Exempt Position Request form is attached. It is also available on the Human Resources Network (HR Net) as a service to State Personnel Offices located on CalHR's website (www.calhr.ca.gov). (The HR Net is available to personnel offices by subscription only.)

Exempt Salary Increases

Refer to PML 2014-028 for information regarding the process for requesting Exempt salary increases.

If any further information is needed, the CalHR Exempt Program can be reached at (916) 324-9381.

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Sample Exempt Position Request**Exempt Position Request**

CalHR Form EPR.docx (9/10/15)

Instructions: Complete and send through the agency (if appropriate) to the Appointments Unit of the Governor's Office who will forward it to CalHR. An advance copy should be sent to CalHR.

I.a. Appointee Information							
Proposed Appointee				Effective Date	Salary	Salary Range	Level
If the appointee is currently a state employee:							
Class Code	Monthly Salary	Current Class & Employing Department					
I.b. Exempt Pay Scale Information							
Current Information and Proposed Changes, if any: (Current information is available on Controller's CSP Screen or the Human Resources Network (HR NET))							
	Schem Code	Class Code	Title				
Current:							
Proposed:							
	Monthly Salary Rg.	Exempt Level	Authority/Entitlement	WWG	MCR	CBID	Footnotes
Current:							
Proposed:							
<input type="checkbox"/> New exempt class based on new legislation (attach a copy of the legislation). <input type="checkbox"/> New exempt class based on the conversion of a civil service managerial position under Gov. Code 12010.6.							
If new conversion, Civil Service Class to be Converted					Position Number		
Definitions of Commonly Used Appointing Authorities: (Ref. CA State Constitution, Art. VII, Sec. 4)							
C – Constitution Officer or Appointee (Not Gov. or Lt. Gov.)				F – Governor's (or Lt. Gov.'s) Appointee			
D – Board or Commission Member				G – Appointee of a Governor's Appointee			
E – Appointee of a Board or Commission				M – Special Authorizations			
CBID: E97 – Confidential; E98 – Supervisory; E99 – Managerial; E79 – Managerial Specialist (Non-supervisory)							
I.c. Requesting Department							
Requester's Title				Department			
Requester's Signature				Telephone Number		Date	
II. Agency Approval							
Name and Title of Approving Official				Agency Name			
Signature of Approving Official				Telephone Number		Date	
III. Governor's Office Approval (Send to Appointments Unit, Attn. Lisa McVay)							
Comments					(For CalHR Use Only)		
Name and Title of Approving Official							
Lisa McVay, Appointments Administrator					(916) 322-7458		
Signature of Approving Official Date							

The Conversion Process

This process is provided for by Government Code section 12010.6 and is available to line agency departments only, i.e., departments whose directors are directly appointed by the Governor.

The department identifies a vacant managerial position or a vacant position that can legitimately be reclassified to a managerial position. Once the position is identified, the regular appointment process is followed. The EPR must indicate that a new exempt class is being proposed based on the conversion of a vacant civil service managerial position and the position number of the civil service class must be included, in Part 1.b. The EPR should also include a copy of the duty statement, organization chart, a justification explaining the need for the conversion, and the recommended salary level.

The Governor's Office will not approve a conversion from civil service to an Exempt until the candidate is approved for appointment. Once the appointee is approved, the Governor's Office will send notification to CalHR to convert the civil service position.

CalHR will establish the Exempt position and issue an Exempt Pay Letter. The Pay Letter will be sent to SCO and to the department's Personnel Officer so the department can key the transaction.

If a department wishes to return an exempt position to civil service, they must obtain the approval of the Governor's Office. The Governor's Office and CalHR will determine if the exempt class should be abolished or inactivated on a temporary basis. In no case can the exempt class be used after the position has returned to civil service unless a new conversion is approved or, if the return was temporary, until the Governor's Office is notified and CalHR reactivates the exempt class.

If any further information is needed, the CalHR Exempt Program can be reached at (916) 324-9381.

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Salary Changes for Exempt Classes

By law, the Department of Human Resources must approve the salary of each exempt position unless the law specifically exempts it. CalHR consults with the Governor's Office Appointments Unit in reviewing specific requests to change exempt position salaries. Approval of changes in salary levels for exempt positions must be obtained **prior** to discussion of salary with potential appointees.

The modified classification review (MCR) process is used to indicate whether or not a position may be refilled at the existing salary level without CalHR approval.

CalHR has discontinued the use of the MCR process for exempt classes. All exempt appointments must be approved by the Governor's Office (except appointees of other elected officials) and are therefore the equivalent to NO MCR. The MCR notation is NONE. The only exceptions are classifications used in the Governor's Office, which are MCR I. All appointments require that the Exempt Position Request (EPR) be filled out.

MCR I

These positions do not require prior review and approval by DPA. Departments may key the PAR transaction directly into the State Controller's Office. Item 435 of the PAR must be completed. These are positions whose salaries are not subject to CalHR approval because they are either statutorily exempt from CalHR approval or are established in statute (statutory exemptions).

MCR II

MCR II positions may be refilled if there is no change in duties since last approved by CalHR. If there is a change in duties or organizational structure, a new duty statement and organization chart must be submitted before a new appointment is made. Note that exempt classifications marked as MCR II are in the process of being changed to either MCR I or MCR NONE.

NONE (No MCR)

Appointments to these positions must be reviewed by the Governor's Office. Departments must send a cover memo of explanation, an Exempt Position Request (EPR), a duty statement, and organization chart through the Appointments Unit to the Exempt Program of CalHR.

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Exempt Salary Chart

October 2016

Exempt Category	Level Definitions	Salaries in Statute		CalHR Established Exempt Salaries				Civil Service Excluded		
		Monthly Salary	Annual Salary	Monthly Min.	Monthly Max.	Annual Min.	Annual Max.	Level Definition	Min.	Monthly Max.
I. Management Positions:										
A.	Cabinet	13,178.98	158,148			16,175.41		194,105		
	All Others at Level A			12,251	-	13,648	147,010	-	163,770	
B.	Tier II Department Director	12,360.97	148,331	12,829.50	-	13,874.99	153,954	-	166,500	
	All Others at Level B			11,492	-	12,804	137,901	-	153,647	
C.	Chair - Major Boards	11,815.72	141,789	10,986	-	12,237	131,832	-	146,849	
	Member - Major Boards	11,451.91	137,423	10,645	-	11,861	127,741	-	142,338	Legal & Medical 15,129
D.	Major Chief Dep. (CEA V Equiv.)			10,505	-	11,700	126,060	-	140,397	CEA C 10,277 - 11,669
E.	Tier I Department Director	10,906.57	130,879	12,218.47	-	13,214.29	146,622	-	158,572	
	All Others at Level E			10,139	-	11,294	121,672	-	135,527	
F.	CEA IV Equivalent			9,923	-	11,056	119,076	-	132,672	CEA B 9,255 - 11,024
G.	Ex. Officers, Major Boards			9,667	-	10,769	115,999	-	129,224	
	Chair - Medium Boards	10,361.41	124,336	9,633	-	10,728	115,591	-	128,742	
H.	Maj. Dept. Deputy Director			9,461	-	10,540	113,527	-	126,480	
	Small DD & Mbr. Med. Bds.	9,997.97	119,975	9,294	-	10,350	111,524	-	124,206	
I.	Asst. Agency Secretary I			9,011	-	10,043	108,138	-	120,510	
J.	Asst. Director (Line Program)			8,598	-	9,577	103,181	-	114,923	CEA A 6,647 - 9,555
K.	Asst. Agency Secretary II			8,201	-	9,136	98,410	-	109,633	
L.	CEA I Equivalent			7,819	-	8,710	93,825	-	104,516	
M.	SSM III Equivalent			7,454	-	8,303	89,449	-	99,634	SSM III 7,301 - 8,289
N.	SSM II/III Equivalent			7,112	-	7,923	85,346	-	95,073	
O.	SSM II Equivalent			6,782	-	7,554	81,378	-	90,648	SSM II (M) 6,647 - 7,551
II. Non-management Positions									SSM II (S) 6,005	- 7,462
P1.				6,628	-	7,164	79,537	-	85,964	
P2.	SSM I (Supervisory) Equiv.			6,280	-	6,828	75,359	-	81,934	SSM I 5,470 - 6,796
P2A	SSM I (Non-supervisory)			6,024	-	6,467	72,294	-	77,608	
P3.				5,749	-	6,205	68,994	-	74,457	
P4.	Assoc./AA II Level			4,764	-	5,921	57,165	-	71,058	Assoc./AA 4,738 - 5,931
P5.	SSA - Rg. C/AA I			3,959	-	4,907	47,512	-	58,883	SSA-Rg. C 3,939 - 4,932
P6.	SSA - Rg. B			3,306	-	4,078	39,676	-	48,933	SSA-Rg. B 3,285 - 4,112
P7.	SSA - Rg. A			3,037	-	3,716	36,450	-	44,595	SSA-Rg. A 3,033 - 3,801
P8.	Mgt. Svcs. Tech.			2,586	-	3,129	31,036	-	37,550	MST-Rg. A 2,687 - 3,366
P9.	(Grad) Student Assistant			2,239	-	2,664	26,871	-	31,963	GSA-Rg. A 1,937 - 2,534
Q1.	Executive Secretary II			3,552	-	4,445	42,630	-	53,346	Ex. Sec. II 3,541 - 4,432
Q2.	Executive Secretary I			3,183	-	4,165	38,192	-	49,984	Ex. Sec. I 3,252 - 4,073
Q3.	Secretary			2,833	-	3,617	33,990	-	43,408	Secretary 2,893 - 3,621

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Public Health & Public Safety Positions

SCHEM	CLASS CODE	CLASSIFICATION	INCUMBENT SALARY
EI00	1642	DIRECTOR/DEPARTMENT OF DEVELOPMENTAL SERVICES	\$16,014.06-\$16,014.06
EM00	1639	DIRECTOR/DEPARTMENT OF HEALTH CARE SERVICES	\$13,201.04-\$16,014.06
EP00	1641	DIRECTOR/DEPARTMENT OF STATE HOSPITALS	\$16,013.65-\$16,013.65
ES00	5945	DIRECTOR/DEPARTMENT OF SOCIAL SERVICES	\$18,272.23-\$18,820.40
GJ00	4850	DIRECTOR/DEPARTMENT OF FORESTRY	\$13,201.04-16,920.40
CJ00	8373	COMMISSIONER/DEPARTMENT OF CALIFORNIA HIGHWAY PATROL	\$20,917.24

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Pay and Allowances – Military Department

1. Adjutant General

Effective 1 January 2016

Base Pay for Adjutant General Is Same Pay and Allowances
as For Lieutenant General (O-9) in the U.S. Army

Class Code: 8409

Schem. Code: SP00

Entitlement: F/MV162 & 164.1

Titles	Totals
Basic Pay	\$15,125.10
Personal Allowance	41.67
Basic Allowance for Housing	?
Basic Allowance for Subsistence	256.63
Total	\$ 256.63

Note: Basic pay for an O-7 to O-10 is limited by Level II of the Executive Schedule which is \$15,125.10. This chart only shows Basic Military Pay, the personal allowance and the basic allowance for subsistence. Housing and other allowances may be provided and may be found online at the [Defense Finance and Accounting Service](#) (DFAS) website. (Go to *Military Members – Pay & Allowances – Military Pay Charts* and select the latest year.

2. Other Active duty Personnel

Other active duty personnel are paid based on their military rank plus they receive housing, subsistence and other allowances as appropriate. Basic pay is listed in the Exempt Pay Scale. See the DFAS website above for additional allowances.

Military pay is reported to the State Controller by the Military Department based on the latest information from the DFAS. CalHR reviews the information provided.

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Alternate Salary Ranges

Alternate Range Criteria 001

Assistant to Board Member/Board of Equalization/Class Code 4272

- Range A. This range applies to all incumbents not meeting the criteria for Range B.
- Range B. This range applies to those incumbents who are members of the California State Bar or who possess a Doctorate, and serve as a high-level advisor to the Board Member.

Alternate Range Criteria 002

Office Assistant (Typing)/Various Departments

- Range A. This range shall apply to incumbents who do not meet the criteria for payment in Range B.
- Range B. This range shall apply to incumbents who have satisfactorily completed one year of experience equivalent to that of an Office Assistant (Typing), Range A. Education may be substituted for the experience if approved by the Department of Human Resources Exempt Program.

Alternate Range Criteria 003

Junior Staff Analyst/Office of Planning and Research/Class Code 2128

- Range A. This range shall apply to incumbents who do not meet the criteria for payment in Range B.
- Range B. This range shall apply to persons who have satisfactorily completed the equivalent of six months of experience as a Junior Staff Analyst; and may apply to persons who have six months of experience outside of State service performing analytical duties similar to those of a Junior Staff Analyst, Range A.

Alternate Range Criteria 004

Technical Specialist I/Governor's Office, OPR/Class Code 0331

- Range A. This range shall apply to incumbents who do not meet the criteria for payment in Range B or C.
- Range B. This range shall apply to persons who have satisfactorily completed the equivalent of six months experience as a Technical Specialist I; and may apply to persons who have six months of experience outside of State service performing duties similar to those of a Technical Specialist I.
- Range C. This range shall apply to persons who have satisfactorily completed the equivalent of twelve months experience as a Technical Specialist I (Range B) or eighteen months experience as Technical Specialist; and may apply to persons who have eighteen months of experience outside of State service performing duties similar to those of a Technical Specialist I.

Alternate Range Criteria 005

Classes in the Governor's Office.

Application of Alternate Range Criteria is delegated to the Governor's Office.

Alternate Range Criteria 006

Established August 1, 1990

(Replaces Range 104 of the Civil Service Pay Scales)

Abolished June 30, 1996

Alternate Range Criteria 007

Established April 1, 1991

Various Classes

- Range A. This range shall apply to incumbents who do not meet the criteria for payment in Range B.
- Range B. This range shall apply to incumbents who have satisfactorily completed one year of experience performing duties typical of the class. Education may be substituted for the experience if approved by the Department of Human Resources.

Alternate Range Criteria 008

Established May 31, 1991.

Revised January 1, 2000.

Teaching Classes in the Special Schools of the Department of Education

- Range A. This range shall apply to incumbents of teaching classes employed by the State Special Schools of the California Department of Education who work a regular school year as defined in their contract.
- Range B. This range shall apply to incumbents of teaching classes employed by the California Schools for the Deaf and the California School for the Blind who are appointed to work an extended school year.

Alternate Range Criteria 009

Established January 1, 2000

Supervising Teacher III

- Range A. This is the monthly rate for incumbents in the classes of Supervising Teacher III, School for the Blind and Supervising Teacher III, School for the Deaf whose contract covers a 204-day school year.
- Range B. This is the monthly rate for incumbents in the classes of Supervising Teacher III, School for the Blind and Supervising Teacher III, School for the Deaf whose contract cover a full-time, 260-day year.

Alternate Range Criteria 010

Established July 31, 1992 (Rev. June 7, 1995)

Abolished June 30, 1996

Alternate Range Criteria 011

Established October 5, 1992

Real Estate Officer, Department of General Services
(See Civil Service Alt. Rg. 287)

Alternate Range Criteria 012

Established January 30, 1998

Abolished May 1, 2004

(Positions in the Trade and Commerce Agency used in Foreign Trade Offices)

Alternate Range Criteria 013

Effective January 1, 1998

(Number changed from 012 effective March 2, 2000)

Executive Director, Fair Political Practices Commission, Class Code 5028

Range A. This range applies to all incumbents not meeting the Criteria for Range B.

Range B. This range applies if the incumbent is a member of the California State Bar.

Alternate Range Criteria 014

Effective July 1, 2004

Advisor to Board Member, Integrated Waste Management Board, Class Code 7511

Range A. This range shall apply to incumbents who do not meet the criteria for payment in Range B.

Range B. Upon recommendation by the Board Member, this range may apply to incumbents who have satisfactorily completed the equivalent of 12 months experience as Advisor to Board Member, IWMB, Range A. Education or experience outside of state service may be substituted if approved by the Department of Human Resources.

Range C. Upon recommendation by the Board Member, this range may apply to incumbents who have satisfactorily completed the equivalent of 12 months experience as Advisor to Board Member, IWMB, Range B. Education or experience outside of state service may be substituted if approved by the Department of Human Resources.

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Lump Sum Payments to Statutory Officers

Background

Certain Statutory Officers (those Governor's appointees and elected officials whose salaries are set in statute) do not earn or use sick leave, vacation, or annual leave. An individual with prior state service, exempt or civil service, who is appointed to a position earning a statutory salary, may elect to receive a lump sum payment for accrued vacation or annual leave just prior to being appointed to or during the appointment to the statutory position. Payment is made at the salary rate of the last position where the leave was last earned. If the appointee chooses not to receive a lump sum payment at that time, the amount of leave is "banked" and is available if the individual returns to a position where leave is accrued and used.

When a statutory officer leaves state service, a lump sum payment is made if there is an existing leave balance. However, the rate of pay must be at the salary rate of the position where leave was last earned, adjusted for general salary increases that would have been received (as though the individual had remained in the former position). If the former position was civil service, the individual is reinstated to the former position and immediately separated, allowing a lump sum payment at the current rate of pay of the former position. **However, since the duties, and therefore the salaries, of an exempt position can change dramatically over time, the department must get the approval of the Department of Human Resources if reinstatement is to an exempt position.** The last department in which leave was earned is responsible for the payment although there is no prohibition on the current department making the payment if it chooses to do so.

Procedures for Lump Sum Payment in an exempt position

Send CalHR a memo with the name, social security number, last date in the position in which vacation or annual leave was earned, class code, title of the position and the salary on the date he/she left. Show your calculation of what the present day salary would be with general salary increases.

CalHR will verify (or correct) the salary information and return the approval to the department. If the approved salary is the current salary rate for the CalHR exempt position to which the individual is reinstated, the department can key enter the reinstatement and the separation for the lump sum payment. If the approved salary is NOT the current salary rate, the department must send the reinstatement and separation PAR documentation with a copy of CalHR's approval to the State Controller's Office for processing. Refer to the Personnel Action Manual Section 5.75 for further details.

In some cases, the statutory officer who banked leave credits may later request payment before leaving state service. This is permissible, but again, the lump sum payment must be made based on the salary of the position in which leave was last earned. CalHR approval of the salary rate for the lump sum payment must be obtained by following the above procedures. Once the approved salary rate is received from CalHR, the department can process the reinstatement and separation PAR documents as indicated above.

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Exempt Pay Differentials

Exempt Pay Differential***CalPERS Administrative Incentive Award*****Title of class:** Chief Executive Officer**Class Code:** 4278**CB/ID:** E99**Effective date:** July 1, 1998 (Payable in each following Fiscal Year)

Revised: July 1, 2004

Rate: 0-40% of base salary***Criteria:***

Payable once a year upon certification to the State Controller's Office¹¹ by the President of the Board of Administration of the California Public Employees Retirement System that the procedures in the "Compensation Policies and Procedures for Exempt Positions", as initially adopted November 1997, or as may be subsequently amended by the Board of Administration, have been followed, and the amount specified for each individual has been approved by this Board.

If applicable, should pay differential be:

Pro-rated:No

Flat rate:Yes

Subject to qualifying pay period:No

Are all time bases and tenures are eligible?No

Subject to PERS deduction:No

Inclusion in rate to calculate the following benefit pay:

OvertimeNo

IDLNo

EIDLNo

NDINo

Lump Sum:

Vacation/Annual LeaveNo

Sick LeaveNo

Extra Hours.....No

Other:

¹ A copy will be forwarded to the Department of Human Resources.

Exempt Pay Differential***Site Superintendent R & R Differential***

Title of class: Site Superintendent, California School for the Deaf
Class Code: 8742
CB/ID: M03

Effective date: July 1, 1998
Revised: July 1, 2000
Rate: \$250, \$500, \$750, \$1000, \$1250, \$1500 per pay period

Criteria:

Employees appointed to exempt positions performing the duties of a Site Superintendent at the California School for the Deaf will be eligible for this rate differential upon certification by the department that the following criteria are met:

If applicable, should pay differential be:

Pro-rated:No
Subject to qualifying pay period:Yes
Are all time bases and tenures are eligible?No
Subject to PERS deduction:No

Inclusion in rate to calculate the following benefit pay:

OvertimeNo
IDLNo
EIDLNo
NDINo

Lump Sum:

Vacation/Annual LeaveNo
Sick LeaveNo
Extra Hours.....No
Other:

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Exempt Pay Differential

Staff at the Special Schools

Name of Differential: Recruitment and Retention – Department of Education State Special Schools and Diagnostic Centers

List of Class Codes, Department Codes, Class Titles, and CB/IDs:

9149	NE05	SUBSTITUTE TEACHER, SCHOOL FOR THE BLIND	R03
9151	NE05	TEACHER, SCHOOL FOR THE BLIND	R03
9153	NE05	TEACHER SPECIALIST, SCHOOL FOR THE BLIND	R03
9154	NE05	SUPERVISING TEACHER I, SCHOOL FOR THE BLIND	S03
9170	NE05	SUPERVISING TEACHER II, SCHOOL FOR THE BLIND	S03
9173	NE05	SUPERVISING TEACHER III, SCHOOL FOR THE BLIND	S03
9174	NE05	ASSISTANT SITE SUPERINTENDENT, SCHOOL FOR THE BLIND	M03
9176	NE05	SITE SUPERINTENDENT, SCHOOL FOR THE BLIND	M03
9731	NE05	SUPERVISING TEACHER I, SCHOOL FOR THE BLIND, FISCAL YEAR	S03
9732	NE05	SUPERVISING TEACHER II, SCHOOL FOR THE BLIND, FISCAL YEAR	S03
9145	NE05	SUPERVISING TEACHER III, SCHOOL FOR THE BLIND, FISCAL YEAR	S03
9178	NE10	SUBSTITUTE TEACHER, SCHOOL FOR THE DEAF	R03
9180	NE10	TEACHER, SCHOOL FOR THE DEAF	R03
9191	NE10	TEACHER SPECIALIST, SCHOOL FOR THE DEAF	R03
9192	NE10	SUPERVISING TEACHER I, SCHOOL FOR THE DEAF	S03
9193	NE10	SUPERVISING TEACHER II, SCHOOL FOR THE DEAF	S03
9195	NE10	SUPERVISING TEACHER III, SCHOOL FOR THE DEAF	S03
9196	NE10	ASSISTANT SITE SUPERINTENDENT, SCHOOL FOR THE DEAF	M03
9199	NE10	SITE SUPERINTENDENT, SCHOOL FOR THE DEAF	M03
9733	NE10	SUPERVISING TEACHER I, SCHOOL FOR THE DEAF, FISCAL YEAR	S03
9734	NE10	SUPERVISING TEACHER II, SCHOOL FOR THE DEAF, FISCAL YEAR	S03
9146	NE10	SUPERVISING TEACHER III, SCHOOL FOR THE DEAF, FISCAL YEAR	S03
9200	NE15	TEACHER SPECIALIST, DIAGNOSTIC CENTER	R03
9202	NE15	SUPERVISING TEACHER, DIAGNOSTIC CENTER	S03
9203	NE15	DIAGNOSTIC CENTER DIRECTOR	M03

Effective date: January 1, 2002 (Replaces prior Pay Differential effective August 1, 1999 and revised August 1, 2000.)

Locations: California School for the Blind – Fremont
California School for the Deaf – Fremont
Diagnostic Center – North (Fremont)

Rate: \$700/month or \$32.31/day

Earnings ID: 8k67

Locations: All other special schools of the Department of Education

Rate: \$400/month or \$18.46/day

Earnings ID: 8k24

Criteria:

1. All employees in the above classes at the Department of Education Special Schools or Diagnostic Centers shall receive the appropriate differential for their primary appointment only. Part-time employees shall receive a pro rata share of the differential based on their time base. Intermittent employees shall receive the daily rate.

2. Full-time and part-time employees receiving additional appointments to teach summer school sessions shall not be eligible to receive a second differential.

If applicable, should pay differential be:

Pro-rated:No

Subject to qualifying pay period:No

Are all time bases and tenures are eligible?Yes

Subject to PERS deduction:Yes

Inclusion in rate to calculate the following benefit pay:

OvertimeNo

IDLNo

EIDLYes

NDINo

Lump Sum:

Vacation/Annual LeaveNo

Sick LeaveNo

Extra Hours.....No

Other:

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Exempt Pay Differential

Title:

Basic Allowance for Housing (BAH)

Effective: March 1, 1998

Military Department

CBID, Class (rank) and Class Code:

Officers			Warrant Officers			Enlisted		
CBID	Class	Class Code	CBID	Class	Class Code	CBID	Class	Class Code
E99	O10	9156	E97	W5	8365	E97	E9	7746
E99	O9	9157	E97	W4	8366	E97	E8	7747
E99	O8	9158	E97	W3	8367	E97	E7	7748
E99	O7	9159	E97	W2	8368	E97	E6	7749
E99	O6	9160	E97	W1	8369	E97	E5	7750
E99	O5	9161				E97	E4	7751
E99	O5A	9162				E97	E3	7752
E98	O4	9163				E97	E2	7753
E98	O4A	9164				E97	E1	7754
E97	O3	9166						
E97	O2	9167						
E97	O1	9168						

Rate:

In accordance with the Federal Schedule for BAH

Criteria:

Employees in the above classes are eligible for BAH.

Subject to PERS Deduction:

Yes

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Exempt Pay Differential

Title:

Basic Allowance for Subsistence (BAS)

Effective: March 1, 1998

Military Department

CB/ID and Classes:

Officers			Warrant Officers			Enlisted		
CBID	Class	Class Code	CBID	Class	Class Code	CBID	Class	Class Code
E99	O10	9156	E97	W5	8365	E97	E9	7746
E99	O9	9157	E97	W4	8366	E97	E8	7747
E99	O8	9158	E97	W3	8367	E97	E7	7748
E99	O7	9159	E97	W2	8368	E97	E6	7749
E99	O6	9160	E97	W1	8369	E97	E5	7750
E99	O5	9161				E97	E4	7751
E99	O5A	9162				E97	E3	7752
E98	O4	9163				E97	E2	7753
E98	O4A	9164				E97	E1	7754
E97	O3	9166						
E97	O2	9167						
E97	O1	9168						

Rate:

In accordance with the Federal Schedule for BAS (See the [Defense Finance and Accounting Service](#) website).

