RADIOLOGIC TECHNOLOGY CERTIFICATION COMMITTEE (RTCC)
MEETING MINUTES

October 5, 2016

California Department of Public Health
Auditorium
1500 Capitol Avenue
East End Complex
Building 172 Auditorium
Sacramento, California 95814

Frieda Y. Taylor, M.S., Chairperson

COMMITTEE MEMBERS PRESENT

Dale Butler, M.D.
Christopher H. Cagnon, Ph.D., FAAPM
John L. Go, M.D., FACR
Daniel K. Lee, DPM, PhD, FACFAS
Johnson B. Lightfoote, M.D., FACR
Todd D. Moldawer, M.D
Nancy J. Perkins, M.A., Ed., RT(R)(M)
Michael L. Puckett, M.D., FACR
Bonna Rogers-Neufeld, M.D., FACR
Cliff Tao, DC

COMMITTEE MEMBER ABSENT
Anita M. Slechta, M.S., BSRT, RT (R)(M), ARRT, CRT

MEETING SUMMARY

I. WELCOME / OPENING REMARKS

Chairperson Taylor called the meeting to order at 9:00 a.m.

Chairperson Taylor welcomed all meeting attendees and introduced the RTCC members and California Department of Public Health-Radiologic Health Branch (CDPH-RHB) staff. Presenters were given instructions regarding the timing procedures for presentations and RTCC board members were provided protocol for publicly reporting member voting on Committee action.
II. APPROVAL OF APRIL 13, 2016 RTCC MEETING MINUTES

MOTION I

The committee members voted to approve the April 13, 2016 RTCC meeting minutes as drafted.

Motion: Committee Member Moldawer
Second: Committee Member Perkins

Vote:

10 Yes: Dr. Butler, Dr. Puckett, Dr. Lee, Dr. Tao, Dr. Lightfoote, Dr. Rogers-Neufeld, Dr. Moldawer, Dr. Go, Prof. Perkins, and Dr. Cagnon
0 No
0 Abstain

MOTION PASSED UNANIMOUSLY

Chairperson Taylor stated that the approved minutes would be visible on the CDPH-RHB website no later than 30 days from the meeting’s date.

III. CERTIFICATES OF APPRECIATION OUTGOING RTCC MEMBERS

Frieda Y. Taylor, M.S.
RTCC Chairperson
Supervising Health Physicist
Registration and Certification Section

Chairperson Taylor introduced the recipients of Certificates of Appreciation for Outgoing RTCC Committee Members:

- Dr. Bonna Rogers-Neufeld representing Radiologists
- Dr. John Go representing Radiologists
- Dr. Dale Butler representing Orthopedic Surgeons
- Dr. Todd Moldawer representing Orthopedic Surgeons
- Dr. Cliff Tao representing Chiropractors

The certificates were read aloud and presented to Members.
IV. LEGISLATIVE/REGULATORY UPDATE
Brandy L. Caldeira
Health Program Specialist
Strategic Planning and Quality Assurance Section
Regulations Unit

Ms. Caldeira reviewed the following regulation proposals and shared a brief status of each:

A. DPH-15-012: Limited Permit X-ray Bone Densitometry Category – Whole Body Composition Procedures & Terminology Change:
   - Revisions to fiscal & economic impact assessments made per Department of Finance comments.
   - Resubmitted documentation to CDPH Office of Regulations.

B. Elimination of Fluoroscopy Permit for certain Certified Radiologic Technologists:
   - The Budget Office requested a workload analysis.

C. An upcoming regulations package contains the following:
   - Certified Radiologic Technologist Scope of Practice.
   - Patient/equipment movement during Fluoroscopy use.
   - 2-year experience requirement for those providing student oversight.
   - The proposal and fiscal economic analysis documents are currently in development.

DISCUSSION

COMMITTEE MEMBER PERKINS: “The elimination of the fluoroscopy permit for certain CRTs. I just wonder what ‘certain’ means? You're either a CRT or you're not.”

