



REGULATORY AGENCY ACTION

SPEECH PATHOLOGY AND AUDIOLOGY EXAMINING COMMITTEE

*Executive Officer: Carol Richards
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The Board of Medical Quality Assurance's Speech Pathology and Audiology Examining Committee (SPAEC) consists of nine members: three speech pathologists, three audiologists and three public members (one of whom is a physician).

The Committee registers speech pathology and audiology aides and examines applicants for licensure. The Committee hears all matters assigned to it by the Board, including, but not limited to, any contested case or any petition for reinstatement, restoration, or modification of probation. Decisions of the Committee are forwarded to the Board for final adoption.

MAJOR PROJECTS:

Speech Pathology and Audiology Aide Regulations. SPAEC's proposed changes to regulatory sections 1399.170, 1399.171, 1399.172, 1399.174, 1399.175, and 1399.176 were scheduled to be submitted to the Office of Administrative Law for review in mid-December. The new regulations will impose stricter requirements regarding registration, supervision, and training programs for speech pathology and audiology aides. (See CRLR Vol. 8, No. 4 (Fall 1988) p. 66 and Vol. 8, No. 3 (Summer 1988) pp. 70-71 for background information.)

Impedance Testing and Hearing Aid Dispensers. At the Committee's November 4 meeting, SPAEC Chair Dr. Philip Reid appointed Ellen Rosenblum-Mosher and Gail Hubbard to an ad hoc committee composed of two members of SPAEC and two members of the Hearing Aid Dispensers Examining Committee. The committee was formed at Dr. Reid's suggestion to consider whether a procedure known as tympanometry is restricted to audiologists or may be performed by hearing aid dispensers. (See CRLR Vol. 8, No. 4 (Fall 1988) p. 66 for background information.)

LEGISLATION:

While no definite plans for 1989 legislation have been established, the Committee is considering sponsoring legislation to require continuing education for speech pathologists and audiologists.

RECENT MEETINGS:

On November 4 in Monterey, Dr. Reid reported on his attendance at the annual meeting of the National Council

of State Boards for Speech Pathologists and Audiologists recently held in Washington, D.C. Highlights of this meeting included a report and discussion on the recent controversy concerning the use of support personnel for speech pathologists and audiologists. Trends regarding supportive personnel range from states which allow very loose control to other states, including California, which advocate very tight controls. A major speech was given at the Washington meeting advocating continuing education (CE) as a necessity for speech pathologists and audiologists. Dr. Reid distributed a chart indicating that seventeen states now have mandatory CE requirements, while an additional five have enabling legislation allowing the licensing board to adopt CE requirements through regulation.

FUTURE MEETINGS:

- April 7 in Sacramento.
- June 30 in Los Angeles.
- September 8 in San Jose.
- November 10 in San Diego.

BOARD OF EXAMINERS OF NURSING HOME ADMINISTRATORS

*Executive Officer: Ray F. Nikkel
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The Board of Examiners of Nursing Home Administrators (BENHA) develops, imposes, and enforces standards for individuals desiring to receive and maintain a license as a nursing home administrator. The Board may revoke or suspend a license after an administrative hearing on findings of gross negligence, incompetence relevant to performance in the trade, fraud or deception in applying for a license, treating any mental or physical condition without a license, or violation of any rules adopted by the Board. Board committees include the Administrative, Disciplinary, and Education, Training and Examination Committees.

The Board consists of nine members. Four of the Board members must be actively engaged in the administration of nursing homes at the time of their appointment. Of these, two licensee members must be from proprietary nursing homes; two others must come from nonprofit, charitable nursing homes. Five Board members must represent the general public. One of the five public members is required to be actively engaged in the practice of medicine; a

second public member must be an educator in health care administration. Seven of the nine members of the Board are appointed by the Governor. The Speaker of the Assembly and the Senate Rules Committee each appoint one member. A member may serve for no more than two consecutive terms.

MAJOR PROJECTS:

Implementation of AB 1834. BENHA continues to work towards compliance with the requirements of AB 1834 (Connelly). (For details on AB 1834, see the implementation plan outlined in CRLR Vol. 8, No. 4 (Fall 1988) p. 67; see also CRLR Vol. 8, No. 2 (Spring 1988) p. 69; and Vol. 8, No. 1 (Winter 1988) pp. 66-67.) Four new cases have been referred from the Department of Health Services (DHS) in 1988, making a total of seven active disciplinary cases. Executive Officer Ray Nikkel reports that DHS has informed him that three new cases will be referred in the near future.

Also pursuant to AB 1834, BENHA has published a list of all administrators who have had their licenses placed on probation, suspended, or revoked during the previous three-year period. The list includes administrators who stipulate to agreements, including temporary suspension of their license.

RECENT MEETINGS:

At BENHA's December 1 meeting in Sacramento, the Education Committee submitted an outline for study of BENHA's administrator-in-training program and its continuing education requirements. These studies are also related to AB 1834 implementation. BENHA was to have submitted a report to the legislature on the progress of these study topics no later than December 31, 1988.

FUTURE MEETINGS:

To be announced.

BOARD OF OPTOMETRY

*Executive Officer: Karen Ollinger
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The Board of Optometry establishes and enforces regulations pertaining to the practice of optometry. The Board is responsible for licensing qualified optometrists and disciplining malfeasant practitioners. The Board's goal is to protect the consumer patient who might be subjected to injury resulting from unsatisfactory eye care by inept or untrustworthy practitioners.