Criteria:

Employees in the above classes are eligible for BAS.

Subject to PERS Deduction:

Yes

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Exempt Pay Differential

Title:

ConUS COLA

Effective: July 1, 2001

Military Department

CBID and Class (rank):

Officers			Warrant Officers			Enlisted		
CBID	Class	Class Code	CBID	Class	Class Code	CBID	Class	Class Code
E99	O10	9156	E97	W5	8365	E97	E9	7746
E99	O9	9157	E97	W4	8366	E97	E8	7747
E99	O8	9158	E97	W3	8367	E97	E7	7748
E99	O7	9159	E97	W2	8368	E97	E6	7749
E99	O6	9160	E97	W1	8369	E97	E5	7750
E99	O5	9161				E97	E4	7751
E99	O5A	9162				E97	E3	7752
E98	O4	9163				E97	E2	7753
E98	O4A	9164				E97	E1	7754
E97	O3	9166						
E97	O2	9167						
E97	O1	9168						

Rate:

In accordance with the Federal Schedule for ConUS COLA

Criteria:

Employees in the above classes are eligible for the ConUS COLA.

Subject to PERS Deduction:

Yes

Subject to Withholding:

Yes

Processing:

The department should process F671 transactions using Payment Type A Suffix D and enter the gross amount.

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Exempt Pay Differential

Physical Fitness Incentive Pay

Effective: July 1, 2002

Revised: June 1, 2016

Class Title: Exempt Peace Officers who are in the Peace Officer/Firefighter retirement category (except Department Directors).

CB/ID: E99

Departments:

Office of the Inspector General

Rate:

- | | |
|-------------------------|--|
| 1. \$130 per pay period | Earnings ID: 8PF1 (Full-time, Part-time) |
| | Earnings ID: 8PF2 (Intermittent) |
| 2. \$65 per pay period | Earnings ID: 8PF3 (Full-time, Part-time) |
| | Earnings ID: 8PF4 (Intermittent) |

Criteria:

- Effective 07/01/02, eligible employees as defined above must have 60 or more qualifying pay periods of State service and have an annual physician's certification of having passed the physical fitness exam.
- Effective 07/01/02, eligible employees as defined above with less than 60 qualifying pay periods of State service must have an annual physician's certification of having passed the annual physical fitness exam.

If Applicable, Should Pay Differential Be:

Pro-rated

-Full time/part time.....Yes

-IntermittentNo

Subject to qualifying pay periodNo

All time bases and tenure eligibleYes

Subject to PERS deductionNo

Inclusion in Rate to Calculate the Following Benefit Pay:

OvertimeNo/Yes (FLSA)

IDLYes

EIDLYes

NDIYes

Lump sum:

VacationNo

Sick LeaveNo

Extra hoursNo

Exempt Pay Differential***Voluntary Personal Leave Program*****Effective:** July 1, 2004**Revised:** August 17, 2004 (Effective July 1, 2004)**Class Title:** All CalHR exempt excluded classes (Class Type F) with a CBID of E79, E97, E98 or E99 except those that do not receive paid leave per Government Code Section 19857.**All Departments****Rate:** Minus 4.62% (1 day) Earnings ID – 8VL1
Minus 9.23% (2 days) Earnings ID – 8VL2***Criteria:***

All employees participating in the Voluntary Personal Leave Program shall have their salary reduced by the above rates and shall accrue a personal leave day or two (or a portion if working less than full-time) the first of the following pay period.

If Applicable, Should Pay Differential Be:

Pro-rated
-Permanent Full-time OnlyYes
-Part-time/IntermittentNo
Subject to qualifying pay periodNo
All time bases and tenure eligibleNo
Subject to PERS deductionNA

Inclusion in Rate to Calculate the Following Benefit Pay

OvertimeNo
IDLNo
EIDLNo
NDINo

Lump sum:

VacationNo
Sick LeaveNo
Extra Hours.....No

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Exempt Pay Differential

DAA Retention Pay

Effective: July 1, 2004

Revised: July 1, 2005, October 1, 2007, January 1, 2014

Department: Food and Agriculture

Class Title: Secretary-Manager VII, 22nd District – Del Mar Fair
 Secretary-Manager VII, 32nd District – Orange County
 Secretary-Manager V, 50th Division – Lancaster Fair

Rate: Up to 20%

Earnings ID: SL

Class Title: Secretary-Manager V, 1a District – Cow Palace

Rate: Up to 15%

Earnings ID: SL

Criteria:

Effective July 1, 2004, the Boards of the 22nd District Agricultural Associations may grant by resolution, a retention differential to its own respective Secretary-Manager VII when it determines that the incumbent has achieved expected performance objectives and that such a differential is necessary for retention purposes.

Effective July 1, 2005, the Boards of the 32nd District Agricultural Associations may grant by resolution, a retention differential to its own respective Secretary-Manager VII when it determines that the incumbent has achieved expected performance objectives and that such a differential is necessary for retention purposes.

Effective October 1, 2007, the Boards of the 50th Division District Agricultural Associations may grant by resolution, a retention differential to its own respective Secretary-Manager V when it determines that the incumbent has achieved expected performance objectives and that such a differential is necessary for retention purposes.

Effective January 1, 2014, the Boards of the 1a District Agricultural Associations may grant by resolution, a retention differential to its own respective Secretary-Manager V when it determines that the incumbent has achieved expected performance objectives and that such a differential is necessary for retention purposes.

If Applicable, Should Pay Differential Be:

Pro-rated

-Full time/part time.....Yes

-IntermittentN/A

Subject to qualifying pay periodNo

All time bases and tenure eligibleYes

Subject to PERS deductionYes

Inclusion in Rate to Calculate the Following Benefit Pay

OvertimeN/A

IDLYes

EIDLYes

NDIYes

Lump sum

VacationYes

Sick LeaveYes

Extra Hours.....Yes

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Exempt Pay Differential

Tutoring & Mentoring Stipend, Unit 03

Effective: 01/11/2006

Revised: 01/18/2007

?This stipend expires June 1, 2007. ?

Departments: Education; School for the Deaf, Fremont and Riverside

Class Titles , Class Codes and CB/ID:

Teachers, School for the Deaf	9180	R03
Teacher Specialist, School for the Deaf	9191	R03
Supervising Teacher I, School for the Deaf	9192	S03
Supervising Teacher II, School for the Deaf	9193	S03
Supervising Teacher III, School for the Deaf	9195	S03

Earnings ID: G2

Rate: \$1,300 for 15 weeks, or no less than \$87.00 per week.

Criteria

- Incumbents in the classes above who volunteer to tutor, mentor, and instruct students in jeopardy of successfully completing the February 2007 or May 2007 California High School Exit Exam shall receive this stipend. This stipend will be full and complete compensation for the after-normal-work hours work for up to 60 hours (no more than 4 hours per week can be mandated) of such instruction in preparation for the examinations. The stipend shall be paid upon completion of the tutoring, mentoring, and instructing of these students.
- Teachers/Teacher Specialists who are selected and who subsequently perform for less than the entire duration of the assignment shall receive the stipend on a pro rata basis.
- The specific schedule shall be established by the school administrator and may be altered by agreement between the Teacher/Teacher Specialist and the immediate supervisor.

If Applicable, Should Pay Differential Be:

Pro-ratedSee above

Subject to qualifying pay periodNo

All time bases and tenure eligibleYes

Subject to PERS deductionNo

Inclusion in Rate to Calculate the Following Benefit Pay:

OvertimeNo

IDLNo

EIDLNo

NDINo

Lump sum:

VacationNo

Sick LeaveNo

Extra Hours.....No

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Exempt Pay Differential**Department of Corrections and Rehabilitation*****CDCR Compaction and Retention*****Title of class:** Exempt Appointees in the Department of Corrections and Rehabilitation**Class Code:** Various**CB/ID:** E99**Effective Date:** January 31, 2007

Rates and Earning IDs:

0.5 % of Monthly Salary	8005
1.0 % of Monthly Salary	8010
2.0 % of Monthly Salary	8020
3.0 % of Monthly Salary	8030
4.0 % of Monthly Salary	8040
5.0 % of Monthly Salary	8050
6.0 % of Monthly Salary	8060
7.0 % of Monthly Salary	8070
8.0 % of Monthly Salary	8080
9.0 % of Monthly Salary	8090
10.0 % of Monthly Salary	8100
11.0 % of Monthly Salary	8110
12.0 % of Monthly Salary	8120
13.0 % of Monthly Salary	8130
14.0 % of Monthly Salary	8140
15.0 % of Monthly Salary	8150

Pro-rated:Yes

Flat rate:No

Subject to qualifying pay period:No

Subject to PERS deduction:No

Please indicate if all time bases and tenures are eligible: Yes

Inclusion in rate to calculate the following benefit pay:

OvertimeN/A

IDLYes

EIDLYes, if applicable

NDINo

Lump Sum:

Vacation/Annual LeaveNo

Sick LeaveNo

Extra Hours.....No

Other:

Return to: [Table of Contents](#).

Exempt Pay Differential

CalPERS Recruitment Differential

Title of class Chief Executive Officer

Class Code 4278

CB/ID E99

Effective Date: August 18, 2004

Earnings ID: GC

Rate: Up to 60% of the first year's annual base salary

Criteria:

This is a recruitment differential for purposes of attracting and retaining high level executives in the above-named classification. It is a one-time, up-front payment made upon appointment to the classification. It is available only to those hired from outside State service. The amount of the differential in each case will be specific to the individual executive's personal circumstances.

The Board of Administration, upon recommendation of the Performance and Compensation Committee, will approve the differential based on the individual candidate's personal circumstances, not to exceed 60 percent of the new hire's first year's base salary.

Repayment of part or all of the differential will be required in the event the Chief Executive Officer does not continue employment with CalPERS for two years, based upon the following prorated schedule:

0-less than 12 months	100 percent payback
12-24 months	50 percent payback

Any exception to the repayment schedule requires the approval of the Board of Administration, upon the recommendation of the Performance and Compensation Committee.

If applicable, should pay differential be:

Pro-rated:No

Flat rate:Ye

Subject to qualifying pay period:No

Are all time bases and tenures are eligible?.....No

Subject to PERS deduction:No

Inclusion in rate to calculate the following benefit pay:

OvertimeNo

IDLNo

EIDLNo

NDINo

Lump Sum:

Vacation/Annual LeaveNo

Sick LeaveNo

Extra Hours.....No

Other:

Return to: [Table of Contents](#).

Exempt Pay Differential***State Compensation Insurance Fund Recruitment Differential***

Title of class: President of the State Compensation Insurance Fund
Class Code: 9295
CB/ID E99
Effective Date: August 1, 2007
Earnings ID: 9K
Rate: Up to 60% of the First Year's Annual Base Salary

Criteria:

This differential is intended to be a onetime up-front payment made upon appointment, pursuant to the provisions of Insurance Code section 11785 which authorizes the State Compensation Insurance Fund (SCIF) Board to fix the compensation for the President. The differential would be available only to a President hired from outside State Service. The amount of the differential would be specific to the executive's personal circumstances, and would be designed as an incentive to accept a job offer at a salary and incentive award schedule. In no case would this pay differential exceed 60% of the new hire's first year's annual base salary. Each differential would require the approval of the Board. Repayment of part or the entire differential would be required in the event the executive does not continue employment with SCIF for two years, based upon the following prorated schedule:

- 100 percent if employed less than 6 months
- 75 percent if employed 6 months but less than 12 months
- 50 percent if employed 12 months but less than 18 months
- 25 percent if employed 18 months but less than 2 years

Any exceptions to the repayment schedule require the approval of the SCIF Board and are to be determined on a case by case basis.

If applicable, should pay differential be:

Pro-rated:No
Flat rate:Yes
Subject to qualifying pay period:No
Are all time bases and tenures are eligible?No
Subject to PERS deduction:No

Inclusion in rate to calculate the following benefit pay:

OvertimeNo
IDLNo
EIDLNo
NDINo

Lump Sum:

Vacation/Annual LeaveNo
Sick LeaveNo
Extra Hours.....No
Other:

Return to: [Table of Contents](#).

Exempt Pay Differential***Performance Recognition Pay******California State Teachers' Retirement System (CalSTRS)*****Class Title:** Chief Executive Officer, CalSTRS**Class Code:** 4256**CB/ID:** E99**Rate:** 80% of Annual Base Salary**Earnings ID:** 98**Established:** July 1, 2007***Criteria:***

Employees who have been designated in Education Code Section 22212.5 and who have been evaluated in accordance with the Teachers' Retirement Board Compensation Policies and Procedures for Chief Executive Officer. The employee shall receive the performance recognition pay once each fiscal year, based on performance during the preceding fiscal year.

If applicable, should pay differential be:

Pro-Rated:

Full-time/part-time:Yes

Intermittent:N/A

Flat Rate:No

Subject to qualifying pay period:No

All time bases and tenures eligible:Yes

Subject to PERS deduction:.....No

Inclusion in rate to calculate the following benefit pay:

OvertimeN/A

IDLYes

EIDLN/A

NDINo

Lump sum:

VacationNo

Sick leave.....No

Extra Hours.....No

Exempt Pay Differential

State Compensation Insurance Fund Recruitment and Retention

Title of class

Exempt Appointees in the following classes:

President, State Compensation Insurance Fund (SCIF)	9295	E99
Chief Financial Officer, SCIF	9727	E99
Chief Operating Officer, SCIF	9725	E99
Chief Information Officer, SCIF	9728	E99
Chief Risk Officer, SCIF	9726	E99
General Counsel, SCIF	9730	E99
Chief Investment Officer, SCIF	9775	E99
Chief Claims Operations Officer, SCIF	6383	E99
Chief of Internal Affairs, SCIF	6399	E99
Chief Medical Officer, SCIF	6388	E99
Chief Actuarial Officer, SCIF	6497	E99

Effective Date: September 29, 2008

Revised date: February 23, 2009

August 2, 2010

December 12, 2013

Rate and Earnings ID:

0.4% of Monthly Salary	8N04
0.5 % of Monthly Salary	8N05
1.0% of Monthly Salary	8N1
2.0% of Monthly Salary	8N2
3.0% of Monthly Salary	8N3
4.0% of Monthly Salary	8N4
5.0% of Monthly Salary	8N5
6.0% of Monthly Salary	8N6
7.0% of Monthly Salary	8N7
8.0% of Monthly Salary	8N8
9.0% of Monthly Salary	8N9
10.0% of Monthly Salary	8N10
11.0% of Monthly Salary	8N11
12.0% of Monthly Salary	8N12
13.0% of Monthly Salary	8N13
14.0% of Monthly Salary	8N14
15.0% of Monthly Salary	8N15

Criteria:

At the discretion of the State Compensation Fund (SCIF) Board of Directors', exempt appointees may be granted a combination of the percentage rates listed above pursuant to the following Criteria

- This Pay Differential shall be used by SCIF as a recruitment and retention tool to attract and retain executive talent.
- This Pay Differential shall be available only to Exempt Appointees to the above named positions.
- The amount of the Pay Differential will be specific to each individual Exempt Appointee's personal circumstances and shall be designed and approved by the State Fund Board of Directors.
- This Pay Differential shall not exceed 25% of the Exempt Appointee's monthly base salary rate.
- Each differential shall require approval of the State Fund Board of Directors.
- At the discretion of the State Fund Board of Directors, this Pay Differential shall continue until the Exempt Appointee transfers to a position not eligible for the Pay Differential.

If applicable, should pay differential be:

Pro-rated:Yes

Flat rate:No

Subject to qualifying pay period:No

Are all time bases and tenures are eligible?.....Yes

Subject to PERS deduction:No

Inclusion in rate to calculate the following benefit pay:

OvertimeNo

IDLNo

EIDLNo

NDINo

Lump Sum:

Vacation/Annual LeaveNo

Sick LeaveNo

Extra Hours.....No

Other:N/A

Return to: [Table of Contents](#).

Exempt Pay Differential

State Compensation Insurance Fund Bonus Program

Class Title, Class Code and CB/ID

Exempt Appointees in the following classes:

President, State Compensation Insurance Fund	9295	E99
Chief Financial Officer, State Compensation Insurance Fund	9727	E99
Chief Information Officer, State Compensation Insurance Fund	9728	E99
Chief Investment Officer, State Compensation Insurance Fund	9775	E99
Chief Operating Officer, State Compensation Insurance Fund	9725	E99
Chief Risk Officer, State Compensation Insurance Fund	9726	E99
General Counsel, State Compensation Insurance Fund	9730	E99
Chief Claims Operations Officer, SCIF	6383	E99
Chief of Internal Affairs, SCIF	6399	E99
Chief Medical Officer, SCIF	6388	E99
Chief Actuarial Officer, SCIF	6497	E99

Effective date: January 1, 2009, (Payable in each following Fiscal Year)

Revised date: December 12, 2013

Rate: 0 – 40 % of base salary

Earnings IDs: 9M

Criteria:

At the discretion of the State Compensation Insurance Fund Board of Directors', exempt appointees may be granted a Bonus in the amount specified by the Board up to the maximum above pursuant to the following Criteria

1. This differential will be available only to exempt appointees to the above named positions.
2. The amount of the bonus will be specific to each individual executive's personal circumstances and designed as a bonus for performance against pre-established goals.
3. Each bonus will require approval of the State Fund Board of Directors.

If applicable, should pay differential be:

Pro-rated:No

Flat rate:No

Subject to qualifying pay period:No

Are all time bases and tenures are eligible:Yes

Subject to PERS deduction:No

Inclusion in rate to calculate the following benefit pay:

OvertimeNo

IDLNo

EIDLNo

NDINo

Lump Sum:

Vacation/Annual LeaveNo

Sick LeaveNo
Extra Hours.....No
Other:N/A

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Exempt Pay Differential

High Speed Rail Recruitment Differential (Program Manager)

Class Title: Chief Program Manager, High Speed Rail Authority
Class Code 6155
CB/ID E99
Effective date: December 3, 2012
Earnings ID: 9K2
Rate: Up to 5.5% of the First Year's Annual Base Salary

Criteria:

This is a recruitment differential for the purposes of attracting and retaining high level executive's in the above-named classification. It is a one-time, up-front payment made upon appointment to the classification. It is available only to those hired from outside State service. The amount of the differential in each case will be specific to the individual executive's personal circumstances.

The Authority will approve the differential based on the individual candidate's personal circumstances.

Repayment of part or all of the differential will be required in the event the Chief Program Manager does not continue employment with the High Speed Rail Authority for two years, based upon the following prorated schedule.

0-less than 12 months	100 percent payback
12-24 months	50 percent payback

If applicable, should pay differential be:

Pro-rated:Yes
 Flat rate:No
 Subject to qualifying pay period:No
 Are all time bases and tenures are eligible:No
 Subject to PERS deduction:No

Inclusion in rate to calculate the following benefit pay:

OvertimeNo
 IDLNo
 EIDLNo
 NDINo

Lump Sum:

Vacation/Annual LeaveNo
 Sick LeaveNo
 Extra Hours.....No
 Other:No

Departments can key a 671 transaction via the Payroll Input Process (PIP) system using Earnings ID 9K2, if applicable.

Exempt Pay Differential***High Speed Rail Recruitment Differential (Executive Director)***

Title of class Executive Director, High Speed Rail Authority
Class Code: 9568
CB/ID: E99
Effective date: June 18, 2012
Earnings ID: 9K3
Rate: \$25,000 at the end of the first and second year of service.

Criteria:

This is a recruitment differential for purposes of attracting and retaining high level executives in the above-named classification. It is a one-time payment equal to \$25,000 made at the end of the first year of service if certain performance metrics are achieved to the satisfaction of the Authority by the deadlines proposed.

An additional one-time payment equal to \$25,000 will be made at the end of the second year of service if performance metrics, later to be determined by the Authority, are achieved to the satisfaction of the Authority. Both payments are subject to the 5% salary reduction currently imposed by the State Administration and Legislature and is inclusive of any future reductions proposed by the State Administration or Legislature

If applicable, should pay differential be:

Pro-rated:No
Flat rate:Yes
Subject to qualifying pay period:No
Are all time bases and tenures are eligible?No
Subject to PERS deduction:No

Inclusion in rate to calculate the following benefit pay:

OvertimeNo
IDLNo
EIDLNo
NDINo

Lump Sum:

Vacation/Annual LeaveNo
Sick LeaveNo
Extra Hours.....No
Other

Departments can key a 671 transaction via the Payroll Input Process (PIP) system using Earnings ID 9K3, if applicable.

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Exempt Pay Differential

Covered California

Administrative Incentive Award

Title of class: Executive Director
Class Code: 9856
CB/ID: E99
Earnings ID: 9I1
Effective date: June 1, 2014 (Payable in each following Fiscal Year)
July 1, 2016 (Inactive)

Rate: 0-40% of base salary

Criteria:

Payable once a year upon certification to the State Controller's Office by the Covered California five-member board, and the amount specified for each individual has been approved by this board.

*Per Government Code 100503, the Board has salary setting authority over this Exempt position.

If applicable, should pay differential be:

Pro-ratedNo
 Flat RateYes
 Subject to qualifying pay periodNo
 All time bases and tenures eligibleNo
 Subject to PERS deductionNo

Inclusion in rate to calculate the following benefit pay:

OvertimeNo
 IDLNo
 EIDLNo
 NDINo

Lump Sum:

Vacation/Annual LeaveNo
 Sick LeaveNo
 Extra Hours.....No

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Exempt Pay Differential

Covered California Recruitment

Title of class	Class Code	CB/ID	Earnings ID
Director, Individual and Small Business Sales	6045	E99	
Chief Technology Officer	6059	E99	
Chief Financial Officer	6063	E99	
Information Technology, Project Director	6075	E99	
Chief Deputy Executive Director, Operations	6157	E99	
Director of Marketing	6500	E99	9K4
Director, Plan Management	6572	E99	
Executive Director	9856	E99	
Chief Deputy Executive Director	9898	E99	
General Counsel	9937	E99	
Communications and Public Relations, Director	9938	E99	

Effective date: May 1, 2015

Rate: Up to 60% of First Year's Annual Base Salary

Criteria:

This is a recruitment differential for purposes of attracting and retaining high level executives in the above named classifications.

It is a one-time, up-front payment made upon appointment to an eligible classification. It is available only to those hired from outside State Service. The amount of the differential in each case would be specific to the individual executive's personal circumstances.

- For all classifications, the Board will approve the differential based on the individual's personal circumstances, not to exceed 60 percent of the new hire's first year's base salary.
- For all classifications, repayment of part or all of the differential would be required in the event the executive does not continue employment with HBEX/CC for two years, based upon the following prorated schedule:
 - 0 to less than 12 months 100 percent payback
 - 12 to 24 months 50 percent payback

*Per Government Code 100503, the Board has salary setting authority over this Exempt position.

If applicable, should pay differential be:

Pro-RatedNo
Flat RateYes
Subject to qualifying pay periodNo
All time bases and tenures eligibleNo
Subject to PERS deductionNo

Inclusion in rate to calculate the following benefit pay:

OvertimeNo
IDLNo
EIDLNo
NDINo

Lump Sum:

Vacation/Annual LeaveNo
Sick LeaveNo
Extra Hours.....No

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Explanatory Notes

In the following pay scale section of the salary schedule, classes are listed in a schematic arrangement to show departmental/agency groupings. Each exempt position has been assigned a schematic code consisting of two letters and two digits that immediately precede the class code. The schematic code is used to organize classes by agency and department in the pay scales.

Each exempt position has also been assigned a four digit class code number that immediately precedes the class title. This number is used for payroll and transaction purposes.

Title

Each exempt position is assigned a title. More than one department may have a class with the same title, but each class will have a different class and schematic code.

Entitlement

The California Legal Code Section that authorizes the exempt position. Please be sure to notify Department of Human Resources if an entitlement changes, as this affects the employee's appointment papers and may delay processing by State Controller's Office.

Compensation

The rate of pay assigned to that position. Unless otherwise specified, all rates of pay are quoted in dollars per month and are for fulltime employment.

Exempt Levels

The standard exempt levels with monthly and annual salary rates are listed in the [Exempt Salary Chart](#).

Work Week Group

"WWG" is the abbreviation for workweek group. The definitions of the workweek groups to which positions are assigned appear in the Workweek Group Definition Section of the Pay Scale.

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Collective Bargaining Identifier

“CBID” is the abbreviation for Collective Bargaining Identifier. All classes with a CBID beginning with "E" are excluded from collective bargaining. They receive benefits equivalent to the following categories:

- E99 Management
- E98 Supervisory
- E97 Confidential
- E79 Non-supervisory management
- E Not eligible for benefits

Salary Steps

Exempt classes with salary ranges no longer have predefined steps. New employees normally will be hired at the minimum salary of the class and will be eligible for a 5% increase on their anniversary date. The State Controller's Office will automatically compute the increase at 5% above the current salary. State agencies may wish to refer to the Universal Salary Schedule found in the Civil Service Pay Scales. Requests to hire above the minimum salary rate must be approved in advance by the Governor's Office using the Exempt Position Request (EPR) and forwarded to the Department of Human Resources.

Exempt authority

Authority for all appointments is found in the Constitution, Article VII, Section 4. The following are the authority explanations (lettering coincides with that of the Constitution):

- (a) Legislative officers and employees.
- (b) Judicial Branch officers and employees.
- (c) Elected officials plus a deputy and an employee selected by each elected officer.
- (d) Members of boards and commissions.
- (e) A deputy or employee selected by each board or commission.
- (f) State officers appointed by the Governor or the Lieutenant Governor.
- (g) A deputy or employee selected by each officer under Section 4(f).
- (h) University of California and California State College officers and employees.
- (i) Teaching staff of schools under Department of Education — or Superintendent of Public Instruction Jurisdiction.
- (j) Member, inmate, and patient help in State homes, charitable or correctional institutions, and State facilities for mentally ill or retarded persons.
- (k) Members of the militia while engaged in military service.
- (l) District agricultural association officers and employees, employed less than six months in a calendar year.