SENIOR HEALTH PHYSICIST SCOTT: “‘Certain’ just means certified radiologic technologists whether they went through a JRCERT accredited program, JRCERT program, versus a non-JRCERT program…the budget office has told us that we have to do a workload analysis to reevaluate what our fee structure is on that…”
COMMITTEE MEMBER PERKINS: “How soon do we anticipate that moving through all the next steps?”

SENIOR HEALTH PHYSICIST SCOTT: “Three to five years, but don't quote me on that.”

V. MEDICAL BOARD OF CALIFORNIA: PUBLIC DISCLOSURE OF DISCIPLINARY ACTIONS
Phillip L. Scott
Senior Health Physicist
Strategic Planning and Quality Assurance Section
Regulations Unit

Mr. Scott gave a brief description of his presentation and the actions taken per the Committee’s request. These actions included review of the Medical Board of California’s (MBC,) website as well as staff contact.

- The MBC has 132,370 current licensees
- The MBC issued over almost 6,000 new licenses to physicians
- The MBC received over 8,000 complaints every year and perform a little over 1,300 investigations
- The MBC has a budget of $60 million plus

Mr. Scott noted that the website, mbc.ca.gov, provided quarterly newsletters of administrative actions, legislative information, mandatory reporting requirements, and other information that goes to the physicians. He referred to a section for consumers which contained a license search tool, complaint information, numerous publications as well as general information for medical consumers & hospital & care facilities.

Mr. Scott reviewed the Business and Professions Code Section 2027 that allowed the MBC to place disciplinary action information on their website. He then referred to the previous RTCC meeting where the Committee expressed interest in the MBC’s “Hot Sheets” and presented his findings:

- The MBC Hot Sheets contained monthly notifications of disciplinary activity for the following licensees:
  - Physician Assistant
  - Physical Therapy
  - Podiatric
- Psychology

- The MBC has not posted “Hot Sheets” since 2008 but a person can subscribe to receive monthly notifications.
  - This notification information that's posted on their website was not posted until that licensee had gone through due process.

### DISCUSSION

COMMITTEE MEMBER PERKINS: “You referenced the Business and Professions Code section 2027. Could this or does this apply to licenses issued by the CDPH?”

SENIOR HEALTH PHYSICIST SCOTT: “No. That is only applicable to the Medical Board of California… but again; the Medical Board has oversight of the PA, physician assistants, psychologists, physical therapists, and the podiatrists.”

COMMITTEE MEMBER PERKINS: “So there is no code that applies to the certificates and permits that are issued by CDPH for publishing to the public in this same manner?”

SENIOR HEALTH PHYSICIST SCOTT: “There is no law requiring our certificates and permits to be posted. That does not prohibit us from posting those actions. However, those actions would not be posted without due process occurring.”

COMMITTEE MEMBER GO: “The questions I had earlier were ‘How many complaints did you receive last year’, and ‘What were the types of complaints?’ Were they aimed at individuals, were they aimed at institutions, and what were the main reasons for the complaints?”

SUPERVISING HEALTH PHYSICIST RUSSELL: “We don't have the number of actual complaints right now. We do have complaints about facilities and complaints about individuals. They vary. We take complaints anonymously… So it really runs the gamut of anybody who has a complaint about anything to do with radiology.”

COMMITTEE MEMBER CAGNON: “…We were curious in terms of willful misconduct, willful negligence, willful disobeying of regulations. So if the RHB DPH gets complaints…after it goes through due process, then it goes to the Medical Board of California?”
SENIOR HEALTH PHYSICIST O'CONNELL: "Yes… that's correct."

SUPERVISING HEALTH PHYSICIST RUSSELL: “Also… if we're in the process of investigation or taking action against somebody and they come due for renewal, we do hold that renewal. So you can, in effect, see somebody is no longer certified, because when we're holding their renewal, they're not certified. You can look up on our website and see who is and who is not, and from the time that they are not. So when we don't let them renew, and don't let them go forward they no longer show up on our website as eligible to perform x-rays.”