(m) In addition, the Attorney General may appoint or employ six deputies or employees, the Public Utilities Commission may appoint or employ one deputy or employee, and the Legislative Council may appoint or employ two deputies or employees.

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Footnote Key

- S1 Statutory salary (annual salary set by statute).
- S2 Statutory salary with specified limitations.
- S4 Not eligible for general salary increases.
- S5 Elected Constitutional State Officer for whom salary and benefits are established by the California Citizens Compensation Commission.
- S6 Salary based (in law) on another salary set in statute as follows:
1. SP00/8409 - Adjutant General, Military Department—limited by §5308 of Title V, U.S. Code to Level V of the Executive Schedule. Same pay and allowances as Lieutenant General in U.S. Army. (See Chart II).
 2. SP00/8844Apr – The Assistant Adjutant General, Military Department-limited by §5308 of Title V, U.S. Code to Level V of the Executive Schedule. Same pay and allowances as Brigadier General in U.S. Army. (See Chart II).
 3. VJ01/5070 - Member, California Citizens Compensation Commission is tied to Member, Fair Political Practices Commission.
- S8 Statutory positions that earn and use annual leave per GC §19849.16 and CAC 599.752.1.
- E1 Classes excluded from minimum wage coverage under the Fair Labor Standards Act (FLSA).
- E2 Salary rate parallels civil service class.
- E3 Salary rate is determined as provided herein:
6082 - Secretary/Chief Counsel, Unemployment Insurance Appeals Board is tied to Chief Administrative Law Judge, Unemployment Insurance Appeals Board, CEA.
- E4 Salary has a statutorily set maximum per Government Code §12001:
Not to exceed amount specified in Government Code §11550:
5310 Executive Secretary to the Governor
Not to exceed amount specified in Government Code §11552:
5315 Sr. Assistant to the Governor
5314 Assistant to the Governor
5101 Staff Assistant to the Governor
9604 Senior Advisor
- E5 Exempt Class receiving a pay differential or bonus.
- E6 For Summer School rates, apply provisions of Chart II.
- E7 Salary authorized to be established by the appointing power.
LT00/9295 President, State Compensation Insurance Fund, Gov. Code §19825.

	NH00/2909	Director, Postsecondary Education Commission, Education Code § 66905.
	SL00/5744	Legislative Counsel
E8	Exempt appointment under provisions of Government Code §12010.6.	
E9	Positions loaned from the authorized agency to another with the approval of the Governor and under the authority of Government Code §12010.5.	
A1	Positions (in addition to Statutory positions) that do not earn or use vacation, annual leave or sick leave per Government Code § 19857.	
G1	A position no longer funded in its respective department's budget but the entitlement remains in law.	

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Exempts Tied to Statutory Salary Levels

Government Code Section:

The State Auditor

(TA00/9096)

8543.7. (a) The annual salary for the State Auditor shall be equal to that of agency secretaries of the executive branch of government pursuant to [*Government Code*] Section 11550.

(b) The State Auditor shall be repaid all actual expenses incurred or paid by him or her in the discharge of his or her duties.

Business and Professions Code Section:

Director and Members of the California Gambling Control Commission

(SB30/9082, 9085)

19814A. (a) The director and the members of the commission shall receive the salary provided for by Section 11553.5 of the Government Code.

(b) This section shall become operative on the occurrence of one of the events specified in Section 66 of the act that added this section to the Business and Professions Code.

By Agreement between CalHR and a specific agency:

Legal Advisor, PERB

(VT00/1685)

Legal Advisor, PERB, is tied with the civil service class of PER Counsel, OH58/6184.

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HEALTH POLICY & DATA ADVISORY	EV03	MENTAL HEALTH OVERSIGHT AND	EP02
COMMISSION		ACCOUNTABILITY COMM.	
HEALTH PROFESSIONS EDUCATION	EV04	MILITARY DEPARTMENT	SP00
FOUNDATION		MOTOR VEHICLES	CP00
HIGH SPEED RAIL AUTHORITY	CE00	NARCOTICS & DRUG ABUSE, ADV.	SQ00
HIGHWAY PATROL, CALIFORNIA	CJ00	COUNCIL ON	
HORSE RACING BOARD	AJ00	NATIVE AMERICAN HERITAGE	SS00
HOUSING AND COMMUNITY	AD00	COMMISSION	
DEVELOPMENT		NATURAL RESOURCES AGENCY	GA00
HOUSING FINANCE AGENCY	AD50	NATUROPATHIC MEDICINE COMMITTEE	VC01
HUMAN RESOURCES, DEPARTMENT OF	DC00	NEW MOTOR VEHICLE BOARD	CP05
INDEPENDENT CITIZEN'S OVERSIGHT	SR00	OCCUPATIONAL SAFETY & HEALTH, DIV. OF	FD20
COMMITTEE		OCCUPATIONAL THERAPY, BOARD OF	AB40
INDEPENDENT LIVING COUNCIL,	ER00	OCEAN PROTECTION COUNCIL	GA05

Department Name	Code	Department Name	Code
OFFICE OF EMERGENCY SERVICES	PA55	SACRAMENTO-SAN JOAQUIN DELTA CONSERVANCY	GP00
OPTOMETRY, STATE BOARD OF	AB24	SAN DIEGO RIVER CONSERVANCY	GX00
OSHA APPEALS BOARD	FD40	SAN FRANCISCO BAY CONSV. & DEVEL. COMMISSION	GL00
OSHA STANDARDS BOARD	FD45	SAN GABRIEL & LOWER LA RIVERS & MNTS CONSERVANCY	GV00
OSTEOPATHIC MEDICAL BOARD	VC00	SAN JOAQUIN RIVER CONSERVANCY	GK01
P		SANTA MONICA MOUNTAINS CONSERVANCY	XA00
PARKS AND RECREATION	GK00	SCHOLARSHARE INVESTMENT BOARD	XO55
PAROLE HEARINGS, BOARD OF	IP00	SCHOOL FINANCE AUTHORITY, CALIFORNIA	XO15
PEACE OFFICERS STANDARDS & TRAINING, COMM. ON	SB10	SCIENTIFIC ADV. COMMITTEE ON ACID DEPOSITION	HB01
PESTICIDE REGULATION	HE00	SCIENTIFIC REVIEW PANEL ON TOXIC AIR CONTAM	HB02
PHARMACY, CALIFORNIA STATE BOARD OF	AB25	SECRETARY OF STATE, OFFICE OF THE SECURITY & INVESTIGATIVE SERVICES, BUREAU OF	XD00 AB08
PHYSICAL THERAPY BOARD	AB22D	SEISMIC SAFETY COMMISSION	AL00
PHYSICIAN ASSISTANT COMMITTEE	AB22F	SIERRA NEVADA CONSERVANCY BOARD	GY00
PHYSICIANS' PEER COUNSELING PANEL	AB22E	SOCIAL SERVICES	ES00
PLANNING AND RESEARCH, OFFICE OF	PA40	SPEECH-LANGUAGE PATHOLOGY & AUDIOLOGY & HEARING AID DISPENSERS BOARD	AB34
PODIATRIC MEDICINE, CALIFORNIA BOARD OF	AB22G	STATE AND COMMUNITY CORRECTIONS, BOARD OF	IG00
POLLUTION CONTROL FINANCING AUTHORITY, CALIF.	XO25	STATE HOSPITALS	EP00
POLYGRAPH EXAMINERS BOARD	AB35	STATE MANDATES, COMMISSION ON	LQ00
POOLED MONEY INVESTMENT BOARD	XO10	STATE PERSONNEL BOARD	DI00
POSTSECONDARY EDUCATION COMMISSION, CALIFORNIA ¹	NH00	STATE REHABILITATION COUNCIL	EQ03
PRISON INDUSTRY AUTHORITY	ID05	STATUS OF WOMEN, COMMISSION ON	XJ00
PRIVATE POSTSECONDARY EDUCATION, BUREAU FOR	AB38	STRUCTURAL PEST CONTROL BOARD	AB53
PRIVATE SECURITY SERVICES, ADVISORY BD.	AB08B	STUDENT AID COMMISSION	XK00
PROFESSIONAL ENGINEERS & LAND SURVEYORS, AND GEOLOGISTS, BOARD OF	AB28	SUMMER SCHOOL FOR THE ARTS	NE20
PROFESSIONAL FIDUCIARIES BUREAU	AB11	SYSTEMS INTEGRATION, OFFICE OF	EA02
PSYCHOLOGY, BOARD OF	AB37	TAHOE CONSERVANCY, CALIFORNIA	GR00
PUBLIC BROADCASTING COMMISSION, CA ²	-	TAX CREDIT ALLOCATION COMMISSION	XO20
PUBLIC DEFENDER, STATE	VS00	TAX PREPARERS PROGRAM	AB10
PUBLIC EMPLOYEES RETIREMENT SYSTEM	DF00	TEACHER CREDENTIALING, COMMISSION ON	XM00
PUBLIC EMPLOYMENT RELATIONS BOARD	FF00	TEACHERS RETIREMENT SYSTEM, STATE	DG00
PUBLIC HEALTH	EN00	TECHNOLOGY, DEPARTMENT OF	DD00
PUBLIC UTILITIES COMMISSION	VV00	TOXIC SUBSTANCES CONTROL	HF00
QUALITY EDUCATION COMMISSION	NE30	TRAFFIC SAFETY, OFFICE OF	CA03
REAL ESTATE APPRAISERS, BUREAU OF	AB51	TRANSPORTATION	CT00
REAL ESTATE, BUREAU OF	AB50	TRANSPORTATION AGENCY	CA00
REGISTERED NURSING, BOARD OF	AB27	TRANSPORTATION COMMISSION	CD00
REHABILITATION	EQ00	TREASURER, STATE	XO00
RESOURCES, RECYCLING, AND RECOVERY	HH00	UNEMPLOYMENT INSURANCE APPEALS BOARD	FC01
RESPIRATORY CARE BOARD OF CA	AB22I	UNIFORM STATE LAWS, COMMISSION ON	SL05

¹ This commission exists in the statutes but is not funded in the state budget.

² Ibid.

Department Name	Code	Department Name	Code
URBAN WATERFRONT RESTORATION FINANCING AUTH.	XO05	VOCATIONAL REHABILITATION APPEALS BOARD	EQ01
VETERANS AFFAIRS	AV00	VOTING MACHINES & VOTE TABULATION DEVICES, CO	XT00
VETERANS' HOME OF CALIFORNIA	AV01	WATER COUNCIL, CALIFORNIA-WESTERN STATES	GQ00
VETERINARY MEDICAL BOARD	AB32	WATER RESOURCES	GO00
VICTIM COMPENSATION & GOVERNMENT CLAIMS BOARD	DJ00	WATER RESOURCES CONTROL BOARD	HG00
VOCATIONAL EDUC. & TECH. TRG., ADV. COUNCIL	XS00	WORKERS' COMPENSATION, DIVISION OF	FD15
VOCATIONAL NURSING & PSYCHIATRIC TECHNICIANS, BOARD OF	AB33	WORKFORCE INVESTMENT BOARD, CA	FE00

Index by Department Code

<i>Dept. Code</i>	<i>Agency or Department Name</i>	<i>Dept. Code</i>	<i>Agency or Department Name</i>
AA00	BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY	AB38	PRIVATE POSTSECONDARY EDUCATION, BUREAU FOR
AA20	BUILDING STANDARDS COMMISSION, STATE	AB40	OCCUPATIONAL THERAPY, BOARD OF
AB00	CONSUMER AFFAIRS	AB50	REAL ESTATE, BUREAU OF
AB01	ACCOUNTANCY, CALIFORNIA BOARD OF	AB51	REAL ESTATE APPRAISERS, BUREAU OF
AB02	ARCHITECTS BOARD, CALIFORNIA	AB52	BOARD OF CHIROPRACTIC EXAMINERS
AB03	ATHLETIC COMMISSION, STATE	AB53	STRUCTURAL PEST CONTROL BOARD
AB04	AUTOMOTIVE REPAIR, BUREAU OF	AB54	MEDICAL MARIJUANA REGULATION, BUREAU OF
AB06	BEHAVIORAL SCIENCES, BOARD OF	AD00	HOUSING AND COMMUNITY DEVELOPMENT
AB08	SECURITY & INVESTIGATIVE SERVICES, BUREAU OF	AD50	HOUSING FINANCE AGENCY
AB08A	ALARM COMPANY OPERATOR	AF00	BUSINESS OVERSIGHT, DEPARTMENT OF
	DISCIPLINARY REV COMM	AG00	FAIR EMPLOYMENT & HOUSING
AB08B	PRIVATE SECURITY SERVICES, ADVISORY BD.	AG02	FAIR EMPLOYMENT & HOUSING COMMISSION
AB10	TAX PREPARERS PROGRAM	AH00	ALCOHOLIC BEVERAGE CONTROL, DEPARTMENT OF
AB11	PROFESSIONAL FIDUCIARIES BUREAU	AI00	ALCOHOL BEVERAGE CONTROL APPEALS BOARD
AB12	CONTRACTORS' STATE LICENSE BOARD	AJ00	HORSE RACING BOARD
AB14	DENTAL BOARD OF CALIFORNIA	AL00	SEISMIC SAFETY COMMISSION
AB15	EMPLOYMENT AGENCIES, BUREAU OF	AV00	VETERANS AFFAIRS
AB19	GUIDE DOGS FOR THE BLIND, STATE BOARD OF	AV01	VETERANS' HOME OF CALIFORNIA
AB20	ELECTRONIC & APPLIANCE REPAIR, HOME FURNISHINGS & THERMAL INSULATION, BUREAU OF	CA00	TRANSPORTATION AGENCY
AB22	MEDICAL BOARD OF CALIFORNIA	CA03	TRAFFIC SAFETY, OFFICE OF
AB22A	ACUPUNCTURE BOARD	CB00	BOARD OF PILOT COMMISSIONS
AB22B	DIVERSION EVALUATION COMMITTEE	CD00	TRANSPORTATION COMMISSION
AB22D	PHYSICAL THERAPY BOARD	CE00	HIGH SPEED RAIL AUTHORITY
AB22E	PHYSICIANS' PEER COUNSELING PANEL	CJ00	HIGHWAY PATROL, CALIFORNIA
AB22F	PHYSICIAN ASSISTANT COMMITTEE	CP00	MOTOR VEHICLES
AB22G	PODIATRIC MEDICINE, CALIFORNIA BOARD OF	CP05	NEW MOTOR VEHICLE BOARD
AB22I	RESPIRATORY CARE BOARD OF CA	CT00	TRANSPORTATION
AB24	OPTOMETRY, STATE BOARD OF	DA00	GOVERNMENT OPERATIONS AGENCY
AB25	PHARMACY, CALIFORNIA STATE BOARD OF	DB00	GENERAL SERVICES
AB27	REGISTERED NURSING, BOARD OF	DC00	HUMAN RESOURCES, DEPARTMENT OF
AB28	PROFESSIONAL ENGINEERS & LAND SURVEYORS, AND GEOLOGISTS, BOARD OF	DD00	TECHNOLOGY, DEPARTMENT OF
AB30	COURT REPORTERS BOARD OF CA	DE00	ADMINISTRATIVE LAW, OFFICE OF
AB32	VETERINARY MEDICAL BOARD	DF00	PUBLIC EMPLOYEES RETIREMENT SYSTEM
AB33	VOCATIONAL NURSING & PSYCHIATRIC TECHNICIANS, BOARD OF	DG00	TEACHERS RETIREMENT SYSTEM, STATE
AB34	SPEECH-LANGUAGE PATHOLOGY & AUDIOLOGY & HEARING AID DISPENSERS BOARD	DH00	FRANCHISE TAX BOARD
AB35	POLYGRAPH EXAMINERS BOARD	DI00	STATE PERSONNEL BOARD
AB36	BARBERING AND COSMETOLOGY, BUREAU OF	DJ00	VICTIM COMPENSATION & GOVERNMENT CLAIMS BOARD
AB37	PSYCHOLOGY, BOARD OF	EA00	HEALTH AND HUMAN SERVICES AGENCY
		EA02	OFFICE OF SYSTEM INTEGRATION
		EA04	MANAGED RISK MEDICAL INSURANCE BOARD
		EC00	AGING
		EC05	AGING, COMMISSION ON
		ED00	CHILD SUPPORT SERVICES

<i>Dept. Code</i>	<i>Agency or Department Name</i>	<i>Dept. Code</i>	<i>Agency or Department Name</i>
EE00	ALCOHOL AND DRUG PROGRAMS	FD40	OSHA APPEALS BOARD
EF00	COMMUNITY SERVICES AND DEVELOPMENT	FD45	OSHA STANDARDS BOARD
EG00	DEVELOPMENTAL DISABILITIES, COUNCIL ON	FE00	WORKFORCE INVESTMENT BOARD, CA
EG00A	DEVELOPMENTAL DISABILITIES, AREA BOARDS ON	FF00	PUBLIC EMPLOYMENT RELATIONS BOARD
EH00	DISABILITY ACCESS, CALIFORNIA COMMISSION ON	GA00	NATURAL RESOURCES AGENCY
EI00	DEVELOPMENTAL SERVICES	GA01	CONSERVATION CORPS, CALIFORNIA
EJ00	EMERGENCY MEDICAL SERVICES AUTHORITY	GA05	OCEAN PROTECTION COUNCIL
EK00	MANAGED HEALTH CARE, DEPARTMENT OF	GB00	AFRICAN AMERICAN MUSEUM
EM00	HEALTH CARE SERVICES	GD00	COASTAL COMMISSION, CALIFORNIA
EM01	MEDICAL THERAPEUTICS & DRUG ADV. COUNCIL	GE00	COASTAL CONSERVANCY
EM02	CANCER ADVISORY COUNCIL	GF00	COLORADO RIVER BOARD
EN00	PUBLIC HEALTH	GG00	CONSERVATION
EP00	STATE HOSPITALS	GH00	ENERGY COMMISSION
EP02	MENTAL HEALTH OVERSIGHT AND ACCOUNTABILITY COMM.	GI00	FISH AND GAME
EQ00	REHABILITATION	GJ00	FORESTRY AND FIRE PROTECTION & FIRE MARSHAL, STATE
EQ01	VOCATIONAL REHABILITATION APPEALS BOARD	GK00	PARKS AND RECREATION
EQ02	LICENSED BLIND VENDORS, COMMITTEE OF	GK01	SAN JOAQUIN RIVER CONSERVANCY
EQ03	STATE REHABILITATION COUNCIL	GL00	SAN FRANCISCO BAY CONSV. & DEVEL. COMMISSION
ER00	INDEPENDENT LIVING COUNCIL, STATEWIDE	GM00	LANDS COMMISSION, STATE
ES00	SOCIAL SERVICES	GO00	WATER RESOURCES
EV00	HEALTH PLANNING & DEVELOPMENT, OFFICE OF STATEWIDE	GO01	CENTRAL VALLEY FLOOD PROTECTION BOARD
EV01	HEALTH ADVISORY COUNCIL	GP00	SACRAMENTO-SAN JOAQUIN DELTA CONSERVANCY
EV02	HEALTH MANPOWER COMMISSION	GQ00	WATER COUNCIL, CALIFORNIA-WESTERN STATES
EV03	HEALTH POLICY & DATA ADVISORY COMMISSION	GR00	TAHOE CONSERVANCY, CALIFORNIA
EV04	HEALTH PROFESSIONS EDUCATION FOUNDATION	GS00	DELTA PROTECTION COMMISSION
FA00	LABOR & WORKFORCE DEVELOPMENT AGENCY	GT00	COACHELLA VALLEY MOUNTAINS CONSERVANCY
FB00	AGRICULTURAL LABOR RELATIONS BOARD	GU00	BALDWIN HILLS CONSERVANCY
FC00	EMPLOYMENT DEVELOPMENT	GV00	SAN GABRIEL & LOWER LA RIVERS & MNTS CONSERVANCY
FC01	UNEMPLOYMENT INSURANCE APPEALS BOARD	GW00	DELTA STEWARDSHIP COUNCIL
FC02	EMPLOYMENT TRAINING PANEL	GX00	SAN DIEGO RIVER CONSERVANCY
FD00	INDUSTRIAL RELATIONS	GY00	SIERRA NEVADA CONSERVANCY BOARD
FD05	APPRENTICESHIP STANDARDS, DIV. OF	GZ10	CALIFORNIA SCIENCE CENTER
FD10	APPRENTICESHIP COUNCIL	HA00	ENVIRONMENTAL PROTECTION AGENCY
FD15	WORKERS' COMPENSATION, DIVISION OF	HB00	AIR RESOURCES BOARD
FD20	OCCUPATIONAL SAFETY & HEALTH, DIV. OF	HB01	SCIENTIFIC ADV. COMMITTEE ON ACID DEPOSITION
FD25	INDUSTRIAL WELFARE COMMISSION	HB02	SCIENTIFIC REVIEW PANEL ON TOXIC AIR CONTAM
FD30	LABOR STANDARDS ENFORCEMENT, DIVISION OF	HC00	ENVIRONMENTAL HEALTH HAZARD ASSESSMENT, OFFICE
FD35	LABOR STATISTICS & RESEARCH, DIV. OF	HD00	INTEGRATED WASTE MANAGEMENT BD
		HE00	PESTICIDE REGULATION
		HF00	TOXIC SUBSTANCES CONTROL
		HG00	WATER RESOURCES CONTROL BOARD
		HH00	RESOURCES, RECYCLING, AND RECOVERY

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ID00	CORRECTIONS AND REHABILITATION	SB30	GAMBLING CONTROL COMMISSION, CALIFORNIA
ID05	PRISON INDUSTRY AUTHORITY	SD00	LAW REVISION COMMISSION, CALIFORNIA
ID10	JOINT VENTURE POLICY ADVISORY BOARD	SL00	LEGISLATIVE COUNSEL BUREAU
ID30	CORRECTIONAL INDUSTRIES COMMISSION	SL05	UNIFORM STATE LAWS, COMMISSION ON
IG00	STATE AND COMMUNITY CORRECTIONS, BOARD OF	SM00	LIEUTENANT GOVERNOR
IP00	PAROLE HEARINGS, BOARD OF	SM05	ECONOMIC DEVELOPMENT, COMMISSION FOR
IQ00	JUVENILE HEARINGS, BOARD OF	SN00	LOTTERY COMMISSION, CALIFORNIA STATE
	Non-Agency Departments	SP00	MILITARY DEPARTMENT
JC00	ARTS COUNCIL, CALIFORNIA	SQ00	NARCOTICS & DRUG ABUSE, ADV. COUNCIL ON
JP00	CHIROPRACTIC EXAMINERS, BD	SR00	INDEPENDENT CITIZEN'S OVERSIGHT COMMITTEE
KL00	HEALTH BENEFIT EXCHANGE, CALIFORNIA	SS00	NATIVE AMERICAN HERITAGE COMMISSION
LA00	COMMUNITY COLLEGES, CALIFORNIA	TA00	AUDITS, BUREAU OF STATE
LC00	CRIME CONTROL & VIOLENCE, CALIF. COMMISSION	TD00	INSPECTOR GENERAL, OFFICE OF THE
LE00	EXPOSITION AND STATE FAIR, CALIFORNIA	VB00	CALIFORNIA/MEXICO AFFAIRS, OFFICE OF
LG00	FISCAL INFORMATION SYSTEM, CALIFORNIA	VC00	OSTEOPATHIC MEDICAL BOARD
LP00	LITTLE HOOVER COMMISSION	VC01	NATUROPATHIC MEDICINE COMMITTEE
LQ00	STATE MANDATES, COMMISSION ON	VR00	PUBLIC BROADCASTING COMMISSION, CA ¹
LT00	COMPENSATION INSURANCE FUND, STATE	VS00	PUBLIC DEFENDER, STATE
LU00	CONSTITUTION REVISION COMMISSION	VV00	PUBLIC UTILITIES COMMISSION
LV00	CONTROLLER, STATE	XA00	SANTA MONICA MOUNTAINS CONSERVANCY
NA00	DISTRICT AGRICULTURAL ASSOCIATIONS	XD00	SECRETARY OF STATE, OFFICE OF THE
ND50	CHILDREN AND FAMILIES COMMISSION	XJ00	STATUS OF WOMEN, COMMISSION ON
NE00	EDUCATION, DEPARTMENT OF	XK00	STUDENT AID COMMISSION
NE05	EDUCATION, SCHOOL FOR THE BLIND	XM00	TEACHER CREDENTIALING, COMMISSION ON
NE10	EDUCATION, SCHOOL FOR THE DEAF	XN00	CONSUMER POWER & CONSERVATION FINANCING AUTHORITY
NE15	EDUCATION, DIAGNOSTIC CENTERS	XO00	TREASURER, STATE
NE20	SUMMER SCHOOL FOR THE ARTS	XO05	URBAN WATERFRONT RESTORATION FINANCING AUTH.
NE30	QUALITY EDUCATION COMMISSION	XO10	POOLED MONEY INVESTMENT BOARD
NF00	LIBRARY, CALIFORNIA STATE	XO15	SCHOOL FINANCE AUTHORITY, CALIFORNIA
NH00	POSTSECONDARY EDUCATION COMMISSION, CALIFORNIA	XO20	TAX CREDIT ALLOCATION COMMISSION
NL00	EQUALIZATION, BOARD OF	XO25	POLLUTION CONTROL FINANCING AUTHORITY, CALIF.
NN00	FAIR POLITICAL PRACTICES COMMISSION	XO30	HEALTH FACILITIES FINANCING AUTHORITY
NP00	FINANCE	XO35	EDUCATION FACILITIES AUTHORITY, CALIFORNIA
NX00	FOOD AND AGRICULTURE	XO40	ALTERNATIVE ENERGY & ADVANCED TRANSPORTATION FINANCING AUTHORITY, CA
PA00	GOVERNOR'S OFFICE	XO45	LOCAL INVESTMENT ADVISORY BOARD
PA05	MEDICAL ASSISTANCE COMMISSION, CALIFORNIA	XO55	SCHOLARSHARE INVESTMENT BOARD
PA40	PLANNING AND RESEARCH, OFFICE OF	XO60	DEBT ADVISORY COMMISSION,
PA50	GOVERNOR'S OFFICE OF BUSINESS & ECONOMIC DEVELOPMENT		
PA51	FILM COMMISSION, CALIFORNIA		
PA53	INFRASTRUCTURE BANK		
PA55	OFFICE OF EMERGENCY SERVICES		
PC00	CHILD DEVELOPMENT POLICY ADV COMM		
RD00	INSURANCE		
RD10	EARTHQUAKE AUTHORITY, CALIFORNIA		
SB00	JUSTICE		
SB10	PEACE OFFICERS STANDARDS & TRAINING, COMM. ON		

¹ This commission exists in the statutes but is not funded in the state budget.

<i>Dept. Code</i>	<i>Agency or Department Name</i>	<i>Dept. Code</i>	<i>Agency or Department Name</i>
	CALIFORNIA	XS00	VOCATIONAL EDUC. & TECH. TRG., ADV. COUNCIL
XO70	INDUSTRIAL DEVELOPMENT FINANCING ADV. COMMIS.	XT00	VOTING MACHINES & VOTE TABULATION DEVICES, CO
XO80	DEBT LIMIT ALLOCATION COMMITTEE, CALIFORNIA		
XO90	ACHIEVING A BETTER LIFE EXPERIENCE ACT BOARD		

CEA LEVEL GUIDELINES

1) ☐ **Revising a current CEA level.** Current level: _____ Dept. size: _____ Current Org. level _____.

Complete the chart below indicating the size of the department, organizational level, and role of CEA. If the requested level does not agree with the typical guidelines below, complete sections A, B, C, and D.

2) ☐ **Establishing the level for a new CEA.** Complete the chart below indicating the size of the department, organizational level and role of CEA. Complete sections A, B, C, D, and E.

Size of Department (# of PYs)	Level A	Level B	Level C	Position Paid Above Level – CalHR Approval Required	Excluded*
<input type="checkbox"/> Small (up to 800)	<input type="checkbox"/> 2 nd org level or <input type="checkbox"/> 3 rd org level <input type="checkbox"/> SPEC <input type="checkbox"/> SA <input type="checkbox"/> PRJ <input type="checkbox"/> PMR <input type="checkbox"/> DBC <input type="checkbox"/> DDR <input type="checkbox"/> ASSIST	<input type="checkbox"/> 2 nd org level <input type="checkbox"/> DDR <input type="checkbox"/> CDD	<input type="checkbox"/> 1 st org level <input type="checkbox"/> DIR <input type="checkbox"/> CDD	<input type="checkbox"/> Attorney <input type="checkbox"/> Engineer <input type="checkbox"/> Physician <input type="checkbox"/> _____ _____%	1 st org level (AAS, DIR)
<input type="checkbox"/> Medium (801 – 8,000)	<input type="checkbox"/> 3 rd org level or <input type="checkbox"/> 4 th org level <input type="checkbox"/> SPEC <input type="checkbox"/> SA <input type="checkbox"/> PRJ <input type="checkbox"/> PMR <input type="checkbox"/> ASSIST <input type="checkbox"/> DBC	<input type="checkbox"/> 2 nd org level or <input type="checkbox"/> 3 rd org level <input type="checkbox"/> DDR	<input type="checkbox"/> 1 st org level <input type="checkbox"/> CDD	<input type="checkbox"/> Attorney <input type="checkbox"/> Engineer <input type="checkbox"/> Physician <input type="checkbox"/> _____ _____%	1 st org level (AAS, DIR)
<input type="checkbox"/> Large (8,000 – 17,000)	<input type="checkbox"/> 4 th org level <input type="checkbox"/> SPEC <input type="checkbox"/> SA <input type="checkbox"/> PRJ <input type="checkbox"/> PMR <input type="checkbox"/> ASSIST	<input type="checkbox"/> 3 rd org level <input type="checkbox"/> DBC	<input type="checkbox"/> 2 nd org level <input type="checkbox"/> DDR	<input type="checkbox"/> Attorney <input type="checkbox"/> Engineer <input type="checkbox"/> Physician <input type="checkbox"/> _____ _____%	1 st org level (AAS, DIR, CDD)
<input type="checkbox"/> Mega (17,001+)	<input type="checkbox"/> 5 th org level <input type="checkbox"/> SPEC <input type="checkbox"/> SA <input type="checkbox"/> PRJ <input type="checkbox"/> PMR <input type="checkbox"/> ASSIST	<input type="checkbox"/> 4 th org level <input type="checkbox"/> DBC	<input type="checkbox"/> 3 rd org level <input type="checkbox"/> DDR	<input type="checkbox"/> Attorney <input type="checkbox"/> Engineer <input type="checkbox"/> Physician <input type="checkbox"/> _____ _____%	1 st & 2 nd org level (AAS, DIR, CDD)

**Excluded – In rare cases when a CEA is used in lieu of an Exempt Appointee.*

Current Level: _____ (For existing CEAs only)	New Level: _____
Position No. : _____	Prepared by: _____
Signature of Personnel Officer: _____	Date: _____

A) Justification for determining level:

B) Describe the CEA's relationship to the department's mission:

C) Describe the CEA's interaction with the Executive Management team:

D) Describe the department's organization levels (attach organizational chart):

E) – (if necessary, attach additional sheets and any other information for justifying CEA level.)

Level	Factor
<input type="checkbox"/> Low <input type="checkbox"/> Standard <input type="checkbox"/> High	Scope/Responsibility: (statewide impact, department's reporting relationship, interface with other governmental jurisdictions, impact on the general public, dollar value or budget size) <i>Describe:</i>
<input type="checkbox"/> Low <input type="checkbox"/> Standard <input type="checkbox"/> High	Sensitivity: (media interest, legislative interest, public interest/perception, court/regulatory interest, Governor's Office interest, special interest groups, other governmental jurisdictional interest, confidential/sensitive information) <i>Describe:</i>
<input type="checkbox"/> Low <input type="checkbox"/> Standard <input type="checkbox"/> High	Complexity: (multiple funding sources, reporting requirements, technical program, new/unique program, legally mandated program) <i>Describe:</i>
<input type="checkbox"/> Low <input type="checkbox"/> Standard <input type="checkbox"/> High	Consequence of Error: (discredit to the department, loss of dollars, impact to the public, public health & safety, violation of law or court or other regulatory requirements) <i>Describe:</i>
<input type="checkbox"/> Low <input type="checkbox"/> Standard <input type="checkbox"/> High	Professional Level Staff: (Position has majority of subordinate staff designated at the professional level or a large number of subordinate staff.) <i>Describe the classifications and staffing numbers:</i>

Level	Factor
<input type="checkbox"/> Low <input type="checkbox"/> Standard <input type="checkbox"/> High	<p>Describe the CEA's interaction with the Executive Management Team and their policy making role: (statewide impact, department-wide impact, department's reporting relationship, act on behalf of the directorate, testify at Legislature, presentation to Cabinet, interface with other governmental jurisdictions) <i>Describe:</i></p>
<input type="checkbox"/> Low <input type="checkbox"/> Standard <input type="checkbox"/> High	<p>Describe the role/relationship the CEA has with the Department's Strategic Plan: (level of involvement with the department's core business functions, relationship and level of involvement with the department's goals, degree the CEA is involved in determining how these goals are reached, i.e., strategies, objectives, responsibilities, timelines, resources needed, etc.) <i>Describe:</i></p>

DEFINITIONS OF ROLES

AAS = Assistant Agency Secretary: Responsible for a single or multiple program crossing departmental lines.

DIR = Director/Executive Director: By definition or constitutional authority, the Director is the Chief Executive Officer of a department. This is the highest organizational level with responsibility for all aspects of an organization or in a mega department over significant arms of the organization.

CDD = Chief Deputy Director: Reporting to the Director, the position is at the first organizational level and like the Director is also at the highest organizational level. Positions are responsible for the administrative functions of a department and serves as the Director in his/her absence.

DDR = Deputy/Division Director: Typically responsible for one or more programmatic divisions. Positions are typically at the second organizational level. Most departments consider these positions to be at a high organizational level.

ASSIST = Assistant Deputy Director/Assistant Division Chief/Assistant Branch Chief: Performs as an assistant to the Deputy Director, Division Chief or Branch Chief of a large program with subordinate managers. The primary function of the position is to assist with policy-making decisions, as well as, serve in the absence of the Director or Chief and/or to assist with ensuring proper oversight and administration of the program. Positions are considered mid-organizational level and are typically at the 3rd organizational level.

DBC = Division/Branch Chief: Responsibility consists of all aspects of a specific program. Positions are considered mid-organizational level and are typically at the 2nd, 3rd, or 4th organizational level. The size of the department, number of divisions in the department, and staff size are all factors considered in determining the appropriate level for this position.

PMR = Program Manager: Usually responsible for a specific program area within a division or branch. Has full management and supervisory responsibility. Administers the program through one or more subordinate supervisors. Allocations are considered to be at the lowest organizational level and typically are at the 2nd, 3rd, and 4th organizational level depending on department size.

PRJ = Project Manager: Positions assigned responsibility over a multi-million dollar project which strongly influences the development of policy pertaining to the mission of the department. Positions may be considered at the lowest or mid-organizational level and typically are at the 3rd organizational level but may be at the 2nd level for extremely large, complex and/or sensitive projects. Positions serve as the head of the project with responsibility for the overall completion of the project. The project must have a direct impact on accomplishing the mission of the department, health, safety, welfare, and/or other vital interests of the public and/or other primary customers. The project has strong media and legislative interest and is of such complexity that few persons in state service possess the capacity to accomplish the project successfully. The failure of the project could result in loss of life, loss of millions of dollars, negative media coverage, loss of faith by the public, litigation or civil or criminal investigations.

SPEC = High Level Staff Specialist: Positions should only be established at Level A.* A high level staff specialist with program responsibility impacting the entire department which reports to the Directorate.

SA = Special Advisor: Positions should only be established at Level A.* Positions are responsible for rendering broad management advice that significantly impacts a wide spectrum of departmental policies. Consider the extent to which the concentration of policy responsibility may weaken the policy-influencing role of line positions in the same program or department. Positions typically serve as special advisers to Boards or Commissions.

****Establishing positions at a higher level requires CalHR approval.***



Physical Therapy Board of California

STATE AND CONSUMER SERVICES AGENCY - EDMUND G. BROWN JR., GOVERNOR

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August 17, 2017

Ricardo Delacruz, Personnel Officer
Department of Consumer Affairs
1625 N. Market Blvd. Suite N-321
Sacramento, CA 95834

Re: Request for Consideration of Increase of Exempt Level of Executive Officer

Dear Mr. Delacruz

The Physical Therapy Board of California (PTBC) would like to request that the Department of Consumer Affairs (DCA) contact the California Department of Human Resources (CaiHR) and requests an exempt *level* increase for the Board's Executive Officer position. At the August 24, 2016 Board Meeting, the Board *voted* unanimously in support of this action. However, the Board has been unsuccessful.

This level increase is based on an increase in position authority, budget authority, complexity and overall program responsibility.

The last exempt salary level increase for the EO position was in 2000. Since that time the Board has experienced tremendous growth as well as change in the Physical Therapy profession. Specifically, the Board's staffing levels have increased by 143%, which includes two additional managers; a 164% increase in its total budget allocation authority; a 315% increase in its enforcement budget allocation authority, and a 75% increase in the total licensing population.

In comparing the size and structure of the PTBC with other DCA boards, the Board believes that these changes support the request for an exempt level salary increase to level "L" for the EO position effective August 1, 2017 (Pursuant to B&P 2607.5 (a)). The current level of compensation for the EO position is level "O".

The Board appreciates DCA's support and assistance in submitting our request to the appropriate authority. Should you need any additional information, or if you have further questions or concerns regarding this request, please contact me directly.

Respectfully,

Katarina V. Eleby, M.A.
Board President



Physical Therapy Board of California

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Date: 8/10/2016

Prepared for: Board Members

Prepared by: Liz Constancio, Administrative Services Manager

Subject: Executive Officer Exempt Level Allocation

Purpose:

To request the Board Members to review the history of PTBC's Executive Officer (EO) exempt level and allocation criteria in order to make a determination on whether to request the EO exempt level be changed from Level O to a more appropriate level that meets the allocation guidelines set forth for the PTBC's structure.

Attachments: 1. [Executive Officer Position Level and Structure Chart \(PTBC-5/2016\)](#)
 2. [DCA Executive Officer Position Level Comparison \(PTBC-5/2016\)](#)
 3. [DCA Executive Officer Exempt Level Study Criteria & PTBC Allocation \(DCA-5/2000\)](#)
 4. [Exempt Salary Schedule Chart \(CalHR-7/2016\)](#)
 5. [Career Executive Assignment Guidelines \(CalHR-11/2015\)](#)
 6. [Request for Consideration of Increase of Exempt Level of Executive Officer \(Draft\)](#)

Background:

The PTBC's Executive Officer position was initially established on July 1, 1976 with the title of "Deputy, Physical Therapy Examining Committee, and Staff Consultant". The position was under the direction of the Medical Board of California within the Department of Consumer Affairs.

On November 14, 1988, the EO exempt entitlement B&P code E/BP2604 was tied to the position and on March 2, 1989, the exempt level changed from P4 level (Associate Analyst II equivalent) to level P2 (SSM I equivalent), following the DCA's EO Exempt Level Study conducted in 1985.

FY 1996-97, the oversight designation was transferred to the Physical Therapy Examining Committee (PTEC) from the Medical Board of California (MBC) (Chapter 829, Statutes of 1996 (AB3473)), which later changed the PTEC to the Physical Therapy Board of California (PTBC). At the time, the EO level did not change and was still allocated at level P2 (SSM I equivalent).

On August 31, 2000, the EO exempt level changed from level P2 to level O (SSM II equivalent) and the title was changed to "Executive Officer, Physical Therapy Board of California" following another department-wide EO Exempt Level Study conducted by the DCA in May 2000. At the time of the study, the PTBC was authorized 8.8 positions, including the EO position and had an authorized budget of \$1,956,976 (FY 2000/01).

FY 2011-12, initiated an EO Exempt Level Study and contracted with the California Human Resources (CalHR) to conduct a salary study of all the EO positions, including PTBC's EO position to determine if the salaries were appropriately allocated. However, the study was limited due to budget constraints resulting in furloughs, vacancies, and hiring freezes state-wide; therefore, any EO level increases were



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not permitted. It should be noted, at the time of the study, the PTBC had 18.0 authorized positions, including the EO position and a budget authority of \$3,472,038.

CY 2015-16, the PTBC is authorized 19.1 positions, including the EO and also employs four additional staff (1 OT, 2 SSA and 1 AGPA) authorized in the "temp help" line item (blanket expenditures). These temporary positions are necessary to accommodate increasing program requirements and alleviate excessive backlogs. In addition, the PTBC has a current budget authority of \$4,227,000 and projects to spend \$4,142,460 (year-end).

While various significant program changes have occurred between FY 2000/01 and CY 2015/16, the most significant over the past five (5) years is as followed:

- 2010/11 – the PTBC implemented Continuing Competency (CC) requirements (California Code of Regulations, sections 1399.90 – 1399.99). The CC requires all licensees to accumulate 30 hours of continuing education during each renewal cycle (biennial) from a course provider approved by the Board. In addition, to ensure applicants meet CC requirements, the PTBC is required to conduct a percentage of random audits. This change increased the licensing requirements. As a result, the PTBC increased its staffing resources to manage the new additional workload.
- 2011/12 – the PTBC implemented the Consumer Protection Enforcement Initiative (CPEI) developed by the DCA. The CPEI proposed streamlining and standardize the complaint intake/analysis to decrease the average processing time for complaint intake, investigation, and prosecution from three years to 12-18 months. This change increased the enforcement requirements. As a result, the PTBC increased staffing resources to manage the new additional workload.

In addition, the PTBC implemented fixed-date testing for its National Physical Therapy Exam (NPTE) administered by the Federation of State Boards of Physical Therapy (FSBPT). The Fixed-date testing schedule requires all applicants to adhere to the FSBPT fixed-date testing schedule and deadlines. The FSBPT administers the NPTE for physical therapist and physical therapist assistants 4 times per year. This change revised the sequence and frequency of examinations, requiring the Board to process a higher volume of applications in a compressed amount of time resulting in additional workload within the application and licensing services. The PTBC was required to absorb the additional workload within its existing resources

- 2012/13 – Implemented expedited licensure requirements (Business and Professions Code, section 115.5). The expedited licensure requirements provide applicants identified as a spouse or domestic partner of active duty military personnel to an expeditious license process. This change revised the sequence of the application process, requiring the PTBC to process these applications expeditiously, in turn, processing a higher volume of applications in a compressed amount of time resulting in additional workload within the application, licensing and cashiering services. The PTBC was required to absorb the additional workload within its existing resources.
- 2013/14 – Passage of SB 198 (eff. 1/1/14) – revised the Physical Therapy Practice Act in its entirety; however, the most impactful changes:
 - Medical Records - Added authority for the Board to collect \$1,000 per day for each day a patient's medical records have not been produced to the Board after the 15th day of request.



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- Test of English as a Foreign Language (TOEFL) - Added requirement for individuals educated outside the U.S. at a non-accredited school to submit proof of English proficiency.
 - Licensure Exemption – Added provisions providing licensure exemption to the licensees who are licensed out of state or out of the country if they are researching, demonstrating, or providing physical therapy in connection with teaching or participating in an education seminar for no more than 60 days a calendar year.
 - Education Accreditation – Added educational requirements shall include those prescribed by CAPTE or the Physiotherapy Education Accreditation Canada, and shall include 18 weeks of full time experience.
 - Licensure Renewal Fee Exemptions and Waivers - Added licensure renewal exemptions for Military, Disability, Voluntary/Unpaid; and Retired.
 - Direct Access – Added provisions allowing patients to access physical therapy services without a diagnosis for 45 calendar days or 12 visits, whichever occurs first. If treatment continues beyond 45 calendar days or 12 visits, the patient must receive an in-person examination from a physician and surgeon or podiatrist, who must also sign off on the physical therapist's plan of care. AB 1000 also expands the types of licensed professionals permitted to work for a professional corporation; adds physical therapy corporations to the list of corporations in Section 13401.5, identifying who, other than physical therapists, may be a shareholder, officer, or director of a physical therapy corporation; and, permits a licensed physical therapist to be a shareholder, officer, or director of a medical corporation and a podiatric corporation.
- 2015/16 – Implemented new licensing and enforcement online system, Breeze. The Breeze is an integrated system that has replaced the DCA's legacy systems (CAS/ATS), effective January 19, 2016. In order to determine the impact the Breeze has on board operations, the PTBC will continue to work on system efficiencies and monitor and track operations over the next 12 months. Meanwhile, the PTBC is required to absorb any additional workload within its existing resources.
 - 2016/17 – Increase staff resources within its application services in efforts to support the increasing workload in processing applications for licensure and/or examination. Further, in efforts to align our structure to meet allocation guidelines the PTBC was authorized one additional Staff Services Manager I position within the Application and Licensing Services Program. This action was necessary to obtain a separation in duties between its' administrative functions and application and licensing functions. As a result, staff resources will increase from 19.1 to 21.5 authorized positions, effective July 1, 2016. The 21.5 authorized positions does not include positions allocated as blanket expenditures, which includes Application & Licensing Manager, Cashier, and one Application Analyst.

Analysis:

Generally, when changes occur, increasing program requirements, such as, scope of responsibility, staff size, budget, complexity, special requirements, etc. merits a salary or level increase.

Over the past decade, the PTBC's program responsibilities have increased significantly. Meanwhile the EO exempt level remains the same Level O, which was determined on PTBC's structure in FY 2000-01. In fact, according to the DCA's EO exempt level criteria outlined in the May 2000 study, the PTBC's current structure meets the allocation criteria for exempt level L (CEA 1 equivalent.). In addition, several healing arts boards similar to PTBC's structure - the EO Exempt Level positions range from Level M and Level L (reference Attachment 2).



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In addition, changing the EO exempt level from O to level L, will not require a budget change proposal request, nor create a budget deficiency. The EO monthly salary base of level O is \$6584 - \$7334 and \$7591 - \$8456 for level L. Based on the maximum monthly salary base, the PTBC's expenditures may have a potential annual increase of \$13,464 within its Personnel Services budget. Currently, the PTBC is authorized \$1,753,000 for Personnel Services and projects to fully expend its budget (year-end); however, these expenditures include the cost of temp help (\$105,000). It should be noted the Temp Help expenditures will be alleviated, effective July 1, 2016 – as staffing deficiencies have been corrected through the BCP process allowing the PTBC to true-up its budget and significantly reduce its reliance on temp help. Therefore, based on the potential maximum annual salary base, changing the exempt level from O to level L (\$13,464) will be minor and absorbable within existing resources.

Further, the DCA, Budget Office has identified that the PTBC's existing budget can support the increase in salary that would result in changing the EO Exempt Level without a budget augmentation should the change be approved.

Therefore, in my opinion, a change to the PTBC's EO Exempt Level L or any other level applicable is a viable course of action.

Action Requested:

Board Members - Motion to vote in support of the DCA, Office of Human Resources to work with the PTBC staff and appropriate agencies in obtaining an exempt level increase for PTBC's EO position.

**Physical Therapy Board of California
Executive Officer Level and Structure Chart**

	FY 1996/97	FY 2000/01	FY 2011/12	FY 2012/13 (Actual)	FY 2013/14 (Actual)	PY 2014/15 (Actual)	% Board Changes (FY 00/01 FY 11/12)	% Board Changes (FY 00/01 PY 14/15)	CY 2015/16 (As of 6/30/16)
Authorized Positions	5.5	8.8	18.0	14.4	16.1	19.1	104%	117%	19.1
Executive Officer Level	P2	Level O	Level O	Level O	Level O	Level O	0%	0%	Level O
PERS SVS / OE & E Budget	\$949,210	\$1,496,576	\$2,491,132	\$2,249,952	\$2,253,849	\$2,758,979	57%	84%	\$3,025,000
Licensee Population	18,786	21,351	32,187	33,185	33,993	35,158	51%	65%	37,580
Applications Received	1,094	1,569	1,953	1,900	2,038	2,139	30%	36%	2,294
Enforcement Budget	\$652,351	\$460,400	\$980,906	\$1,107,051	\$1,173,913	\$1,317,611	113%	186%	\$1,202,000
Complaints Received	189	219	1816	1528	1215	1006	729%	359%	700
Investigations	192	126	1796	1483	1197	995	1325%	690%	692
Cases Referred to AG's Office	22	26	70	59	51	60	169%	131%	25
Disciplinary Actions	9	15	33	35	41	54	120%	260%	54
Citations Issued	0	4	613	258	258	99	15225%	2375%	79
Total Budget	\$1,601,561	\$1,956,976	\$3,472,038	\$3,357,003	\$3,427,762	\$4,076,590	77%	108%	\$4,227,000
Total Expenditures (CalStars FM13)	\$1,539,012	\$1,954,347	\$3,232,964	\$3,204,071	\$3,407,765	\$4,007,185	65%	105%	\$4,108,884

- **FY 1996/97**
 1. No Change in EO Level, following the designated oversight transferring from MBC to PTBC.
- **FY 2000/01**
 1. EO level changed from level P2 to level O, following DCA's EO Exempt Level Study (5/2000).
- **FY 2011/12**
 1. No Change in EO Level.
 2. \$150,000 one-time AG Augmentation.
- **FY 2012/13**
 1. \$170,000 one-time AG Augmentation.
- **FY 2013/14**
 1. No Change in EO Level.
 2. \$320,000 one-time AG Augmentation.
 3. BCP 1110-31 Staffing increase w/ funding \$189,000.
- **PY 2014/15**
 1. No Change in EO Level.
 2. BCP 1110-03L Staffing increase (2 yr. limited-term) w/ \$91,000 FY 14/15 and \$83,000 FY 15/16.
 3. BCP 1110-32 \$142,000 AG Augmentation.
- **CY 2015/16**
 1. No Change in EO Level.
 2. 6/30/16, 2 yr. limited-term AGPA position was abolished.

**Physical Therapy Board of California
DCA Executive Officer Level - Comparison Sheet**

Program	Title	Exempt Category	Level	Definition	CalHR Established Salaries	Authorized Positions	Licensee Population
Board of Chiropractic Examiners	Executive Officer	I. Management	L	CEA I Equivalent	7,591 - 8,456	18.0	18,598
Physical Therapy Board of California	Executive Officer	I. Management	O	SSM II Equivalent	6,584 - 7,334	19.1	35,158
California Board of Psychology	Executive Officer	I. Management	M	SSM III Equivalent	7,237 - 8,061	20.3	22,556
Respiratory Care Board of California	Executive Officer	I. Management	M	SSM III Equivalent	7,237 - 8,061	17.4	22,801
Veterinary Medical Board	Executive Officer	I. Management	M	SSM III Equivalent	7,237 - 8,061	23.8	30,328

Chart reflects a comparison of DCA Executive Officer Exempt Levels that are similar in size to the PTBC.

Data collected from DCA, ASP Report of FY 2014-15, CalHR Exempt Salary Schedule of July 2015; and, DCA, Payscale Worksheet for EO's (2015 Price Book).

SUMMARY OF ISSUES

At the request of the Department of Personnel Administration (DPA), the Department of Consumer Affairs (DCA) reviewed the exempt Executive Officer positions for the various boards within the Department to determine the appropriate Exempt Levels for those positions.

METHODOLOGY

The Department conducted a study of the salaries and levels of responsibility of the Executive Officer positions. Included in this study were:

- a review of the history of the exempt levels of the positions;
- a review of the duty statement of the positions;
- a review of the organizational structures;
- a objective comparison of the numbers for each program over the past ten years (1989-90 and 1998-99) and
- a survey completed by each incumbent which sought to elicit more information in the more subjective areas of complexity and sensitivity.