COMMITTEE MEMBER PERKINS: “We have 2 years on our license. And so within a 2-year period that investigation could occur, and yet the website would still show that the license is current.”

SUPERVISING HEALTH PHYSICIST RUSSELL: “It would show until we have taken them through due process… If we suspend or revoke that license, it will not show up any longer.”

COMMITTEE MEMBER LIGHTFOOTE: “But aren't there some instances when you can't afford to wait for due process? The emergencies, that's -- that's my concern.”

SUPERVISING HEALTH PHYSICIST RUSSELL: “If we had an emergency that we really had to deal with sooner than that, we would issue a cease and desist order.”

COMMITTEE MEMBER LIGHTFOOTE: “If you have an emergency, an egregious violation, and you have to restrict somebody urgently for the safety of the people, how do you do that and how do you make that public, in those rare instances when you to have do it?”

SUPERVISING HEALTH PHYSICIST RUSSELL: “We would have to consult with our legal counsel on whether we could actually officially suspend that license at that point.”

SENIOR HEALTH PHYSICIST SCOTT: "The permit search tool on the website is not a database or a tool that goes into disciplinary actions. It is merely a billing and cashiering function database.”

COMMITTEE MEMBER MOLDAWER: “So if that information is not available on
the website, can someone call your office and inquire is there a cease and desist order in effect on license number so in so, or on individual so in so?"

SUPERVISING HEALTH PHYSICIST RUSSELL: “They can get that information under the Public Records Act. We could release that.”

COMMITTEE MEMBER CAGNON: “Back to the fact that you have nothing in the existing law that allows you to do the kind of scrutiny that ARRT…can. Is that possible under existing say regulation or under existing law to create regulation? Could this Committee propose regulation that gave you that authority or…would that have to be a legislative change?”

SENIOR HEALTH PHYSICIST SCOTT: “…The best solution is to go through legislation and get it changed.”

COMMITTEE MEMBER LIGHTFOOTE: “I would encourage RHB and the Department to take that exact route. There’s clearly a move in most legislatures, the Congress and the State of California, to protect the public, and specifically to give the public information about businesses and operations that could potentially endanger their health, and not merely allow you to name a failed organization or an individual that places the public at risk, but actually requires you to make the name of that facility or person who represents an acute, emergent, summary, exigent risk to the public available…So I'd encourage the Department to pursue legislation that makes that responsibility explicit.”

RADIOLOGIC HEALTH BRANCH CHIEF PEREZ: “We’re more than happy to try to move that through, but I think the reality is the private sector is going to be able to accomplish something like that much faster, much quicker than through our process.”

COMMITTEE MEMBER LIGHTFOOTE: “Phil, do you think the RHB has authority to make public all cease and desist orders?”

SENIOR HEALTH PHYSICIST SCOTT: “We would have to confirm with legal staff as to how that functions within the due process.”
MOTION II

COMMITTEE MEMBER LIGHTFOOTE: “Well, then I think I'd like to make that motion to ask legal staff is a cease and desist order, can that be made public? That's a question from RTCC to legal staff.”

Motion: Committee Member Lightfoote
Second: Committee Member Moldawer

DISCUSSION

COMMITTEE MEMBER LIGHTFOOTE: “My intention is to keep you all out of trouble, and out of the newspaper, because it's not just a legal issue, it's a public relations issue, and a public trust issue, and the public protection issue. If somebody is screwing up so badly in the administration of radiation that you've got to issue a cease and desist order, the public should know about it.”

COMMITTEE MEMBER CAGNON: “It was said earlier that RHB doesn't have a mechanism. Well, okay, we don't care if you have a mechanism, but do you have the authority?”

RESTATED MOTION II

COMMITTEE MEMBER LIGHTFOOTE: “The motion is to ask the question to legal if RHB has the authority to make a cease and desist public. And if it has the authority, then perhaps it should also undertake the obligation.”

Vote:

10 Yes: Dr. Butler, Dr. Puckett, Dr. Lee, Dr. Tao, Dr. Lightfoote, Dr. Rogers-Neufeld, Dr. Moldawer, Dr. Go, Prof. Perkins, and Dr. Cagnon
0 No
0 Abstain

MOTION PASSED UNANIMOUSLY

With no further discussion, Chairperson Taylor adjourned for a morning recess.

VI. MORNING RECESS
10:25 a.m. – 10:45 a.m.
VII. THE BUREAU FOR PRIVATE POSTSECONDARY EDUCATION AND THE RADIOLOGIC HEALTH BRANCH
Marilyn Cantrell, BSRT (R)(M)
Senior Health Physicist
Registration and Certification Section
Certification Unit

George Cervantes
Associate Health Physicist
Registration and Certification Section
Certification Unit

Mr. Cervantes gave a brief overview of the presentation and shared a short history. He stated that in July of 2016, the School Certification Unit received a letter from a constituent noting a possible issue with the removal of the accreditation for the program. Upon attending a BPPE meeting in August of 2016, the School Certification Unit learned of the relationship that exists between the BPPE and the RHB Certification Unit:

- The Radiologic Technology Act does not confer a status of accreditation on an RHB approved school
- In accordance with California Education Code section 94886 all private schools must be approved by BPPE
- Accrediting agencies that are recognized by the Department of Education (DOE) are usually also recognized by BPPE
- Accrediting agencies that are not recognized by DOE could lose BPPE approval and their federal funding

As a result of the meeting, Mr. Cervantes referred to a plan of action that all schools were to be notified of:

- Effective October 1, 2016 all applicable schools must provide documentation of their BPPE status on a yearly basis during the certificate renewal period. **Schools will not be renewed without it.**
- All schools must continue to provide the annual report in addition to the requested BPPE documentation
- A letter of conditional approval from the BPPE must accompany all new school applications, if applicable
Mr. Cervantes then shared contact information for the Schools Certification Unit of RHB. The presentation was concluded and the floor was open to RTCC member questions.

**DISCUSSION:**

**COMMITTEE MEMBER BUTLER:** "On page 6, that first paragraph… it says that 'applicable schools must provide documentation of their status on a yearly basis during the certificate renewal period.' What is the certificate renewal period?"

**SENIOR HEALTH PHYSICIST CANTRELL:** "It's during the renewal period for the school itself. So we ask for an annual report to make sure that the school is in compliance, and their sites are in compliance. And we will also ask for -- if it's applicable, for their BPPE status at that time."

**COMMITTEE MEMBER BUTLER:** "How long are certificates good for?"

**SENIOR HEALTH PHYSICIST CANTRELL:** "A year. Schools renew yearly."

**COMMITTEE MEMBER PERKINS:** "With respect to BPPE, when they have the approval for the private school, what is their renewal period?"

**MR. BAYLES:** "The approval process or the approval time period depends on whether or not basically how the institution is approved. So there are two types of approval. One is by means of accreditation. And that approval is really coterminous with the approval of the accreditor. So when the accreditation for that school expires, so does our approval. The other we just call it the full approval, and that's typically five years."

**SENIOR HEALTH PHYSICIST CANTRELL:** "So we would just be asking for proof of current BPPE approval on a yearly basis… we just want to make sure they're current at the time we approve them."

**COMMITTEE MEMBER LIGHTFOOTE:** "Who provides accreditation?"

**SENIOR HEALTH PHYSICIST CANTRELL:** "Accrediting agencies, much like JRCERT."

**CHAIRPERSON TAYLOR:** "Robert, could you elaborate a little bit on what BPPE approval means?"
MR. BAYLES: “So our approval is based on the institution meeting minimum operating standards. And there are operating standards in different categories, whether it's faculty qualifications, the size of the institution, the type of equipment they have, a variety of different things that we look at to approve. We can have an institution that has multiple programs. And I think that's kind of where the difference is. So if an institution has an x-ray tech program, the institution would be approved to operate that program, as well as maybe a nursing program, and other types of programs. So our approval is really not on a programmatic basis. It's institutional. So we would approve the institution to operate.”