ANALYSIS

The analysis of the information contained in the study focused on the following allocation considerations:

1. Degree of authority
2. Scope of Responsibility
3. Staff size
4. Budget
5. Complexity
6. Sensitivity of Programs
7. Special requirements

DEGREE OF AUTHORITY

Executive Officers for all boards have such a similar degree of authority that it is not a determining factor. All positions have the authority to make essentially the same types of decisions; differences exist in the consequence of error of such decisions.

Each position has administrative authority over staff, responsibility for policy development and implementation and responsibility for management of the board programs, including:

- Examinations and/or licensing;
- Regulations;
- Complaints and mediation;
- Inspections and/or investigations;
- Enforcement/disciplinary actions;
- Legislation and testimony;
- Budget development and testimony;
- Strategic Plan development;
- Media contact;
- Industry relations; and
- Public education programs.

In the larger boards, immediate responsibility for some of these functions may be delegated to subordinate staff; in the small boards, often the Executive Officer is the only one qualified to make decisions in these areas.

EXECUTIVE OFFICER EXEMPT LEVEL STUDY

May, 2000

SCOPE OF RESPONSIBILITY (Staff/Budget) – Historical Overview

In 1985, when the last salary survey was completed, the boards were categorized in accordance with the following criteria:

Level	Size	Budget	Staff	Licensees
I	Small Department <ul style="list-style-type: none"> Medical Board Contractors 	\$10 M +	100+	100,000+
K	Largest Board <ul style="list-style-type: none"> Accountancy* Dental Examiners* Pharmacy Professional Engineers Registered Nursing* Voc.Nurse & Psych Tech.* 	\$2.5 – 10 M	35 – 100	100,000+
L	Large Board <ul style="list-style-type: none"> NONE 	\$2.0 – 2.5 M	24 – 34	25 – 100,000
M	Medium Board <ul style="list-style-type: none"> Architects Athletic Structural Pest 	\$1.0 – 2.0 M	15 – 24	20 – 25,000
O	Small Board <ul style="list-style-type: none"> Behavioral Sciences* Vet Medicine* 	\$0.5 – 1.0 M	10 – 14	10 – 20,000
P2	Smallest Boards <ul style="list-style-type: none"> Acupuncture* Dental Auxiliaries Geology Optometry Physical Therapy* Physician Assistants* Podiatric Medicine* Psychology* Respiratory Care* Shorthand Reporters Speech Pathology 	Up to \$0.49 M	2 – 9	Up to 10,000

* Received upgrades after 1985 study

- RN increased from M to K
- Accountancy, Dental, Pharmacy, Voc Nurse increased from M to L
- Architects increased from O to M
- Behavioral Science, Vet Med increased from P2 to O
- Acupuncture, Physical Therapy, Physician Assist, Podiatric Med, Psychology and Respiratory Care increased from P4 to P2

The following changes have occurred since 1985:

In 1989, Respiratory Care Board increased from P2 to O.

In 1990, Psychology increased from P2 to O.

In 1994, Psychology increased from O to M.

In 1995, Voc Nurse increased from L to K

In 1997, Medical Board and CSLB increased from G to F; Behavioral Science increased from O to M; Accountancy, Dental and Pharmacy increased from L to K and Architects increased from M to L.

EXECUTIVE OFFICER EXEMPT LEVEL STUDY
May, 2000

Over the past fifteen years, the changes shown above have altered the categories and levels. The chart below describes the current structure:

Level	Size	Budget	Staff	Licensees
F	Small Department • No change	\$36 - 45M	314 - 479	400,000+
K	Largest Board • No change	\$5.6 - 13.7M	40 - 96.7	35 - 325,000
L	Large Board • Architects	\$3.5M	34.1	
M	Medium Board • Athletic • Behavioral Science • Structural Pest	\$0.9 - 4.5M	13.3 - 35.9	2 - 20,000
O	Small Board • Vet Medicine	\$1.85 M	12	14,000
P2	Smallest Board • Acupuncture • Dental Auxiliaries • Geology • Optometry • Physical Therapy • Physician Assistants • Podiatric Medicine • Court Reporters • Speech Pathology	\$0.9 - 2M	5.1 - 10.8	3 - 43,000
P4*				

*As in 1985, the Board of Guide Dogs for the Blind, with a FY 2000-01 staff of 1.5 and a budget of \$.1M, is currently allocated to this level

COMPLEXITY/SENSITIVITY

To evaluate the complexity of each position, the following factors were considered:

- Number of separate programs
- Complexity of examinations (Board-developed vs. purchased or national; multiple parts, etc.)
- Difficulty of application approval (complexity of requirements; foreign school curriculum review; equivalency formulas, etc.)
- School accreditation/approval
- Continuing education requirements
- Complexity of investigations
- Discipline (citation and fine programs; review committees; stipulation; license revocation, etc.)
- Interaction with other agencies (other state and local public agencies; professional associations; industry contacts, etc.)
- Consumer education programs
- Special programs (diversion; research; trusts, etc.)

EXECUTIVE OFFICER EXEMPT LEVEL STUDY
May, 2000

To evaluate the sensitivity of the programs, the following factors were reviewed:

- Public interest
- Legislative interest/activity
- Media contact
- Sophistication of licensees (educational level; political interest, etc.)
- Types of enforcement cases
- Consequence of error
- Health and Safety issues

SPECIAL REQUIREMENTS

The statutory requirement for professional licensure for the Executive Officers of two boards, Registered Nursing and Vocational Nurse, must be given special consideration in determining Exempt Level allocations.

QUANTITATIVE AND QUALITATIVE DATA FOR EACH BOARD

The information provided below uses the categories established in 1985 but indicates the current Exempt Levels of the Executive Officer positions.

SMALL DEPARTMENT (CURRENTLY LEVEL F) – CONTRACTORS, MEDICAL BOARD

Although these boards have grown substantially since 1985, Exempt Level upgrades during the past fifteen years have adequately addressed these issues; therefore, no changes are requested.

LARGEST BOARDS (CURRENT LEVEL K/L) - ACCOUNTANCY, DENTAL BOARD, PROFESSIONAL ENGINEERS, PHARMACY, ARCHITECTS (L), VOCATIONAL NURSE, REGISTERED NURSING

In 1985, the Board of Architectural Examiners was allocated to level M and Professional Engineers was allocated to level K; the rest of these boards were assigned to level L. With the exception of Professional Engineers, all of these boards have moved up one level in the past fifteen years to address the growth in staffing and budget levels. But the increased classification levels of subordinate civil service staff has created compaction in the Board of Accountancy, Pharmacy, Professional Engineers and the Dental Board which now merits an additional level for the Executive Officers. In addition, the requirement for professional licensure for the Executive Officers for the Board of Registered Nursing and the Board of Vocational Nurse and Psychiatric Technicians and the obvious public health and safety issues of these two boards should be considered adequate reasons for higher levels for these boards. The Department also deems the higher professional level of the licensee population of the Board of Registered Nursing a valid basis for justifying the highest Exempt Level for this category of boards.

EXECUTIVE OFFICER EXEMPT LEVEL STUDY

May, 2000

Physical Therapy Board

Quantitative Data (additional comprehensive data is attached)

	1989-90	1998-99	% Change	2000-01
Authorized Positions	2.4	7.3	+204.2	8.8
Budget	\$416,000	\$1,856,000	+346.2	\$2.0M

Note: 9,080 Licenses or Registrations were renewed and 1,484 licensure examinations were scheduled in 1998-99.

Qualitative Factors

Public Interest - High

Rating the public and legislative interest in the Physical Therapy Board of California is a challenge. It is not for the number of inquiries that this rating is given, but the sensitivity of the issues that result in the interest.

The public is primarily interested in the Board when they feel they have been injured by a licensee. The Board has delegated to the Executive Officer the authority to determine which complaints should be investigated and to file accusations against licensees. Consequently, one of the most sensitive issues with the public is when the investigative findings do not support a disciplinary action against the licensee. When disciplinary action is not filed it is common for the consumer to seek assistance from a legislator.

Legislative Interest - High

The Executive Officer represents the board before the legislature during the Sunset Review Process, when a statutory change is sought and whenever a legislator has a concern. One recent example is the special report on the necessity of continuing one of the licensing categories of the Board that was submitted in 1999.

Program Sensitivity - High

The Board's mission is consumer protection. To complete this mission the Board makes decisions to grant or deny licenses and whether or not to revoke or place disciplinary terms on a license. These decisions directly impact physical therapists and physical therapist assistants and the patients who are treated by them. The Board is also involved in the only higher level of sensitivity, the criminal justice system where a person's liberty is affected, since it seeks the filing of criminal charges when a violation is of that magnitude.

Health and Safety Issues

- Investigation of consumer complaints and resulting disciplinary action against licensees.
- The sunseting of the authority for physical therapists to be certified to perform electromyography.

Complexity and Visibility

Insurance Fraud - The Executive Officer testified in two cases in 1999 regarding the statutes and regulations authorizing persons to perform physical therapy. The issue of persons seeking payment for services that were provided illegally is a significant issue in the area of workers compensation insurance.

Exempt Salary Chart

July 2016*

Exempt Category	Level Definitions	Salaries in Statute		CalHR Established Exempt Salaries				Civil Service Excluded		
		Monthly Salary	Annual Salary	Monthly Min.	Monthly Max.	Annual Min.	Annual Max.	Level Definition	Min.	Monthly Max.
I. Management Positions:										
A.	Cabinet	12,795.13	153,542			15,704.28		188,451		
	All Others at Level A			11,894	-	13,250	142,728	-	159,000	
B.	Tier II Department Director	12,000.94	144,011	12,455.83	-	13,470.86	149,470	-	161,650	
	All Others at Level B			11,157	-	12,431	133,884	-	149,172	
C.	Chair - Major Boards	11,471.57	137,659	10,666	-	11,881	127,992	-	142,572	
	Member - Major Boards	11,118.36	133,420	10,335	-	11,516	124,020	-	138,192	Legal & Medical 14,409
D.	Major Chief Dep. (CEA V Equiv.)			10,199	-	11,359	122,388	-	136,308	CEA C 9,978 - 11,329
E.	Tier I Department Director	10,588.90	127,067	11,862.59	-	12,829.41	142,351	-	153,953	
	All Others at Level E			9,844	-	10,965	118,128	-	131,580	
F.	CEA IV Equivalent			9,634	-	10,734	115,608	-	128,808	CEA B 8,985 - 10,703
G.	Ex. Officers, Major Boards			9,385	-	10,455	112,620	-	125,460	
	Chair - Medium Boards	10,059.62	120,715	9,352	-	10,416	112,224	-	124,992	
H.	Maj. Dept. Deputy Director			9,185	-	10,233	110,220	-	122,796	
	Small DD & Mbr. Med. Bds.	9,706.77	116,481	9,023	-	10,049	108,276	-	120,588	
I.	Asst. Agency Secretary I			8,749	-	9,750	104,988	-	117,000	
J.	Asst. Director (Line Program)			8,348	-	9,298	100,176	-	111,576	CEA A 6,453 - 9,277
K.	Asst. Agency Secretary II			7,962	-	8,870	95,544	-	106,440	
L.	CEA I Equivalent			7,591	-	8,456	91,092	-	101,472	
M.	SSM III Equivalent			7,237	-	8,061	86,844	-	96,732	SSM III 7,088 - 8,048
N.	SSM II/III Equivalent			6,905	-	7,692	82,860	-	92,304	
O.	SSM II Equivalent			6,584	-	7,334	79,008	-	88,008	SSM II (M) 6,453 - 7,331
II. Non-management Positions								SSM II (S)	5,830	- 7,245
P1.				6,435	-	6,955	77,220	-	83,460	
P2.	SSM I (Supervisory) Equiv.			6,097	-	6,629	73,164	-	79,548	SSM I 5,311 - 6,598
P2A	SSM I (Non-supervisory)			5,849	-	6,279	70,188	-	75,348	
P3.				5,582	-	6,024	66,984	-	72,288	
P4.	Assoc./AA II Level			4,625	-	5,749	55,500	-	68,988	Assoc./AA 4,600 - 5,758
P5.	SSA - Rg. C/AA I			3,844	-	4,764	46,128	-	57,168	SSA-Rg. C 3,824 - 4,788
P6.	SSA - Rg. B			3,210	-	3,959	38,520	-	47,508	SSA-Rg. B 3,189 - 3,992
P7.	SSA - Rg. A			2,949	-	3,608	35,388	-	43,296	SSA-Rg. A 2,945 - 3,690
P8.	Mgt. Svcs. Tech.			2,511	-	3,038	30,132	-	36,456	MST-Rg. A 2,609 - 3,268
P9.	(Grad) Student Assistant			2,174	-	2,586	26,088	-	31,032	GSA-Rg. A 1,881 - 2,460
Q1.	Executive Secretary II			3,449	-	4,316	41,388	-	51,792	Ex. Sec. II 3,438 - 4,303
Q2.	Executive Secretary I			3,090	-	4,044	37,080	-	48,528	Ex. Sec. I 3,157 - 3,954
Q3.	Secretary			2,750	-	3,512	33,000	-	42,144	Secretary 2,809 - 3,516

* No change from 2015.

Return to: [Table of Contents](#).

Career Executive Assignment (CEA)

There is no classification specification for CEA, class code 7500, as the CEA category is set apart in civil service. The CEA program was established in 1964 to recognize the unique selection, status and pay considerations appropriate to high level, policy-influencing civil service positions in the various state departments. The concept of the CEA category is outlined in Government Code section 18547:

"Career executive assignment" means an appointment to a high administrative and policy influencing position within the state civil service in which the incumbent's primary responsibility is the managing of a major function or the rendering of management advice to top-level administrative authority. Such a position can be established only in the top managerial levels of state service and is typified by broad responsibility for policy implementation and extensive participation in policy evolution. Assignment by appointment to such a position does not confer any rights or status in the position other than provided in Article 9 (commencing with Section 19889) of Chapter 2.5 of Part 2.6.

Policy-Making Responsibility

CEAs are to be limited to only the highest, most critical positions that have continuous, direct interface with department directors and constitute the executive management team. CEAs must have a decisive role in their department's policy-making, and should have regular involvement in department-wide policy and program management. The influence of the position should be comparable to other CEA positions within the department or other similar departments. Significant policy creation and program management responsibility are a mandatory aspect of CEA positions. CEA positions must possess the authority to directly influence policies or manage programs pertaining to the departmental mission. CEAs must serve as the chief policy-maker within their respective program area.

- "Policies" are principles, rules, and guidelines formulated or adopted by an organization to reach its long-term goals. Policies and procedures are designed to influence and determine all major decisions and actions, and all activities take place within the boundaries set by them.
- "Procedures" are the specific methods employed to express policies in action in day-to-day operations of the organization. Together, policies and procedures ensure that a point of view held by the governing body of an organization is translated into steps that result in an outcome compatible with that view.

New policy can come from various sources, including new state and federal legislation, regulations, and other higher level policies such as Executive Orders. A CEA may continually revise or implement existing policy if the position is required to ensure that the program/organization stays in compliance with frequently changing higher level policies, court orders, or laws and rules. Departments need to keep in mind that there is a distinction in responsibility between:

- Positions having authority for making high-level policy decisions that have broad impact beyond the program area, versus
- Positions that merely develop operational procedures or standards to implement policy that was developed at a higher level.

While the first may support a CEA allocation, the second alone probably would not. Developing operational procedures is not defined as high-level policy-making. The depth and breadth of the role of the individual in the development of policy is a critical consideration in determining whether a position meets the statutory requirements for a CEA.

A CEA position may not be approved if CalHR determines the proposed position overall has:

- Narrow, limited authority for decision-making;
- An indirect or merely supporting role in achieving the department's mission;
- Significant overlap with other existing CEAs or Exempts;
- No examples of objectives that can actually be altered by policy;
- A limited extent of impact;
- No sensitivity or long-term controversy;
- Low consequence of error;
- Limited, internal, contacts only; or
- No direct contact with department director.

Minimum Qualifications

CEA examinations are open to all applicants who possess the knowledge and abilities, and any other requirements as described in the examination bulletin. Eligibility to take a CEA examination does not require current permanent status in civil service.

Knowledge and Ability Requirements

Applicants must possess the ability to perform high administrative and policy-influencing functions effectively. Such overall ability is demonstrated by the following more specific knowledge and ability requirements:

(a) Knowledge of the organization and functions of California State Government including the organization and practices of the Legislature and the Executive Branch; principles, practices, and trends of public administration, organization, and management; techniques of organizing and motivating groups; program development and evaluation; methods of administrative problem solving; principles and practices of policy formulation and development; personnel management techniques; the department's or agency's equal employment opportunity objectives; and a manager's role in the equal employment opportunity program.

(b) Ability to plan, organize, and direct the work of multidisciplinary professional and administrative staff; analyze administrative policies, organization, procedures, and practices; integrate the activities of a diverse program to attain common goals; gain the confidence and support of top level administrators and advise them on a wide range of administrative matters; develop cooperative working relationships with representatives of all levels of government, the public, and the Legislative and Executive Branches; analyze complex problems and recommend effective courses of action; prepare and review reports; and effectively contribute to the department's or agency's equal employment opportunity objectives.

These knowledge and abilities are expected to be obtained from the following kinds of experience (experience may have been paid or volunteer; in State service, other government settings, or in a private organization):

CEA Level A

Supervisory/ administrative experience in a line or staff activity, including the execution and/or evaluation of program policies.

CEA Level B

Broad administrative or program manager experience with substantial participation in the formulation, operation, and/or evaluation of program policies.

CEA Level C

Extensive managerial and program administrative experience which has included substantial responsibility for a combination of management functions such as program planning; policy formulation; organization coordination and control; and fiscal and personnel management.

Where high technical professional qualifications are of primary importance in performing the duties of a given CEA position, then the above required experience may have been in a staff capacity exercising professional skills to influence and contribute to program, policy, and methods of providing those professional services. Primary examples are medical doctors and attorneys.

Description of Desirable Qualifications (if any):

When examining for a CEA position, desirable qualifications should be developed and listed on the bulletin. The purpose of the desirable qualifications is to provide the department with a means of evaluating competitors, as well as providing competitors with a means of determining their own relative competitiveness. The desirable qualifications also serve as a guide for

competitors to provide appropriate information on their applications and statements of qualifications.

CEA Levels Criteria

The initial pay level of a CEA is determined by CalHR*, but is typically based on the size of the department, the CEA organizational level, and the functional role of the CEA relating to the proposed CEA allocation.

*Departments with signed CEA Delegation Agreements have authority to set CEA levels and salaries within their CalHR-determined salary cap.

	2nd or 3rd Org Level		
Small (Up to 800)	SPEC, SA, PMR, PRJ,	2nd Org Level	1st Org Level
	DBC, DDR, ASSIST	DDR, CDD	DDR, CDD
	3rd or 4th Org Level		
Medium (801 - 8,000)	SPEC, SA, PMR, PRJ,	2nd or 3rd Org Level	1st Org Level
	DBC, ASSIST	DDR	CDD
	4th Org Level		
Large (8,001 - 17,000)	SPEC, SA, PMR, PRJ	3rd Org Level	2nd Org Level
	ASSIST	DBC	DDR
	5th Org Level		
Mega (17,001 +)	SPEC, SA, PMR, PRJ,	4th Org Level	3rd Org Level
	ASSIST	DBC	DDR

Definition of Role Abbreviations

AAS = Assistant Agency Secretary:

Responsible for a single or multiple program crossing departmental lines.

DIR = Director/Executive Director:

By definition or constitutional authority, the Director is the Chief Executive Officer of a department. This is the highest organizational level with responsibility for all aspects of an organization or in a mega department over significant arms of the organization.

CDD = Chief Deputy Director:

Reporting to the Director, the position is at the first organizational level and like the Director is also at the highest organizational level. Positions are responsible for the administrative functions of a department and serves as the Director in his/her absence.

DDR = Deputy/Division Director:

Typically responsible for one or more programmatic divisions. Positions are typically at the second organizational level. Most departments consider these positions to be at a high organizational level.

ASSIST = Assistant Deputy Director/Assistant Division Chief/Assistant Branch Chief:

Performs as an assistant to the Deputy Director, Division Chief or Branch Chief of a large program with subordinate managers. The primary function of the position is to assist with policy-making decisions, as well as, serve in the absence of the Director or Chief and/or to assist with ensuring proper oversight and administration of the program. Positions are considered mid-organizational level and are typically at the 3rd organizational level.

DBC = Division/Branch Chief:

Responsibility consists of all aspects of a specific program. Positions are considered mid-organizational level and are typically at the 2nd, 3rd, or 4th organizational level. The size of the department, number of divisions in the department, and staff size are all factors considered in determining the appropriate level for this position.

PMR = Program Manager:

Usually responsible for a specific program area within a division or branch. Has full management and supervisory responsibility. Administers the program through one or more subordinate supervisors. Allocations are considered to be at the lowest organizational level and typically are at the 2nd, 3rd, and 4th organizational level depending on department size.

PRJ = Project Manager:

Positions assigned responsibility over a multi-million dollar project which strongly influences the development of policy pertaining to the mission of the department. Positions may be considered at the lowest or mid-organizational level and typically are at the 3rd organizational level but may be at the 2nd level for extremely large, complex and/or sensitive projects. Positions

serve as the head of the project with responsibility for the overall completion of the project. The project must have a direct impact on accomplishing the mission of the department, health, safety, welfare, and/or other vital interests of the public and/or other primary customers. The project has strong media and legislative interest and is of such complexity that few persons in state service possess the capacity to accomplish the project successfully. The failure of the project could result in loss of life, loss of millions of dollars, negative media coverage, loss of faith by the public, litigation or civil or criminal investigations.

SPEC = High Level Staff Specialist:

A high level staff specialist with program responsibility impacting the entire department which reports to the Directorate. Positions should only be established at Level A. Use of the SPEC at a higher level requires CalHR approval, unless the department has a CEA Delegation Agreement.

SA = Special Advisor:

Positions are responsible for rendering broad management advice that significantly impacts a wide spectrum of departmental policies. Consider the extent to which the concentration of policy responsibility may weaken the policy-influencing role of line positions in the same program or department. Positions typically serve as special advisers to Boards or Commissions. Positions should only be established at Level A. Use of the SA at a higher level requires CalHR approval, unless the department has a CEA Delegation Agreement.

Updated 11/9/2015



Physical Therapy Board of California

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August 24, 2016

Ricardo DeLaCruz, Personnel Officer
Department of Consumer Affairs
1625 N. Market Blvd. Suite N-321
Sacramento, CA 95834

Re: Request for Consideration of Increase of Exempt Level of Executive Officer

Dear Mr. DeLaCruz

The Physical Therapy Board of California (PTBC) would like to request that the Department of Consumer Affairs (DCA) contact the California Department of Human Resources (CalHR) and requests an exempt level increase for the Board's Executive Officer position. At the July 07, 2016 Board Meeting, the Board voted unanimously in support of this action.

This level increase is based on an increase in position authority, budget authority, complexity and overall program responsibility.

The last exempt salary level increase for the EO position was in 2000. Since that time the Board has experienced tremendous growth as well as change in the Physical Therapy profession. Specifically, the Board's staffing levels have increased by 117%, which includes two additional managers; a 108% increase in its total budget allocation authority; a 186% increase in its enforcement budget allocation authority, and a 65% increase in the total licensing population.

In comparing the size and structure of the PTBC with other DCA boards, the Board believes that these changes support the request for an exempt level salary increase to level "L" for the EO position effective August 1, 2016 (Pursuant to B&P 2607.5 (a)). The current level of compensation for the EO position is level "O".

The Board appreciates DCA's support and assistance in submitting our request to the appropriate authority. Should you need any additional information, or if you have further questions or concerns regarding this request, please contact me directly.

Respectfully,

Katarina V. Eleby, M.A.
Board President



Physical Therapy Board of California

2005 Evergreen St. Suite 1350, Sacramento, California 95815

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Briefing Paper

Date: August 11, 2017
Prepared for: PTBC Members
Prepared by: Carl Nelson
Subject: Budget Report

Purpose:

To provide an update on the PTBC's Budget activities for FY 2016-17 (Apr-June 2017).

Attachments:

1. [Revenue Report](#)
2. [Revenue Measures](#)
3. [Expenditure Report](#)
4. [Expenditure Measures](#)
5. [Revenue Definition Key](#)
6. [Expenditure Definition Key](#)
7. [Fund Condition](#)

Background:

The PTBC Budget Report is a quarterly review of the expenditures and revenues, including budget activities and analysis for the current year. The data is collected from the DCA, CalStars Financial Monthly Reports and generated by staff quarterly: Jul -Sep (Q1), Oct-Dec (Q2), Jan-Mar (Q3) and Apr- Jun (Q4).

In FY 2016-17, the PTBC was authorized a budget of \$5,275,000 to support all operational costs, which includes personnel services, operating expenses and equipment.

Analysis:

In reviewing revenues and expenditures in Quarter four (Q4) CY 2016-17, the staff identified the following:

The PTBC collected \$1,097,279 in revenues during Q4. Revenues for the same period in FY 2015/16 were \$730,982, increasing revenues by \$366,297 or 50%. The primary source of revenue for Q4 was license renewal fees at \$597,800, followed by application and licensure fees at \$396,402. The increase in revenue is due to new application and licensing fees.

The PTBC spent \$567,135 in Personnel Services (PERS SVS) and \$963,465 in Operating Expenses & Equipment (OE&E), a total of \$1,530,600 (not including reimbursements). Expenditures for the same period in FY15/16 were \$1,069,138, increasing expenditures by \$461,462 or 56%.



Physical Therapy Board of California

BUSINESS, CONSUMER SERVICES, AND HOUSING AGENCY - GOVERNOR EDMUND G. BROWN JR.