CHAIRPERSON TAYLOR: “So Marilyn, what would you do if at the time of renewal, the school provided the documentation that says they're in good standing with BPPE in say October? And the renewal is good for a year, what happens in January if we receive notifications from BPPE that that school's BPPE renewal was revoked?”

SENIOR HEALTH PHYSICIST CANTRELL: “We would take steps to disapprove that school as well. We would probably issue a cease and desist.”

COMMITTEE MEMBER GO: “Is your accreditation process, is it on a cycle like a 2-, 3-, or 5-year cycle? You're requiring that they would provide proof of accreditation every year, but do they submit their accreditation from JRCERT, for example? We were accredited in 2015, which is good for 5 years. Do they have to continue to send it every year?”

SENIOR HEALTH PHYSICIST CANTRELL: “It's their BPPE approval that we're asking for.”

COMMITTEE MEMBER PERKINS: “Well, I think what we're talking about is that the RHB requires an annual report from every school regardless if they're public or private. In my case… I give an attestation according to several Title 17 regulations, one of them being that I maintain my JRCERT accreditation, because I'm a public institution and have gone that route. In the case of a private school, they would not necessarily have JRCERT approval. They would have BPPE approval. And then in the annual attestation, they would provide that. Even though it might be good for 5 years, we're required annually to tell the RHB that we're maintaining compliance.”

With no further discussion, Chairperson Taylor adjourned for lunch.
VIII. LUNCH

11:04 a.m. – 1:00 p.m.

IX. CAUSE AND EFFECT OF DELINQUENT FACILITY REGISTRATION

Marilyn Cantrell, BSRT (R)(M)
Senior Health Physicist
Certification Unit
Registration and Certification Section

George Cervantes
Associate Health Physicist
Registration and Certification Section
Certification Unit

Gwendolyn Temple, M.A.
Staff Services Manager I
Database Support Unit
Financial Operations and Analysis Section

Lindsey Reuter
Associate Governmental Program Analyst
Database Support Unit
Financial Operations and Analysis Section

Mr. Cervantes began the presentation by referencing Title 17 California Code of Regulations (17 CCR) and associated acronyms. He then listed the actions associated with the registration of radiation machines and the process of registration renewal. Mr. Cervantes shared some steps that the RHB takes to help radiologic technology schools with the radiation machine registration renewal process:

- RHB sends a billing invoice 60 days in advance of expiration of school certificate
- The bills are sent FedEx
- An itemized statement listing the affiliated clinical sites with highlighted expiration date
- RHB evaluates payment status in RHB database, e.g., payment received; status update from Finance
- RHB sends follow-up email requesting payment
- RHB sends follow-up attestation requests
Mr. Cervantes then introduced Gwendolyn Temple of the Database Support Unit, Financial Operations and Analysis (FOA) Section. Ms. Temple shared some of the hurdles associated with facility registration which include the following:

- The facility did not remit payment
- The facility was delinquent, but only the renewal amount was received
- The departmental form RH2261 to request change was submitted with renewal payment
- No RH2261 form submitted with payment and change requested

Mr. Cervantes listed some enhancements that had been made to the current process which include:

- The evaluation of each delinquent site’s expiration status with FOA
- The Schools Certification Unit works directly with FOA to track renewal process of the clinical site
- FOA will inform Certification Unit when site is in compliance

Mr. Cervantes included the following caveat:

- A clinical site that is delinquent in its registration status will not be renewed as an affiliated clinical site.

**DISCUSSION**

**MS. ABRISHAMI:** “Is there any way that... anything that can be done that the paperwork can go away, and things can be done on-line? ...Schools are being put in the middle here... my students are in jeopardy.”