Physical Therapy Board of California

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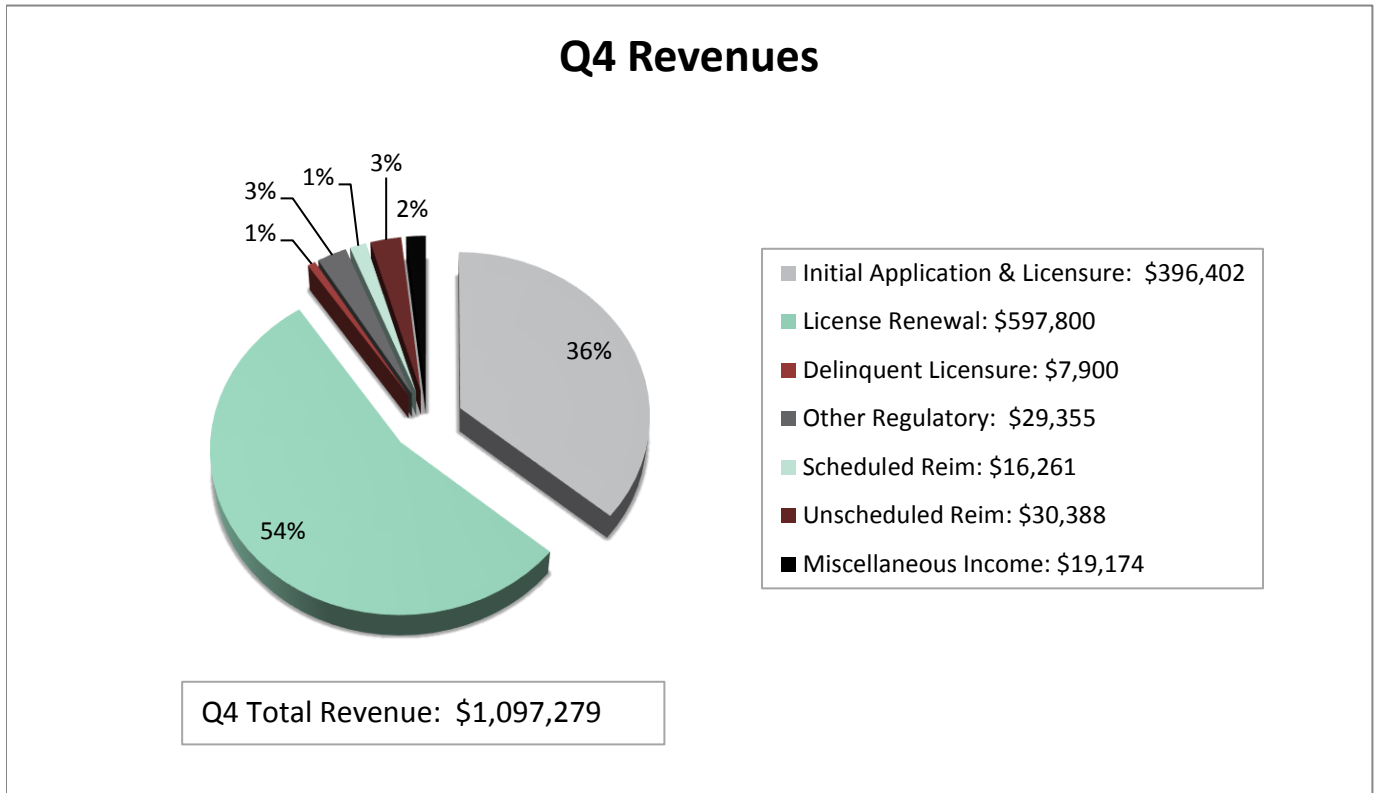
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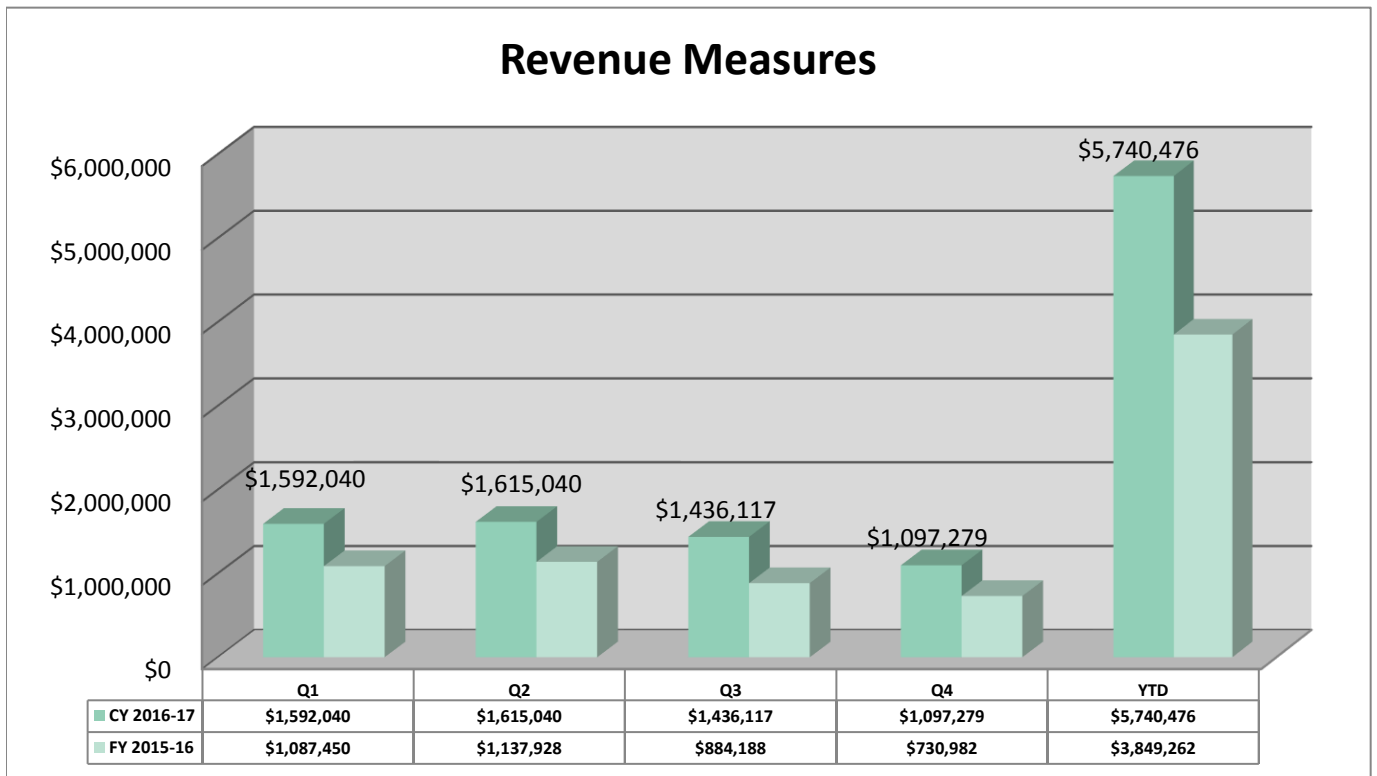
Action Requested: No action being requested at this time.

Physical Therapy Board of California
Revenue Statistics Report
CY 2016-17 Q4(As of 6/30/17)

Revenue Statistics Report					
Budget Line Items	FY 2015-16		CY 2016-17		
	Q4	YTD	Q4	% Of	YTD
	Apr Jun	As of 6/30/16	Apr Jun	Revenue	As of 6/30/17
OTHER REGULATORY					
Cite and Fine (Citations)	7,950	65,890	5,005	0.5%	15,980
Endorsement (License Verification)	17,340	61,080	20,160	1.8%	70,980
Duplicate License / Certificate	3,160	12,810	4,190	0.4%	15,090
TOTALS	28,450	139,780	29,355	2.7%	102,050
INITIAL APPLICATION & LICENSE					
FPTA Application & Initial License Fee	4,149	14,074	8,600	0.8%	22,850
FPT Application Fee	21,671	55,396	21,600	2.0%	79,099
ENMG Exam Fee	100	600	0	0.0%	0
ENMG Application Fee	0	0	0	0.0%	0
KEMG Exam Fee	0	0	0	0.0%	500
KEMG Application Fee	0	0	0	0.0%	0
PTA Application & Initial License Fee	20,094	96,362	70,597	6.4%	198,623
PT Application Fee	25,066	220,556	192,775	17.6%	484,369
PT Initial License Fee	3,275	149,476	101,199	9.2%	265,658
Refunded Reimbursements	0	0	0	0.0%	0
Overt/Short Fees	15,503	21,206	201	0.0%	901
Suspended Revenue	9,676	15,002	5,890	0.5%	17,415
Prior Year Revenue Adjustment	-2,774	-11,559	-4,460	-0.4%	-13,116
TOTALS	254,627	561,113	396,402	36.1%	1,056,300
LICENSE RENEWAL					
PTA Renewal Fee	90,700	595,700	133,500	12.2%	864,800
PT Renewal Fee	294,042	2,334,830	464,650	42.3%	3,459,825
ENMG	50	650	0	0.0%	450
KEMG	300	850	100	0.0%	600
Automated Revenue Refund Claim	448	1,550	-450	0.0%	0
Overt/Short Fees	0	2	0	0.0%	0
TOTALS	385,540	2,934,030	597,800	54.5%	4,325,675
DELINQUENT LICENSE RENEWAL					
PTA Delinquent Fee	1,700	5,100	1,500	0.1%	4,890
PT Delinquent Fee	3,400	13,200	6,400	0.6%	28,400
EN Delinquent Fee	0	0	0	0.0%	25
EK Delinquent Fee	0	0	0	0.0%	25
TOTALS	5,100	20,000	7,900	0.7%	33,340
MISCELLANEOUS					
Public Sales (142500)	55	105	0	0.0%	10
Surplus Money Investments (150300)	2,339	8,714	18,953	1.7%	32,270
Attorney General Proceeds (160100)	0	33	0	0.0%	0
Unclaimed/Cancelled Warrants (161000)	-1,699	3,980	100	0.0%	3,708
Miscellaneous Income (161400)	825	2,179	121	0.0%	247
TOTALS	1,520	15,012	19,174	1.7%	36,235
SCHEDULED REIMBURSEMENTS					
Fingerprint Reports	12,887	37,327	15,321	1.4%	43,692
External/Private/Grant	2,585	8,225	940	0.1%	4,230
TOTALS	15,472	45,552	16,261	1.5%	47,922
UNSCHEDULED REIMBURSEMENTS					
Investigative Cost Recovery - Investigations	36,043	120,570	24,653	2.2%	120,696
Investigative Cost Recovery - Probation Monitoring	4,232	13,205	5,735	0.5%	18,259
TOTALS	40,275	133,775	30,388	0	138,954
TOTAL REVENUES	730,982	3,849,262	1,097,279		5,740,476



1. Chart shows Q4 revenues and % contributed to the quarterly revenue total.
2. Chart reveals, license renewals was the highest contributing revenue, followed by application and initial licensure.



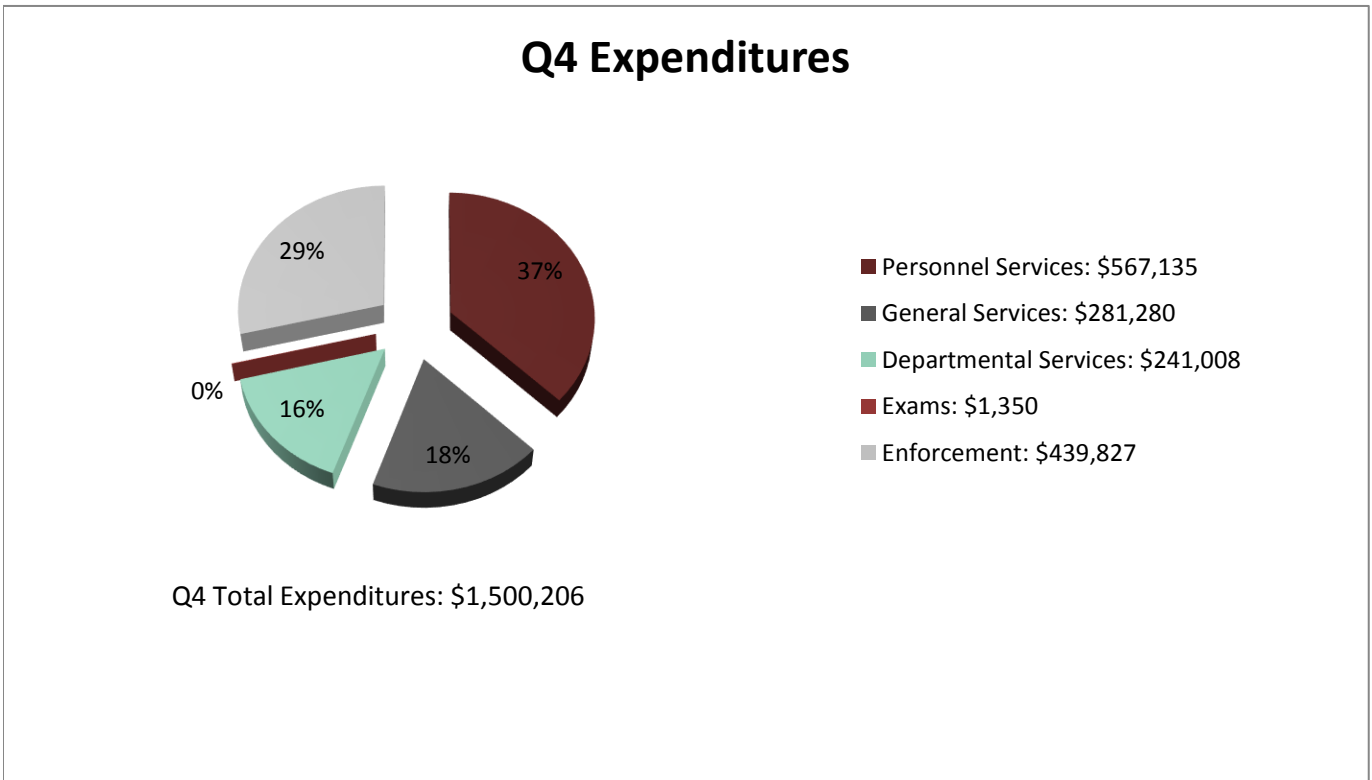
1. Chart shows Q4 and year-to-date revenues for both CY2016-17 and FY2015-16.
2. Chart reveals, revenues increased by 49% Q4 over FY 2015-16.

Physical Therapy Board of California
Expenditure Statistics Report
CY 2016-17 Q4 (As of 6/30/17)

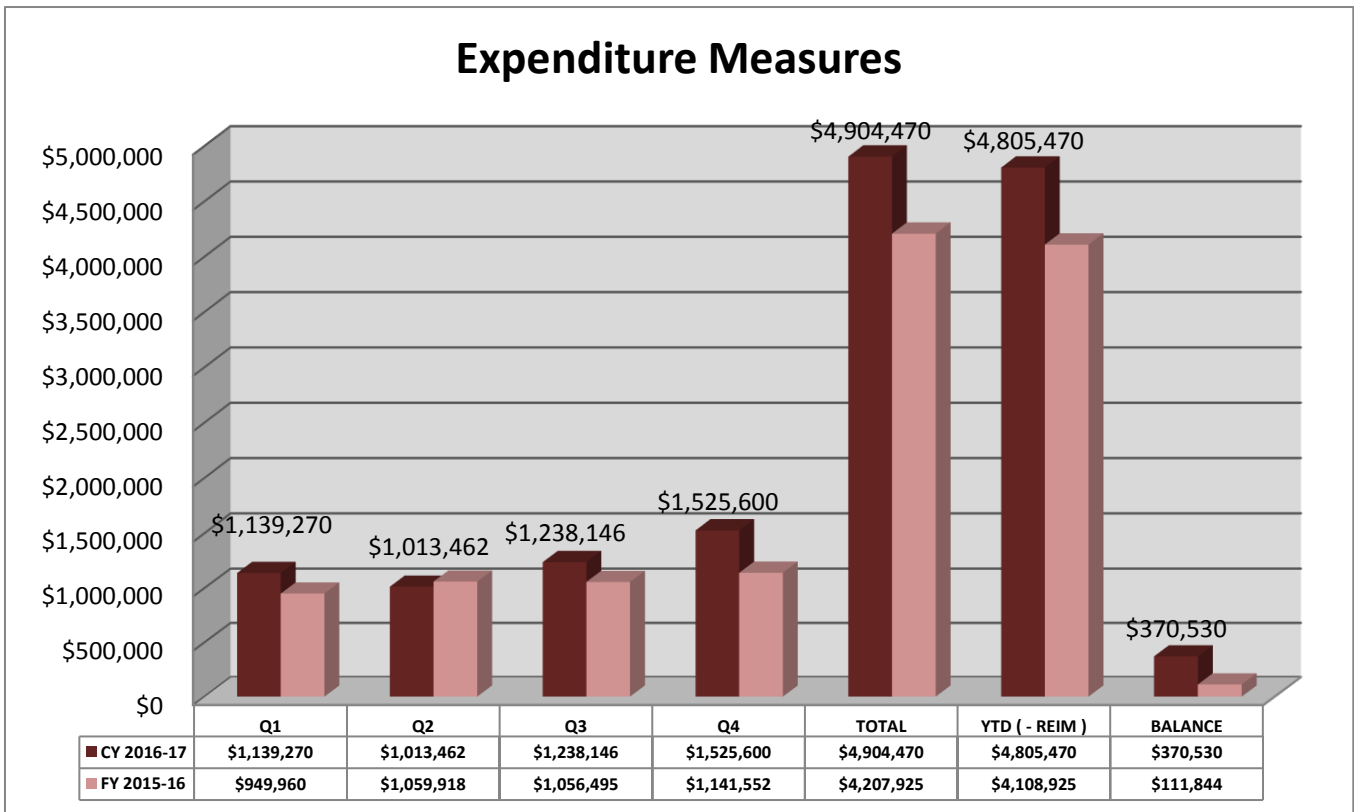
Expenditure Statistics Report

Budget Line Items	FY 2015 16		CY 2016 17				
	Q4 Apr - Jun	YTD As of 6/30/16	Authorized Budget	Q4 Apr - Jun	YTD As of 6/30/17	% of Budget Spent	Balance Remaining
PERSONNEL SERVICES							
Civil Services Permanent	247536	935630	1,192,000	312930	1,058,932	89%	133,068
Temp help	28232	114712	0	38001	131,027	-	(131,027)
Statutory Exempt	21258	87492	77,000	22252	87,304	113%	(10,304)
Board Members	9200	27700	25,000	9200	45,900	184%	(20,900)
Overtime	0	1196	0	0	43,021	-	(43,021)
Staff Benefits	153758	600637	694,000	184752	704,605	102%	(10,605)
TOTAL PERS SVS	459,984	1,767,367	1,988,000	567,135	2,070,789	104%	(82,789)
OPERATING EXPENSES & EQUIPMENT							
General Services Totals	68,946	284,365	451,500	281,280	508,203	113%	(56,703)
Fingerprints	6,846	38,256	99,000	12,804	43,160	44%	55,840
General Expense	3,890	16,804	17,000	3,044	24,799	146%	(7,799)
Minor Equipment	9,223	14,131	1,000	3,886	6,603	660%	(5,603)
Major Equipment	0	0	32,000	0	0	0%	32,000
Printing	5,850	17,968	20,000	7,999	22,753	74%	(2,753)
Communications	2,596	12,721	13,000	2,720	9,023	69%	3,977
Postage	3,503	23,562	24,000	3,877	10,031	42%	13,969
Insurance	0	0	0	20	20	-	
Travel in State	2,699	18,817	18,000	4,916	26,357	146%	(8,357)
Training	0	0	1,000	793	1,463	146%	(463)
Facilities Operations	28,102	112,592	118,000	228,952	312,592	265%	(194,592)
C&P Services Interdepartmental	0	0	500	0	0	0%	500
C&P Services External	6,237	29,514	108,000	12,269	51,402	48%	56,598
Departmental Services Totals	244,864	952,333	918,500	241,008	886,707	97%	31,793
OIS Pro Rata	141,250	545,819	603,000	155,250	581,183	96%	21,817
Indirect Distributed Cost	62,500	237,749	264,000	74,253	262,978	100%	1,022
Interagency Services	0	0	500	0	0	0%	500
DOI Pro Rata	1,250	4,916	7,000	1,753	6,439	92%	561
Communications Pro Rata	7,500	14,000	28,000	8,747	33,707	120%	(5,707)
PPRD Pro Rata	-4,000	0	10,000	497	1,308	13%	8,692
Consolidated Data Center	356	1,908	2,000	2	380	19%	1,620
Data Processing	0	3,906	4,000	506	712	18%	3,288
Central Admin Services Pro Rata	36,008	144,035	0	0	0	0%	0
Exams Totals	726	3,620	8,000	1,350	5,358	67%	2,642
Exam Administrative External	726	3,620	8,000	1,350	5,357	67%	2,643
Enforcement Totals	294,619	1,200,239	1,909,000	439,827	1,433,413	75%	475,587
Attorney General	91,149	460,159	655,000	131,917	350,331	53%	304,669
Office of Admin Hearings	20,985	61,041	110,000	20,823	45,493	2%	64,507
Evidence/Witness	19,203	71,012	100,000	18,615	53,267	53%	46,733
Evidence	0	0	0	5,000	5,000		(5,000)
Court Reporters	782	4,201	0	2,472	4,060	-	(4,060)
DOI Investigation	162,500	603,826	1,044,000	261,000	975,262	93%	68,738
TOTAL OE & E	609,155	2,440,557	3,287,000	963,465	2,833,681	86%	453,319
TOTALS, PERS SVS/OE&E	1,069,138	4,207,924	5,275,000	1,530,600	4,904,470	93%	370,530
Scheduled Reimbursements	(10,112)	(10,112)	(99,000)	(10,956)	(47,922)		(47,922)
Non-Scheduled Reimbursements	(40,446)	(53,448)	0	(19,438)	(51,078)		51,078
TOTALS, PERS SVS/OE&E (-REIM)	1,018,580	4,144,364	5,176,000	1,500,206	4,805,470	93%	370,530

*The PTBC is authorized to allocate \$99k of its revenues collected from scheduled/unscheduled reimbursements towards CY expenditures. Revenues over 99k are transferred to fund.



1. Chart shows Q4 expenditures and % contributed to the quarterly total expenses.
2. Chart reveals, personnel services was the highest contributing expense, followed by enforcement.



1. Chart shows total expenditures for Q4 for both CY2016-17 and FY2015-16.
2. Chart reveals, expenditures increased by 14% Q4 over FY 2015-16.

Physical Therapy Board of California
Budget Report - Q4
CY 2016-17

Revenue Source - Definition Key

Other Regulatory Fees

Citation/Fine FTB Collection	Fines collected by the Franchise Tax Board on behalf of PTBC for fines past due.
Admin Citation Fines-Various	Fines collected from administrative citations issued.
Endorsement Fee	Processing fee for endorsement (license verifications).
Duplicate License/Certification Fee	Processing fee for duplicate license or wall certificate.

Initial Application & License Fees

FPTA Application & Initial License	Application & Initial License processing fees for foreign educated Physical Therapist Assistants.
FPT Application	Application processing fee for foreign educated Physical Therapists.
FPT Initial License	Initial License processing fee for foreign educated Physical Therapists.
PTA Application & Initial License	Application and Initial License processing fee for U.S educated Physical Therapist Assistants.
PT Application	Application processing fee for U..S educated Physical Therapists.
PT Initial License	Initial License processing fee for U.S. educated Physical Therapists.
Refunded Reimbursements	Used for cashiering errors, i.e., fingerprint fee cashiered with application fee.
Over/Short	Application or Initial License Fees paid over or short of established fee.
Suspended Revenue	Fee unable to identify/allocate -temporarily cashiered in suspense (reconciled year-end).
Prior Year Revenue Adjustment	Correction of prior year revenue reported.

License Renewal Fees

Renewal - ENMG	Renewal Fees for Renewal ENMG Certification.
Renewal - KEMG	Renewal Fees for Renewal KEMG Certification.
Biennial Renewal - PTA	Renewal Fees for PTA license.
Biennial Renewal - PT	Renewal Fees for PT license.
Automated Revenue Refund Claim	Renewal Fees refunded to licensees (e.g., duplicate payments, etc.).
Over/Short Fee	Renewal Fees paid/collected over or short of established fee.

Miscellaneous Income

Public Sales	Services to Public - e.g., DCA sales of PT/PTA mailing list.
Surplus Money Investments	Shared Revenues by State Controllers Office of earned interest from investment.
Unclaimed Checks / Warrants	Cancelled warrant (check) paid to applicant/licensee/agency-uncashed for 1 year.
Miscellaneous Income (General)	Revenues collected, i.e., Franchise Tax Board collections, dishonored check fees, etc.

Scheduled Reimbursements

Fingerprint Cards	Scheduled Reimbursements - applicants/licensees fingerprint processing fees collected.
External/Private Grant	Scheduled Reimbursements - received for OIS Public Sales

Unscheduled Reimbursements

Investigative Cost Recovery	Money received from individuals for reimbursement of the investigative cost incurred by PTBC.
Probation Monitoring Cost Recovery	Money received from Probationers for their probation monitoring.