**SENIOR HEALTH PHYSICIST CANTRELL:** “It's part of doing business. If the site wants to have students there, they have to make sure they're compliant. They have to get their money in on time and correctly, just like all the rest of us do.”

**COMMITTEE MEMBER CAGNON:** “Whatever it takes to send people upstairs to get funding to do this on-line, I think is paramount. It's the modern era. Every professional society does it. I'm not sure there's any regulatory obstacle to it for licensure of individuals, licensure of machines... I think the machine registration is a debacle... I have yet to see a bill that was even 50 percent correct, and in many cases the machines had been gone for decades... our local inspectors will merely cite us for machines that aren't registered, because we say, 'Well, that..."
was sent in.’ It’s not their problem. And I don’t consider that to be an appropriate approach… You’re part of the same entity, whether it’s county, whether it’s State, it’s all representing the Radiologic Health Branch.”

CHAIRPERSON TAYLOR: “I think that in order for the collaborative effort to be 360, the facilities have to take responsibility for ensuring that the right person is filling out the form, and not a person that knows nothing about the machine use, the registration, et cetera.”

COMMITTEE MEMBER CAGNON: “…When a machine has been registered for instance, and payment received, et cetera, is there confirmation sent back to the facility?”

STAFF SERVICES MANAGER LOVELACE: “As far as the registration, when staff registers your x-ray machine …they send you out a letter. It does not specifically state the machine you registered, but it does specifically state that we’ve completed an action from whatever date that registration form was dated, so you do get something in the mail.”

COMMITTEE MEMBER CAGNON: “So I’m just suggesting that when there’s hundreds of these machines at a facility, and possibly dozens of changes in a year, and that the facility and/or the school can be held accountable for it, …I don’t see an obvious barrier to it to say ‘this such and such machine, make and model, this machine registration number is confirmed as being registered.’ It would just help everyone know what the issue is, if there’s something being held in jeopardy.”

COMMITTEE MEMBER PERKINS: “I would like to second that an on-line tool to check a facility registration would be hugely helpful to all entities, that they would know that they can go on-line.”

MS. KROGER: “I’m Linda Kroger, UC Davis Medical Center, Radiation Safety… What would be great to have in that letter, instead of telling me you processed my registration from May 15th of 2016, also give me the XR number that goes with that piece of equipment, because that lets me reconcile that equipment back to what you guys think I have.”
MOTION III

COMMITTEE MEMBER CAGNON: “I propose that the Committee direct the RHB to create a process where a machine, when it’s registered or deleted or changed, that the site receives a document specific to that machine with all the information that the site has to give to the RHB to help clear up the problem of what is registered and what it is not. It would be real-time feedback, and then the site would know what machines potentially are of the issue.”

Motion: Committee Member Cagnon
Second: Committee Member Moldawer

DISCUSSION

COMMITTEE MEMBER PUCKETT: “Just the wording was -- if it could be just a motion for them to somehow create an on-line process where you can see the equipment, know its status, and know what the fees are somehow.”

AMENDED MOTION III

COMMITTEE MEMBER CAGNON: “So I amend the motion to say that an on-line -- directed to look into the possibility of an on-line system that shows real-time verification of machine registration, machine changes, machine deletions with enough information that that specific machine could be identified.”

Motion: Committee Member Cagnon
Second: Committee Member Moldawer

Vote:

10 Yes: Dr. Butler, Dr. Puckett, Dr. Lee, Dr. Tao, Dr. Lightfoote, Dr. Rogers-Neufeld, Dr. Moldawer, Dr. Go, Prof. Perkins, and Dr. Cagnon
0 No
0 Abstain

MOTION PASSED UNANIMOUSLY
X. NEW HEALTH ON-LINE APPLICATION (NOLA)
Gonzalo L. Perez
Chief, Radiologic Health Branch

Branch Chief Perez shared the following about the Registration and Certification Section (RCS):

- RCS processes applications from four different “Agencies”
  - Physicians and Physician Assistants
  - Technologist & Technicians
  - Nuclear Medicine Technologist
  - Facilities
- RCS registers x-ray machines

Branch Chief Perez shared a brief history of the NOLA project as well as the associated State Department of Information Technology requirements. Mr. Perez noted that RCS receives approximately 150 Supervisor and Operator (S&O) applications per month and the project would begin by starting an on-line process for S&O applications. Mr. Perez shared the progress that had been made over the past year and referred to the remaining steps required to obtain Department of Technology approval. He also provided the expected outcome of the project which included:

- An On-Line Application Process
- On-Line Payment Option
- On-Line Account visuals such as viewing application status, test results and payment balances

Mr. Perez noted the RHB's goal would be to move on to the next agency once a working operating system was completed. He stated that RHB would go through the same process (develop flow charts, work with IT, get a contractor on board) and then design the next agency into NOLA until the project was completed.

DISCUSSION

COMMITTEE MEMBER MOLDAWER: “I am startled that the State of California does not have a regulatory agency that has gone through all of the steps that you've enumerated and that you can't piggyback on to some other California State department and use their IT approval, use their competitively bid vendor,
that can't use their software, that can't use their processes to skip ahead the 3 to 5 year calendar that I see in front of me with your proposal."

RADIOLOGIC HEALTH BRANCH CHIEF PEREZ: “I share your frustration… I wondered the same thing, why can't you just get the DMV’s licensing system, for example, pick it up, put it over here, and then reconnect the dots? You have to go through all kinds of open and transparent bidding processes. And it just gets very complicated, so I can't explain it.”

MS. CAMPBELL: “So the next group that's going on I would hope would be the graduates from the programs, because my graduates, unfortunately, were stuck in the backlog over the summer…I would like to be able to tell my students 'When you graduate this is the timeline.'”

CHAIRPERSON TAYLOR: “Everybody needs to get to work and we try to be sensitive to that, but we can't give everybody a front-of-the-line pass. So we do all we can see to do... We just felt in looking at the complication of the application process, we could achieve more, more in a faster manner starting with the supervisor and operator applications first, so that hopefully when we get to the students, we would have ironed out a lot of kinks, and, you know, it won't be something that's more tragic instead of more progressive for them.”

COMMITTEE MEMBER CAGNON: “I would also… encourage more financial support for IT… I think you're probably aware, but I imagine that fee collection would go up dramatically.”

COMMITTEE MEMBER PERKINS: “Where do we see the full implementation for the S&Os, so that we could move forward on the next step? I know we're not talking tomorrow, but… is there a thought process on what the timeline might be?”

RADIOLOGIC HEALTH BRANCH CHIEF PEREZ: “Until the contractor shows up, we really don't know. But we're very hopeful that the first of 2017 that contractor is here on board and we can do that.”

COMMITTEE MEMBER PERKINS: “When we go live with the S&Os, then do you anticipate then the following year, like maybe 2018, you would implement any of the other groups, or is there any sense on that?”

RADIOLOGIC HEALTH BRANCH CHIEF PEREZ: “I want to do it like exactly the next day, but, you know, there’s so many other factors involved. I can't even give you an estimate.”
MS. GARCIA: “Is there a way that the RHB can give us an outline of exactly what the student needs to do to apply for the CRT and the fluoro exam in a timely fashion? I've created one, but things change, and I'm never sure if I'm up to date.”

CHAIRPERSON TAYLOR: “Why don't you send me what you're sharing, so then maybe we can identify some communication gaps that might not be readily apparent to us... We'll discuss it with staff to see if there might be some FAQs, frequently asked questions, we can put on the website to make the process flow better for the students.”

COMMITTEE MEMBER MOLDAWER: “I just wanted to suggest...that you might have someone on your staff contact your colleagues in the other large states that are already maybe 6 to 12 months ahead of you in this process, and see which software vendors they've had problems with, which ones have been successfully implemented, so that as you design your requests for proposals, that you do so in a manner that is likely to be selecting a vendor that has been successful in other states.”