Physical Therapy Board of California
Budget Report - Q4
CY 2016-17

Expenditure Source - Definition Key	
Personnel Services	
Civil Services Permanent	Salary / Wages of civil service - permanent employees (authorized positions).
Statutory Exempt	Salary / Wages of employees appointed/elected to state (Executive Officer).
Temp help	Salary / Wages of employees in blanket (permanent-intermittent/retired annuitant).
Board Commission	Per Diem reimbursement (Board Members).
Overtime	Ordered work time in excess of employee regular scheduled workweek.
Staff Benefits	Employer contributions for health, dental, vision, etc. (permanent, exempt and temp).
General Services	
Fingerprints	Criminal and background checks by DOJ (new employees, applicants and licensees).
General Expense	Office supplies, freight (FedEx), subscriptions, admin overhead (DGS charge: purchase orders, contracts, etc.).
Minor Equipment	Replacement/additional equipment - less than \$5k per unit (copier, fax, etc.).
Major Equipment	Replacement/additional equipment - over \$5k per unit (copier, printer, etc.).
Printing	Publications, i.e., strategic plan, newsletter, etc. printed by State Printing and DCA.
Communication	Office and staff land lines, fax line, etc.
Postage	Standard U.S. mail, certified mail, wall certificate, pocket license, renewal notice, etc.
Insurance	DGS Invoice for Risk management services
Travel In-State and Out-of-State	Travel reimbursements, i.e., per diem, lodging, transportation, business expense, and CalAters.
Training	Tuition/registration fees for training classes/conferences through External Vendors.
Facilities Ops	Rent - Building and Grounds (Non-State Owned), includes, self storage and utility charges.
C&P Services Internal	Consultant/Professional services provided by other state agencies or DCA interagency agreement.
C&P Services External	Consultant/Professional Services provided by external agency, i.e., online credit card payments.
Departmental Services	
*OIS Pro Rata	DCA- Office of Information Services, i.e., PC Support, Telecom, etc.
*Indirect Distributed Cost Pro Rata	DCA - Office of Administrative Services, i.e., Personnel, Budgets, etc.
*DOI Pro Rata	DCA Special Operations Unit Services i.e., criminal background checks on employees.
*Communications Pro Rata	DCA Media Services, i.e., responses, creation/execution of marketing plans and outreach.
*PPRD Pro Rata	Conveys boards message to public through publications, i.e., outreach, correspondence, etc.
*Central Admin Services Pro Rata	Administrative Services conducted by CalHR, DOF, SCO, State Treasurer, Legislature, Agency, etc.
<i>*DCA Pro-Rata is based on annual assessment of program size, workload, and overall operational need of services. Adjustments are made annually.</i>	
Interagency Services	Services provided by another DCA-Board/Bureau to PTBC (inter-agency agreement).
Consolidated Data Center	TEALE data center i.e., costs for maintaining records on Consumer Affairs System (CAS).
Data Processing	Technology maintenance, copier/printer paper, software, hardware, electronic waste recycling and disposal.
Exams	
C/P Administrative	External -Consultant/Professional Services (i.e. FSBPT service contract).
C/P Exam Subject Matter Experts	External -Consultant/Professional Services: Wages for services provided by Subject Matter Experts in the oral/written exam process, including travel.
Enforcement	
Attorney General	Services provided for enforcement case process initiated to the Attorney General Office.
Office of Admin Hearings	Services provided for hearing officer, administrative law judges, and filing fees, etc.
Evidence/Witness	Services provided by witness, i.e., witness fee, hourly wages, travel expenses, undercover operative fees; and, cost of film, including medical services for use as evidence, etc.
Court Reporters	Services provided by Court Reporter, including transcriptions (i.e. hearing transcripts, etc.).
DOI Investigation	Services provided by Division of Investigations (DOI) for investigative services.

0759 - Physical Therapy Analysis of Fund Condition

8/16/2017

(Dollars in Thousands)

2017 Budget Act

FY 16-17 Actual Expenditures and Revenue

	ACTUAL 2016-17	CY 2017-18	BY 2018-19	BY+1 2019-20	BY+2 2020-21
BEGINNING BALANCE	\$ 1,453	\$ 2,046	\$ 2,585	\$ 3,133	\$ 3,687
Prior Year Adjustment	\$ -	\$ -	\$ -	\$ -	\$ -
Adjusted Beginning Balance	\$ 1,453	\$ 2,046	\$ 2,585	\$ 3,133	\$ 3,687
REVENUES AND TRANSFERS					
Revenues:					
125600 Other regulatory fees	\$ 102	\$ 109	\$ 109	\$ 109	\$ 109
125700 Other regulatory licenses and permits	\$ 1,056	\$ 1,096	\$ 1,096	\$ 1,096	\$ 1,096
125800 Renewal fees	\$ 4,326	\$ 4,386	\$ 4,386	\$ 4,386	\$ 4,386
125900 Delinquent fees	\$ 33	\$ 30	\$ 30	\$ 30	\$ 30
150300 Income from surplus money investments	\$ 32	\$ 22	\$ 31	\$ 37	\$ 41
161000 Escheat of unclaimed checks and warrants	\$ 4	\$ 4	\$ 4	\$ 4	\$ 4
161400 Miscellaneous revenues	\$ -	\$ 2	\$ 2	\$ 2	\$ 2
Totals, Revenues	\$ 5,553	\$ 5,649	\$ 5,658	\$ 5,664	\$ 5,668
Totals, Revenues and Transfers	\$ 5,553	\$ 5,649	\$ 5,658	\$ 5,664	\$ 5,668
Totals, Resources	\$ 7,006	\$ 7,695	\$ 8,243	\$ 8,797	\$ 9,355
EXPENDITURES					
Disbursements:					
1111 Program Expenditures (State Operations)	\$ 4,741	\$ 4,807	\$ 4,807	\$ 4,807	\$ 4,903
8880 Financial Information System for California (State Operations)	\$ 5	\$ 6	\$ 6	\$ 6	\$ 6
9900 Statewide Admin. (State Operations)	\$ 214	\$ 297	\$ 297	\$ 297	\$ 297
Total Disbursements	\$ 4,960	\$ 5,110	\$ 5,110	\$ 5,110	\$ 5,206
FUND BALANCE					
Reserve for economic uncertainties	\$ 2,046	\$ 2,585	\$ 3,133	\$ 3,687	\$ 4,149
Months in Reserve	4.8	6.1	7.4	8.5	9.4

NOTES:

- A. ASSUMES WORKLOAD AND REVENUE PROJECTIONS ARE REALIZED IN BY+1 AND ONGOING
- B. ASSUMES APPROPRIATION GROWTH OF 2% PER YEAR BEGINNING IN BY+2
- C. ASSUMES 1% GROWTH IN INCOME FROM SURPLUS MONEY



Physical Therapy Board of California

BUSINESS, CONSUMER SERVICES, AND HOUSING AGENCY - GOVERNOR EDMUND G. BROWN JR.

Physical Therapy Board of California

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Briefing Paper

Date: 07/28/17

Prepared for: PTBC Members

Prepared by: Sarah Conley

Subject: Application Services Report

Purpose:

To provide an update on the most recent activities of the Application Services program

Attachments:

1. [Application Services Program Statistics](#)
2. [Examination Statistics](#)
3. [5-Year Data Comparison](#)

Update:

Attached you will find FY 2016/17 year-end statistics as compared to FY 2015/16 year-end statistics in addition to a 5-year data comparison. The year-to-year comparison reflects the continued trend of a significant increase in physical therapist assistant applications for all qualification methods. Overall applications received increased 21% - the standard budget forecast accounts for a 3% increase annually. Although not provided in the statistics report, staff identified that 35% of applicants in FY 2016/17 applied by endorsement. Endorsement applicants qualify for licensure by holding a current and valid license in another physical therapy licensing jurisdiction.

The 5-year data comparison includes data collected from legacy systems (CAS and ATS) and Breeze. The PTBC transitioned from legacy systems to Breeze on January 19, 2016. From FY 2012/13 to FY 2016/17, there has been a 46% increase in the number of applications received and a 52% increase in the number of licenses issued. The National Physical Therapy Exam (NPTE) pass rate has increased overall while the California Law Exam (CLE) pass rate has decreased. For both the NPTE and CLE, the number of examinees from accredited programs has increased while the number of examinees from non-accredited programs located outside the U.S. has decreased.

Action Requested:

None.

Applications Services Report Program Statistics

Applications Received

	Fiscal Year 2015/16						Fiscal Year 2016/17						Year → Year Change								
	Q1		Q2		Q3		Q4		YTD through Q4		Q1			Q2		Q3		Q4		YTD through Q4	
	Jul	Sep	Oct	Dec	Jan	Mar	Apr	Jun	Jul	Sep	Oct	Dec		Jan	Mar	Apr	Jun				
PT	455		261		199		581		1496		484		422		319		501		1726		↑ 15%
FPT	63		50		50		85		248		75		72		67		49		263		↑ 6%
PTA	94		167		122		96		479		139		234		137		183		693		↑ 45%
FPTA	15		16		14		18		63		18		18		23		20		79		↑ 25%
E-PTA	3		0		3		2		8		2		4		4		4		14		↑ 75%
Total	630		494		388		782		2294		718		750		550		757		2775		↑ 21%

Licenses Issued

	Fiscal Year 2015/16						Fiscal Year 2016/17						Year → Year Change								
	Q1		Q2		Q3		Q4		YTD through Q4		Q1			Q2		Q3		Q4		YTD through Q4	
	Jul	Sep	Oct	Dec	Jan	Mar	Apr	Jun	Jul	Sep	Oct	Dec		Jan	Mar	Apr	Jun				
PT	523		436		271		213		1443		630		480		317		138		1565		↑ 8%
PTA	161		116		102		120		499		184		159		198		74		615		↑ 23%
Total	684		552		373		333		1942		814		639		515		212		2180		↑ 12%

PT - Graduate of an accredited physical therapist program located in the U.S.

FPT - Graduate of a non-accredited physical therapist program located outside the U.S. applying for PT licensure

PTA - Graduate of an accredited physical therapist assistant program located in the U.S.

FPTA - Graduate of a non-accredited physical therapist program located outside the U.S. applying for PTA licensure

E-PTA - PTA applicant with training and experience equivalent to that obtained in an accredited PTA program

Application Services Report Examination Statistics

National PT and PTA Examination - California Statistics

Accredited PT Program

	Fiscal Year 2015/16											Year → Year Change				
	Q1		Q2		Q3		Q4		YTD through Q4							
	Jul	Sep	Oct	Dec	Jan	Mar	Apr	Jun								
Pass	271		268		157		29		725			371	246	117	32	↑6%
Fail	29		61		39		22					29	44	22	8	↓-32%
Total	300		329		196		51					400	290	139	40	↓-1%
Pass Rate	90%		81%		80%		57%					93%	85%	84%	80%	↑9%

Pass	7	9	5	13		9	15	5	14		⬆️			
Fail	39	49	16	23		24	35	24	17		⬆️			
Total	46	58	21	36		33	50	29	31		⬆️			
Pass Rate	15%	16%	24%	36%		27%	30%	17%	45%		⬆️			

Pass	116	83	86	66		181	71	138	64		⬆️			
Fail	53	30	26	50		48	36	31	25		⬆️			
Total	169	113	112	116		229	107	169	89		⬆️			
Pass Rate	69%	73%	77%	57%		79%	66%	82%	72%		⬆️			

Pass	4	13	8	3		2	8	5	6		↓			
Fail	9	15	9	6		11	15	10	10		↑			
Total	13	28	17	9		13	23	15	16		→			
Pass Rate	31%	46%	47%	33%		15%	35%	33%	38%		↓			

California Law Examination (CLE)

Accredited Program

	Fiscal Year 2015/16										Fiscal Year 2016/17										Year → Year Change
	Q1		Q2		Q3		Q4		YTD through Q4	Q1		Q2		Q3		Q4		YTD through Q4			
	Jul	Sep	Oct	Dec	Jan	Mar	Apr	Jun		Jul	Sep	Oct	Dec	Jan	Mar	Apr	Jun				
Pass	648		502		335		341		1,826	893		503		399		600		2,395	↑ 31%		
Fail	271		233		165		201		870	433		270		243		259		1,205	↑ 39%		
Total	919		735		500		542		2,696	1,326		773		642		859		3,600	↑ 34%		
Pass Rate	71%		68%		67%		63%		67%	67%		65%		62%		70%		66%	↓ -1%		

Physical Therapy Board of California
Application Services Report
Fiscal Year 2016-17 Q4

Pass	51	40	43	41		71	55	49	50		↑
Fail	34	36	28	40		48	53	41	47		↑
Total	85	76	71	81		119	108	90	97		↑
Pass Rate	60%	53%	61%	51%		60%	51%	54%	52%		↓

National PT and PTA Examination - National Statistics

Accredited PT Program

	Fiscal Year 2015/16							Fiscal Year 2016/17							Year → Year Change		
	Q1		Q2		Q3		Q4	YTD through Q4	Q1		Q2		Q3			Q4	YTD through Q4
	Jul	Sep	Oct	Dec	Jan	Mar	Apr		Jun	Jul	Sep	Oct	Dec	Jan		Mar	
Pass	4,613		1,416		1,170		2,165	9,364	4,980		1,452		1,137		2,519	10,088	↑8%
Fail	635		641		281		241	1,798	451		398		226		198	1,273	↓-29%
Total	5,248		2,057		1,451		2,406	11,162	5,431		1,850		1,363		2,717	11,361	↑2%
Pass Rate	88%		69%		81%		90%	82%	92%		78%		83%		93%	87%	↑5%

Non Accredited PT Program

	Fiscal Year 2015/16									Fiscal Year 2016/17									Year → Year Change
	Q1		Q2		Q3		Q4		YTD through Q4	Q1		Q2		Q3		Q4		YTD through Q4	
	Jul	Sep	Oct	Dec	Jan	Mar	Apr	Jun		Jul	Sep	Oct	Dec	Jan	Mar	Apr	Jun		
Pass	324		316		218		247		1,105	346		301		215		281		1,143	↑3%
Fail	888		1,111		361		445		2,805	548		676		498		462		2,184	↓-22%
Total	1,212		1,427		579		692		3,910	894		977		713		743		3,327	↓-15%
Pass Rate	27%		22%		38%		36%		31%	39%		31%		30%		38%		35%	↑4%

Accredited PTA Program

	Fiscal Year 2015/16										Fiscal Year 2016/17										Year → Year Change
	Q1		Q2		Q3		Q4		YTD through Q4		Q1		Q2		Q3		Q4		YTD through Q4		
	Jul	Sep	Oct	Dec	Jan	Mar	Apr	Jun			Jul	Sep	Oct	Dec	Jan	Mar	Apr	Jun			
Pass	3,167		1,523		903		1,072		6,665		3,252		1,444		989		1,105		6,790	↑2%	
Fail	755		687		404		454		2,300		681		606		414		336		2,037	↓-11%	
Total	3,922		2,210		1,307		1,526		8,965		3,933		2,050		1,403		1,441		8,827	↓-2%	
Pass Rate	81%		69%		69%		70%		72%		83%		70%		70%		77%		75%	↑3%	

Non Accredited PTA Program

	Fiscal Year 2015/16									Fiscal Year 2016/17									Year → Year Change
	Q1		Q2		Q3		Q4		YTD through Q4	Q1		Q2		Q3		Q4		YTD through Q4	
	Jul	Sep	Oct	Dec	Jan	Mar	Apr	Jun		Jul	Sep	Oct	Dec	Jan	Mar	Apr	Jun		
Pass	67		104		76		58		305	75		102		63		87		327	⬆️ 7%
Fail	86		113		56		61		316	75		82		63		71		291	⬆️ -8%
Total	153		217		132		119		621	150		184		126		158		618	⬆️ 0%
Pass Rate	44%		48%		58%		49%		50%	50%		55%		50%		55%		53%	⬆️ 3%

Physical Therapy Board of California
Application Services Report
Fiscal Year 2016-17 Q4

Jurisprudence Examination - National Statistics																					
Accredited Program																					
	Fiscal Year 2015/16										Fiscal Year 2016/17										Year → Year Change
	Q1		Q2		Q3		Q4		YTD through Q4	Q1		Q2		Q3		Q4		YTD through Q4			
	Jul	Sep	Oct	Dec	Jan	Mar	Apr	Jun		Jul	Sep	Oct	Dec	Jan	Mar	Apr	Jun				
Pass	2,091		1,478		1,076		2,010		6,655	2,262		1,290		1,063		2,039		6,654	↓ 0%		
Fail	556		515		357		479		1,907	697		450		378		432		1,957	↑ 3%		
Total	2,647		1,993		1,433		2,489		8,562	2,959		1,740		1,441		2,471		8,611	↑ 1%		
Pass Rate	79%		74%		75%		81%		77%	76%		74%		74%		83%		77%	↓ -1%		

Non Accredited Program																					
	Fiscal Year 2015/16										Fiscal Year 2016/17										Year → Year Change
	Q1		Q2		Q3		Q4		YTD through Q4	Q1		Q2		Q3		Q4		YTD through Q4			
	Jul	Sep	Oct	Dec	Jan	Mar	Apr	Jun		Jul	Sep	Oct	Dec	Jan	Mar	Apr	Jun				
Pass	117		126		117		108		468	145		120		121		116		502	↑ 7%		
Fail	51		69		56		77		253	74		82		76		72		304	↑ 20%		
Total	168		195		173		185		721	219		202		197		188		806	↑ 12%		
Pass Rate	70%		65%		68%		58%		65%	66%		59%		61%		62%		62%	↓ -3%		

Applications Services Report 5-Year Data Comparison

Applications Received

	FY 2012/13	FY 2013/14	FY 2014/15	FY 2015/16	FY 2016/17	5-Year % Δ
PT	1127	1204	1300	1496	1726	53%
FPT	309	311	239	248	263	-15%
PTA	400	422	535	479	693	73%
FPTA	48	71	87	63	79	65%
E-PTA	19	6	12	8	14	-26%
Total	1906	2018	2173	2294	2775	46%

Licenses Issued

	FY 2012/13	FY 2013/14	FY 2014/15	FY 2015/16	FY 2016/17	5-Year % Δ
PT	1150	1192	1255	1443	1565	36%
PTA	281	354	460	499	615	119%
Total	1431	1546	1685	1942	2180	52%

Exams - Pass Rate

	FY 2012/13	FY 2013/14	FY 2014/15	FY 2015/16	FY 2016/17	5-Year Pass Rate Δ
NPTE PT	81%	82%	74%	77%	86%	5%
NPTE FPT	14%	13%	19%	23%	30%	16%
NPTE PTA	59%	67%	66%	69%	75%	16%
NPTA FPT	27%	38%	41%	39%	30%	3%
CLE PT/PTA	82%	63%	68%	67%	66%	-16%
CLE FPT/PTA	68%	47%	52%	56%	54%	-14%

Exams - Examinees

	FY 2012/13	FY 2013/14	FY 2014/15	FY 2015/16	FY 2016/17	5-Year % Δ
NPTE PT	816	759	705	876	869	6%
NPTE FPT	261	254	190	161	143	-45%
NPTE PTA	282	410	487	510	594	111%
NPTA FPT	101	64	82	67	67	-34%
CLE PT/PTA	1502	2285	2301	2696	3600	140%
CLE FPT/PTA	265	479	427	313	141	-47%

PT - Graduate of an accredited physical therapist program located in the U.S.

FPT - Graduate of a non-accredited physical therapist program located outside the U.S. applying for PT licensure

PTA - Graduate of an accredited physical therapist assistant program located in the U.S.

FPTA - Graduate of a non-accredited physical therapist program located outside the U.S. applying for PTA licensure

E-PTA - PTA applicant with training and experience equivalent to that obtained in an accredited PTA program



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Briefing Paper

Date: 7/28/17
Prepared for: PTBC Members
Prepared by: Sarah Conley
Subject: License Maintenance Services Report

Purpose:

To provide an update on the most recent activities of the License Maintenance Services program

Attachments:

1. [License Maintenance Services Program Statistics](#)
2. [5-Year Data Comparison](#)
3. [Continuing Competency Audit Statistics](#)

Update:

Attached you will find FY 2016/17 year-end statistics as compared to FY 2015/16 year-end statistics in addition to a 5-year data comparison. The number of active physical therapist assistant licenses increased significantly since last year which is consistent with the applications received data in the Application Services report. Although the year-to-year change for miscellaneous transactions differs by type, the overall number of transactions processed has decreased by 7%.

The 5-year data comparison includes data collected from legacy systems (CAS and ATS) and Breeze. The PTBC transitioned from legacy systems to Breeze on January 19, 2016. From FY 2012/13 to FY 2016/17, there has been an increase in active physical therapist and physical therapist assistant licenses. The active physical therapist license population is growing as expected while the active physical therapist assistant license population has grown at almost double the expected rate. The inactive physical therapist and physical therapist assistant license population has decreased overall. Retired license status use continues to grow. Authority for retired license status went into effect January 1, 2014 which is why no data is available for FY 2012/13.

Staff has completed FY 2016/17 Q3 continuing competency audits. For this audit quarter, 143 physical therapists and 37 physical therapist assistants were selected; this is 10% of the licensees that renewed and were eligible for audit. The audit results showed substantial compliance with a 93% pass rate for physical therapists and a 95% pass rate for physical therapist assistants. Staff continues to work with approval agencies on obtaining current information and is updating the PTBC website accordingly.

Action Requested:

None.

Physical Therapy Board of California
License Maintenance Services Report
Fiscal Year 2016/17 Q4

License Maintenance Services Report Program Statistics

Active License Status

	FY 2015/16	Fiscal Year 2016/17							Year → Year Change		
	YTD through Q4	Q1		Q2		Q3		Q4		YTD through Q4	
		Jul	Sep	Oct	Dec	Jan	Mar	Apr			Jun
PT	23580	23728		24216		24261		24285		24285	⬆️ 3%
PTA	5660	6055		6231		6402		6415		6415	⬆️ 13%
Total	29240	29783		30447		30663		30700		30700	⬆️ 5%

Inactive License Status

	FY 2015/16	Fiscal Year 2016/17							Year → Year Change		
	YTD through Q4	Q1		Q2		Q3		Q4		YTD through Q4	
		Jul	Sep	Oct	Dec	Jan	Mar	Apr			Jun
PT	1399	1298		1320		1271		1247		1247	↓ -11%
PTA	356	349		360		338		336		336	↓ -6%
Total	1755	1647		1680		1609		1583		1583	↓ -10%

Retired License Status

	FY 2015/16	Fiscal Year 2016/17										Year → Year Change
	YTD through Q4	Q1		Q2		Q3		Q4		YTD		
		Jul	Sep	Oct	Dec	Jan	Mar	Apr	Jun			
PT/PTA	137	140		149		181		193		193	↑ 41%	

Active Specialty Certifications

	FY 2015/16	Fiscal Year 2016/17						Year → Year Change		
	YTD through Q4	Q1		Q2		Q3			Q4	YTD through Q4
		Jul	Sep	Oct	Dec	Jan	Mar		Apr	
KEMG	26	26		28		27		27		↑ 4%
ENMG	21	22		22		21		20		↓ -5%
Total	47	48		50		48		47		⇒ 0%

Transactions Processed

	FY 2015/16	Fiscal Year 2016/17						Year → Year Change			
	YTD through Q4	Q1		Q2		Q3			Q4		YTD through Q4
		Jul	Sep	Oct	Dec	Jan	Mar		Apr	Jun	
Renewals	15750	3695		3570		3741		3925		14931	📉 -5%
Addresses	5344	1453		1117		1159		1105		4834	📉 -10%
Names	994	120		84		117		93		414	📉 -58%
Duplicates	292	96		102		129		110		437	📈 50%
Verifications	961	292		246		276		336		1150	📈 20%
Total	23341	5656		5119		5422		5569		21766	📉 -7%

Physical Therapy Board of California
License Maintenance Services Report
Fiscal Year 2016/17 Q4

License Maintenance Services Report 5-Year Data Comparison

Active License Status

	FY 2012/13	FY 2013/14	FY 2014/15	FY 2015/16	FY 2016/17	5-Year % Δ
PT	21754	22059	22705	23580	24285	12%
PTA	5267	5368	5696	5660	6415	22%
KEMG	30	29	31	26	27	-10%
ENMG	21	23	23	21	20	-5%
Total	27072	27479	28455	29287	30747	14%

Inactive License Status

	FY 2012/13	FY 2013/14	FY 2014/15	FY 2015/16	FY 2016/17	5-Year % Δ
PT	1418	1370	1592	1399	1247	-12%
PTA	406	377	420	356	336	

Retired License Status

	FY 2012/13	FY 2013/14	FY 2014/15	FY 2015/16	FY 2016/17	5-Year % Δ
PT/PTA	N/A	31	75	137	193	523%*

*From FY 2013/14

Active Speciality Certifications

	FY 2012/13	FY 2013/14	FY 2014/15	FY 2015/16	FY 2016/17	5-Year % Δ
KEMG	30	29	31	26	27	-10%
ENMG	21	23	23	21	20	-5%
Total	51	52	54	47	47	-8%

Physical Therapy Board of California
License Maintenance Services Report
Fiscal Year 2016/17 Q4

Continuing Competency Audit Statistics

Physical Therapist

Accredited PT Program

	Fiscal Year 2015/16										Fiscal Year 2016/17										Year → Year Change
	Q1		Q2		Q3		Q4		YTD through Q3	Q1		Q2		Q3		Q4		YTD through Q3			
	Jul	Sep	Oct	Dec	Jan	Mar	Apr	Jun		Jul	Sep	Oct	Dec	Jan	Mar	Apr	Jun				
Pass															134			134	↑ 100%		
Fail															9			9	↑ 100%		
Total															143			143	↑ 100%		
Pass Rate															93%			93%	↑ 93%		

Physical Therapist Assistant

Accredited Program

	Fiscal Year 2015/16										Fiscal Year 2016/17										Year → Year Change
	Q1		Q2		Q3		Q4		YTD through Q3	Q1		Q2		Q3		Q4		YTD through Q3			
	Jul	Sep	Oct	Dec	Jan	Mar	Apr	Jun		Jul	Sep	Oct	Dec	Jan	Mar	Apr	Jun				
Pass															37			37	↑ 100%		
Fail															2			2	↑ 100%		
Total															39			39	↑ 100%		
Pass Rate															95%			95%	↑ 95%		



Physical Therapy Board of California

BUSINESS, CONSUMER SERVICES, AND HOUSING AGENCY - GOVERNOR EDMUND G. BROWN JR.

Physical Therapy Board of California

Consumer Protection Services Program

2005 Evergreen St. Suite 1350, Sacramento, California 95815

Phone: (916) 561-8200, Ext. 8215 Fax: (916) 263-2560 TOLL FREE 1-800-832-2251

Internet: www.ptbc.ca.gov EMAIL cps@dca.ca.gov



Briefing Paper

Date: August 15, 2017

Prepared for: PTBC Members

Prepared by: Elsa Ybarra

SUBJECT: Consumer Protection Services Program (CPS)

Purpose: Consumer Protection Services Program and Update on CPS Performance Measures

Attachments:
 1: [Enforcement Statistics Report](#)
 2: [Quarter 3 \(January – March 2017\) – Enforcement Performance Measures \(PM\)](#)
 3: [5 Year - Performance Measures](#)
 4: [Quarter 4 \(April – June\) - Disciplinary Summary](#)

Attachment 1: Consumer Protection Services Report

The CPS report provides detailed data in certain areas of the enforcement program and includes year end statistics in comparison to last FY. The year to year comparison reflects a slight increase of 9% in the number of cases initiated and a continued increase of 7% in the number of conviction/arrest cases initiated. The year to year comparison also reflects a decrease in many areas of the enforcement process. Most importantly a 27% decrease in the average days to complete investigations, and a 30% decrease to complete cases transmitted to the AGs office.

Attachment 2: FY 2016-2017/Q3 - Enforcement Performance Measures

The Enforcement Performance Measures report is reported on the DCA's public website on a quarterly basis and is used by all DCA organizations to provide the public its Performance Measures. At the May Board Meeting, it was reported that Q3 Performance Measures report was not available; however, is being reported at this time. This report (Q3) does not include PM7 and PM8; however, will be corrected to reflect the appropriate data. Q4 (April – June 2017) is currently being worked and will be presented at the November 2017 Board Meeting.

Attachment 3: Five Year Performance Measures

This report reflects the last 5 fiscal year performance measures. In addition to transitioning to BreEZe in 2016, additional sub-PMs were developed to improve transparency. Therefore, the sub-PMs for the first three FYs are not included. This 5-year Performance Measures Milestone reflects higher averages in FYs 2014/15 and 2015/16 in both PM3 (Cycle time to close cases without discipline) and PM4 (Cycle time to close with discipline); however, decreases the following fiscal year. The decrease is a result of improved processes both internally and AG's Office.

Attachment 4: FY 2016-2017/Q4 – Disciplinary Summary

The Disciplinary Summary reports formal discipline and citations issued for FY 2016-2017, Quarter 4 (April – June 2017). Disciplinary actions are of public record and are available through the BreEZe online license lookup.

Action Requested:

No Action Required

Consumer Protection Services Statistics Report

Complaint Intake

	FY 2015/16						
	YTD						
PM1: Complaints Received	409	81	207	78	93		↑
PM1: Convictions/Arrest Received	294	124	81	47	58		↑
PM1: Total Received	703	205	288	125	151		↑

PM2: Intake/Avg. Days		3	2	3	2		↓

PM3: Cycle Time-Investigation		126	91	96	123		↓
PM3a: Intake Only		2	2	2	3		↓
PM3b: Investigation Only		114	90	86	116		↓
PM3c: Post Investigation Only		8	0	4	5		↓

Up to 90 Days		126	117	167	90		↑
91 - 180 Days		17	17	41	21		↓
181 Days - 1 Year (364)		15	14	14	17		↓
1 to 2 Years (365-730)		14	4	7	4		↓
2 to 3 Years (731- 1092)		2	3	3	4		↓
Over 3 Years (1093 +)		1	1	0	1		↓

Citations

	FY 2015/16						
	YTD						
Final Citations	77	10	9	10	9		↓
Average Days to Close	341	542	327	280	246		↑

Transmittals to Attorney General (AG)

	FY 2015/16	Fiscal Year 2016/17					Year → Year Change	
	YTD	Q1	Q2	Q3	Q4	YTD		
PM4: AG Cases	793	715	379	668	568	583	↓	-27%
PM4a: Intake Only	4	2	1	2	2	2	↓	-56%
PM4b: Investigation Only	322	251	132	351	243	244	↓	-24%
PM4c: Pre-AG Transmittal	3	2	1	1	1	1	↓	-58%
PM4d: Post-AG Transmittal	492	460	247	308	325	335	↓	-32%

Physical Therapy Board of California
Consumer Protection Services Report
Fiscal Year 2016/2017

		Fiscal Year 2016/17					Year → Year Change
		Q1	Q2	Q3	Q4	YTD	
AG Cases Initiated		9	9	15	18	51	↑ 46%
AG Cases Pending		15	14	35	36	36	↑ 29%
SOIs Filed		2	0	1	1	4	↑ 33%
Accusations Filed		4	4	5	7	20	↓ -9%

AG Transmittals							
	FY 2015/16	Fiscal Year 2016/17					Year → Year Change
	YTD	Q1	Q2	Q3	Q4	YTD	
Total Closed After Transmission	61	10	5	7	11	33	↓ -46%
Total Average Days to Complete	793	715	379	668	568	583	↓ -36%

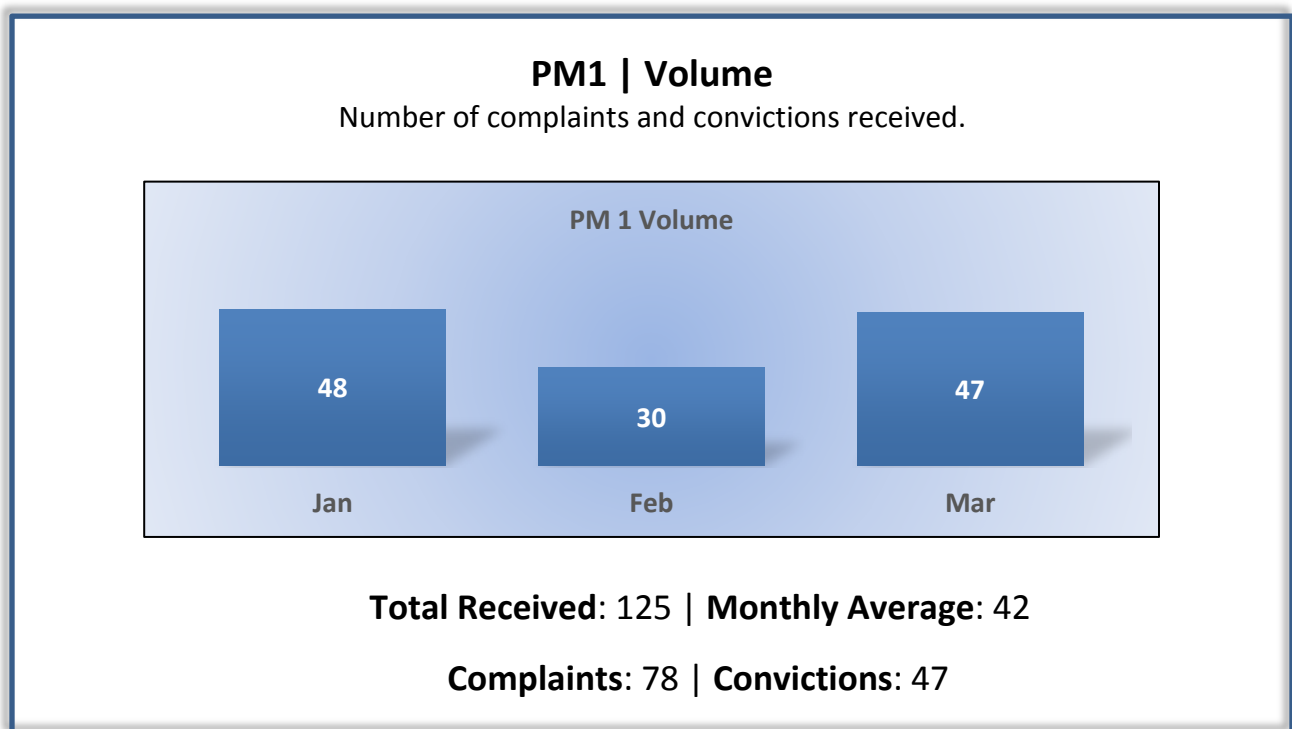
Total Orders Aging/Final Decision							
	FY 2015/16	Fiscal Year 2016/17					Year → Year Change
	YTD	Q1	Q2	Q3	Q4	YTD	
Up to 90 Days	0%	0	0	0	0	0	→ 0%
91 - 180 Days	3%	0	1	0	1	5%	↑ 50%
181 Days - 1 Year (364)	7%	1	2	1	4	24%	↑ 17%
1 to 2 Years (365-730)	43%	5	2	4	3	42%	↓ -1%
2 to 3 Years (731- 1092)	26%	2	0	1	2	14%	↓ -12%
Over 3 Years (1093 +)	21%	2	0	1	1	12%	↓ -9%

Other Legal Actions							
	FY 2015/16	Fiscal Year 2016/17					Year → Year Change
	YTD	Q1	Q2	Q3	Q4	YTD	
Interim Suspension & PC 23 Ordered	5	1	0	2	0	3	↓ -40%

Enforcement Performance Measures

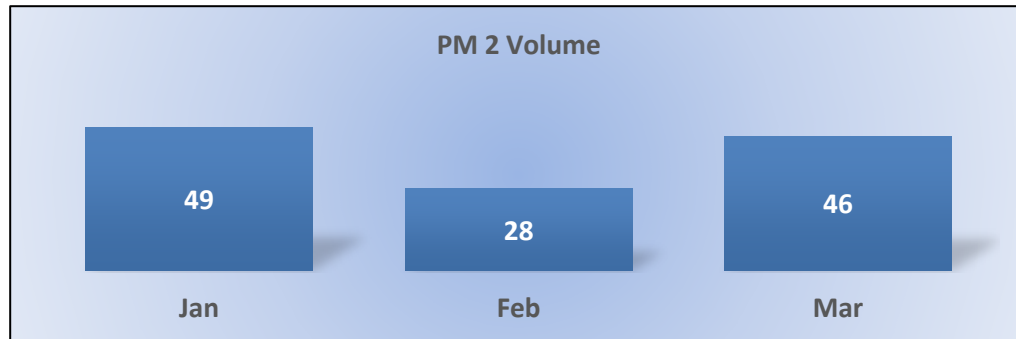
Q3 Report (January – March 2017)

To ensure stakeholders can review the Board's progress toward meeting its enforcement goals and targets, we have developed a transparent system of performance measurement. These measures will be posted publicly on a quarterly basis.



PM2 | Intake – Volume

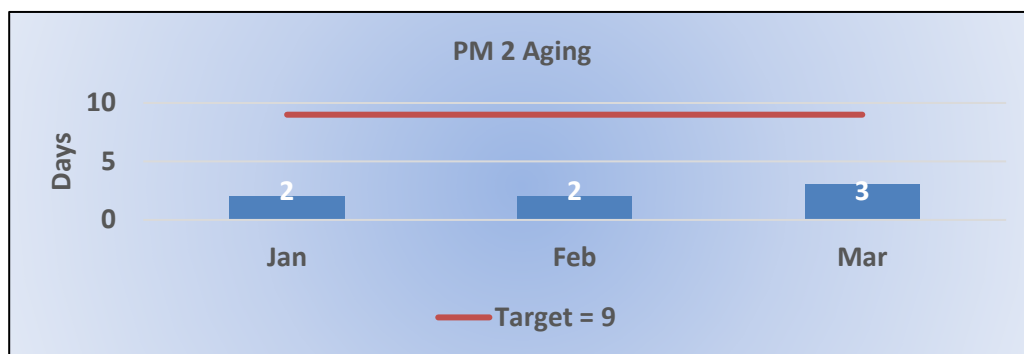
Number of complaints closed or assigned to an investigator.



Total: 123 | Monthly Average: 41

PM2 | Intake – Cycle Time

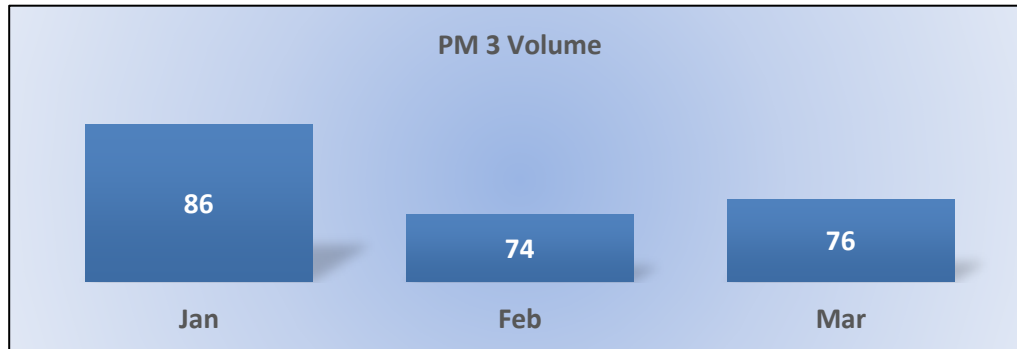
Average number of days from complaint receipt, to the date the complaint was closed or assigned to an investigator.



Target Average: 9 Days | Actual Average: 3 Days

PM3 | Investigations – Volume

Number of investigations closed (not including cases transmitted to the Attorney General).



Total: 236 | Monthly Average: 79

PM3 | Investigations – Cycle Time¹

Average number of days to complete the entire enforcement process for cases not transmitted to the Attorney General.
(Includes intake and investigation.)

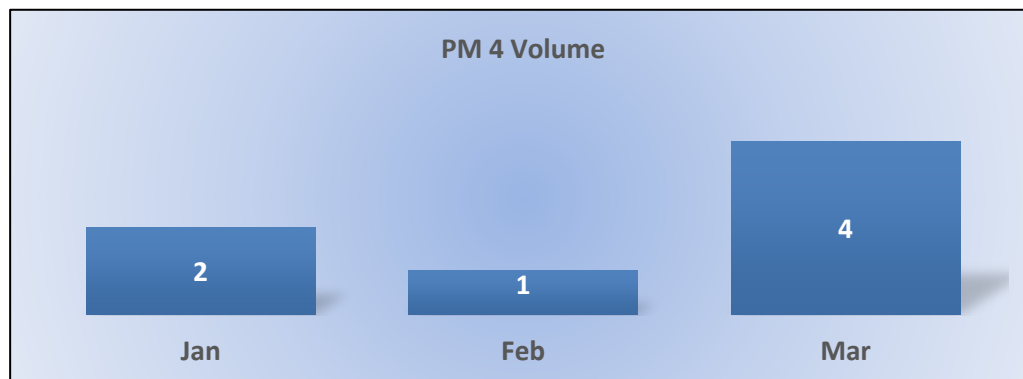


Target Average: 90 Days | Actual Average: 96 Days

¹ Due to rounding, there might be small discrepancies between the PM3 “Actual Average”, and the sum of the individual case stages (i.e., Intake time + Investigation time + Post-Investigation time).

PM4 | Formal Discipline – Volume

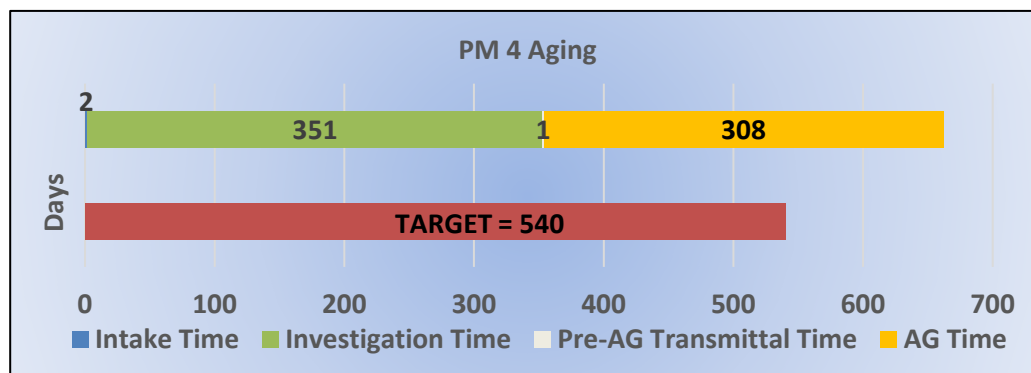
Cases closed after transmission to the Attorney General for formal disciplinary action. This includes formal discipline, and closures without formal discipline (e.g., withdrawals, dismissals, etc.).



Total: 7

PM4 | Formal Discipline – Cycle Time²

Average number of days to close cases transmitted to the Attorney General for formal disciplinary action. This includes formal discipline, and closures without formal discipline (e.g., withdrawals, dismissals, etc.).



Target Average: 540 Days | Actual Average: 668 Days

² Due to rounding, there might be small discrepancies between the PM4 "Actual Average", and the sum of the individual case stages (i.e., Intake time + Investigation time + Pre-AG Transmittal time + AG time).

PM7 | Probation Intake – Volume

Number of new probation cases.

*No new probationers were assigned
for monitoring this quarter.*

PM7 | Probation Intake – Cycle Time

Average number of days from monitor assignment, to the date the monitor makes first contact with the probationer.

*No new probationers were assigned
for monitoring this quarter.*

PM8 | Probation Violation Response – Volume

Number of probation violation cases.

*The Board did not have any
probation violations this quarter.*

PM8 | Probation Violation Response – Cycle Time

Average number of days from the date a violation of probation is reported,
to the date the assigned monitor initiates appropriate action.

*The Board did not have any
probation violations this quarter.*

**Physical Therapy Board of California Consumer
Protection Services Program**

5 Year Performance Measures Milestone					
Fiscal Year *	2012/2013	2013/2014	2014/2015	2015/2016	2016-2017
PM1 Volume - Total Number of Complaints Received. (Non conviction/arrest related)	1347	1019	669	409	459
PM1 Volume - Conviction/Arrest Reports Received	181	289	336	294	312
Total Complaints Received	1536	1309	1006	703	771
PM2 Cycle Time - Intake Average number of complaint intake during the specified time period.	AVG DAYS	AVG DAYS	AVG DAYS	AVG DAYS	AVG DAYS
	6	15	4	4	2
PM3 Cycle Time-No Discipline (Target 90 Days) Average Number of Days to complete the entire enforcement process for complaints investigated and not transmitted to the AG for formal discipline (Includes intake, investigation, and case outcome or non-AG formal discipline.	AVG DAYS	AVG DAYS	AVG DAYS	AVG DAYS	AVG DAYS
	111	101	167	148	105
PM3a Intake Only Of the cases included in PM3, the average number of days from the date the complaint was received, to the date the complaint was assigned for investigation.	N/A	N/A	N/A	4	2
PM3b Investigation Only Of the cases included in PM3, the average number of days from the date the complaint was assigned for investigation, to the date the investigation was completed.	N/A	N/A	N/A	133	102
PM3c Post Investigation Of the cases included in PM3, the average number of days from the date the investigation was completed, to the date the case outcome or non-AG formal discipline effective date.	N/A	N/A	N/A	19	3

PM 4 Cycle Time-Discipline (Target 540 Days) Average Number of Days to close cases transmitted to the AG for formal disciplinary action. This includes formal discipline, and closures without formal discipline. (e.g., withdrawals, dismissals, etc.)	AVG DAYS	AVG DAYS	AVG DAYS	AVG DAYS	AVG DAYS
	692	779	932	793	554
PM4a Intake Only Of the cases included in PM4, the average number of days from the date the complaint was received, to the date the complaint was assigned for investigation.	N/A	N/A	N/A	4	2
PM4b Investigation Only Of the cases in PM4, the average number of days from the date the complaint was assigned for investigation, to the date the investigation was completed.	N/A	N/A	N/A	322	269
PM4c Pre-AG Transmittal Of the cases included in PM4, the average number of days from the date the investigation was completed, to the date the case was transmitted to the AG.	N/A	N/A	N/A	3	1
PM4d Post--AG Transmittal Of the cases included in PM4, the average number of days from the date the case is transmitted to the AG, to the date of the case outcome or formal discipline effective date.	N/A	N/A	N/A	492	357
Total Final Orders	35	41	54	61	26

* The new Sub-Performance Measures were implemented FY 2015-2016.

Disciplinary Summary

The following is a list of disciplinary actions taken by the Physical Therapy Board of California for the months of April, May, & June 2017. The Decisions become operative on the Effective Date, with the exception of situations where the licensee has obtained a court ordered stay. Stay orders do not occur in stipulated decisions, which are negotiated settlements waiving court appeals.

Copies of Accusations, Decisions, or Citations may be obtained by visiting our website at www.ptbc.ca.gov. In addition to obtaining this information from our website, you may also request it by telephone, fax, or mail. Please address your request to:

Physical Therapy Board of California
2005 Evergreen Street, Suite 1350
Sacramento, CA 95815
(916) 561-8200/ FAX (916) 263-2560

.....
April 2017

LEGASPI, EDDIESON IGTIBEN (PT 32719)

Violation of B & P Code: 490, 810(a)(1), 810(a)(2), 2234(e), 2660(e), 2660(h), and 2660(k). Violation of CCR: 1399.20(a), 1399.20(b), and 1399.20(c). Stipulated Revocation of License and Order Effective 04/24/17, License Revoked.

WALKER, JAMES DALE (PTA 5247)

Voluntary Surrender of License Effective 04/22/17, License Surrendered.

May 2017

BOYD, KEVIN EDWARD (PTA 9002)

Violation of B & P Codes: 490, 493, 2660, 2660(e), and 2661. Violation of CCR: 1399.24(b), 1399.24(c), 1399.24(d)(2), and 1399.24(d)(3). Default Decision and Order Effective 05/18/17, License Revoked.

June 2017

DAVID, CHRISTOPHER PATRICK (PT 42170)

Violation of B & P Codes: 490, 2239, 2605, 2660(a), 2660(e), and 2661. Violation of CCR: 1399.20 and 1399.24(d). Stipulated Settlement and Disciplinary Order Effective 06/12/17, 3 Yrs. Prob., or one (1) year after completion of the Substance Abuse Rehabilitation Program, whichever is longer.

HICKEY, SEAN MICHAEL (PT 39392)

Violation of B & P Codes: 490, 493, 2239, 2660, 2660(a), and 2660(e). Violation of CCR: 1399.20(a), 1399.20(c), 1399.24(d)(2), 1399.24(d)(3), 1399.24(b), and 1399.24(c). Stipulated Surrender of License and Order Effective 06/16/17, License Surrendered.

HICKS, KATHLEEN PECK (PT 35557)

Violation of B & P Codes: 680, 725, 2620.7, 2660, 2660(i), 2660(j), and 2660(n). Violation of CCR: 1398.11, 1398.13, 1398.15, and 1399. In House Public Letter of Reprimand Issued 06/26/17

IBRAHIM, MOHAMMED ASHRAF (PT 16742)

Violation of B & P Codes: 2620.7, 2630.4, 2660, 2660(i), 2660(n), and 2660(s). Violation of CCR: 1398.13 and 1399. In House Public Letter of Reprimand Issued 06/22/17.

MILANESE, KRISTINA ELIZABETH (PT 32306)

Violation of B & P Codes: 680, 725, 2620.7, 2660, 2660(i), 2660(j), and 2660(n). Violation of CCR: 1398.11, 1398.13, 1398.15, and 1399. In House Public Letter of Reprimand Issued 06/26/17

RILEY, TIMOTHY PATRICK (PTA 48065)

Violation of B & P Codes: 490,493, 2239(a), 2605, 2660, 2660(a), and 2660(e). Violation of CCR: 1399.20. Stipulated Settlement and Disciplinary Order Effective 06/26/17, 5 Yrs. Prob., or for such period as is necessary for respondent to complete the Board's Substance Abuse Rehabilitation Program plus one (1) year thereafter, whichever is longer.

Initial Probationary Licenses (IPL) Issued

April through June 2017

(NONE)

Licenses Denied

April

(NONE)

May 2017

COVEN, CODY TROY (APPLICANT)

Application Denied 05/01/17. Violation of B & P Code: 480 Grounds for Denial of License.

DOLL, KIRA MARIE (APPLICANT)

Application Denied 05/24/17. Violation of B & P Code: 480 Grounds for Denial of License.

SINGZON, MARIA LUISA (APPLICANT)

Application Denied 05/16/17. Violation of B & P Code: 480 Grounds for Denial of License.

June 2017

MULLEN, CHAGO MAC SHAWN (APPLICANT)

Application Denied 06/01/17. Violation of B & P Code: 480 Grounds for Denial of License

Glossary of Terms

B & P Code – Business and Professions Code
H & S Code – Health and Safety Code
R & R – Rules and Regulations
CCR – California Code of Regulations

Accusations: Charges and allegations, which still must undergo rigorous tests of proof at later administrative hearings.

Petition to Revoke Probation: A Petition to Revoke Probation is filed when a licensee is charged with violation of a prior disciplinary decision.

Probationary License: Where good cause exists to deny a license, the licensing agency has the option to issue a conditional license subject to probationary terms and conditions.

Statement of Issues Filed: When an applicant for licensure is informed the license will be denied for cause, the applicant has a right to demand a formal hearing, usually before an Administrative Law Judge. The process is initiated by the filing of a Statement of Issues, which is similar to an accusation.

Surrender of License: License surrender as part of a disciplinary order.

Statement of Issues Decision: These are decisions rendered after the filing of a Statement of Issues.

Stipulated Decision: Negotiated settlements waiving court appeals.



Physical Therapy Board of California

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Internet: www.ptbc.ca.gov



Briefing Paper

Date: August 15, 2017
Prepared for: PTBC Members
Prepared by: Monny Martin, PTBC Probation Monitor
Subject: Probation Monitoring Program

Purpose: Update on Probation Monitoring Program for FY 2016-2017

Attachments: [Probation Monitoring Report \(A-1\)](#)

Background:

This is a report on the Board's Probation Monitoring Program through the fourth quarter of FY 2016-2017. Please refer to attachment A-1 which contains the probation statistics for FY 2016-2017.

Currently there are 88 licensees on probation for various causes from Driving Under the Influence to Sexual Misconduct. Besides the 80 licensees on probation and in the state of California, there are an additional 8 probationers tolling (out of state) and not receiving credit toward the completion of probation. There were also 4 licensees that completed probation in the quarter, and 3 licensees were either revoked or surrendered their license in the quarter.

Of the 80 licensees that are not currently tolling, 20 are currently enrolled and participating in the Board's Drug and Alcohol Recovery Monitoring Program, equaling 25% of all licensees on probation that aren't tolling.

Action Requested:

No Action Required.

Probation Statistics Report

Probation											
	FY 2015/16							Year → Year Change			
	YTD										
Entered Probationer	39	4	3	3	2		↓	-69%			
Completed Probation	22	4*	4	6	4		↓	-36%			
Probation Terminated/Surrendered	0	0	0	1	3		↑	100%			
Non-Compliant w/Probation	1	0	0	0	0		↓	-100%			
Total Probationers	104	104	97	93	88		↓	-15%			