XI. VARIANCE FOR TWO YEAR EXPERIENCE REQUIREMENT FOR DIRECT/INDIRECT OVERSIGHT OF STUDENTS

Gonzalo L. Perez

Chief, Radiologic Health Branch

Branch Chief Perez referred to California Code of Regulations (CCR), title 17, section 30417(f) which became effective October 11, 2013. This Section requires 2 years of radiologic technology experience if providing direct or indirect oversight of radiologic technology students. He noted that per RTCC discussion, concerns were raised from schools and facilities. The discussion revealed that Radiologic Health Branch has a process that can be used sometimes called the exemption process. There’s a regulation that specifically speaks to exemptions.

Mr. Perez referenced the California Health & Safety Code Section 107045 (a) which says, “The department shall approve schools for radiologic technologists that, in the judgement of the department, will provide instruction adequate to prepare individuals to meet requirements for certification as radiologic technologists under the Radiologic Technology Act (Section 27).”

Mr. Perez provided an explanation as to how a Variance request is accomplished. He noted the following about each request:

- The request is reviewed on a case-by-case basis specific to facility needs.
• The request demonstrates that the individual who ultimately signs off on a student’s competency (which means they witnessed the student performing the entire exam unaided and confirmed that a quality image was produced) has two years of experience.

Mr. Perez provided the address for variance request submittal and welcomed any questions.

DISCUSSION

COMMITTEE MEMBER PERKINS: “I think what was somewhat unclear to me, perhaps others, was the case-by-case basis... I thought from the last meeting, that it was per affiliated clinical site variance. So if I had 11 sites, I would be asking for a variance of 1 one of my 11. However, after talking about it to other people, it was a program variance. So I'd like that clarified just in public minutes... I'm also looking for clarification of suggested documents that would prove that our instruction was adequate.”

SENIOR HEALTH PHYSICIST CANTRELL: “The case by case is for each site... If you're a school that has 9 sites, and every single site has problems meeting this requirement, then set forth the issues for those sites... I've had a school that says, 'Well, I have 9 sites, but only 2 of them are in jeopardy with this program.' so they ask for a variance for those two sites. So that's what we mean by a case-by-case basis. It's not a school by school... You have to prove to us what your issue is.”

RADIOLOGIC HEALTH BRANCH CHIEF PEREZ: “From my perspective, a case by case is you, as your school, may want to solve this problem differently than the school down the street... And there's a case by case of affiliated sites, each site being a case.”

COMMITTEE MEMBER PERKINS: “And then what documentation do we need?”

RADIOLOGIC HEALTH BRANCH CHIEF PEREZ: “You can talk about the undue hardship, and then you get into what your plan is to...provide adequate instruction.”

COMMITTEE MEMBER PERKINS: “If a school were to present that information, are they getting maybe a 60-day turnaround, 30-day turnaround in a variance?”
RADIOLOGIC HEALTH BRANCH CHIEF PEREZ: “Less than 60 days.”

COMMITTEE MEMBER MOLDAWER: “I would like to make the following proposal, if it's regulatorily possible. And that is, in order for a new student to start a job, they need something from the State that allows them to practice… And my suggestion is to determine whether or not it is legal to allow the program directors to provide a 60- or 90-day temporary permit to those students that have graduated successfully and have passed the ARRT test, so that it gives your office 60 to 90 days to process the check, process the paperwork, and then issue a permanent license.”

CHAIRPERSON TAYLOR: “There is not mechanism or by law, statute, regulation that would allow that. While it's noble, there is no mechanism for that.”

XII. PUBLIC COMMENT

SENIOR HEALTH PHYSICIST SCOTT: “Gonzalo has talked about the word "agency". What he's talking about there is that under the HAL system, the S&Os, the CRTs, the registration are all categorized as an agency. So when he's talking about an agency in that context, he's not talking about the Health and Human Services Agency of the State of California. He's talking about the little box that's within HAL. And so we have different screens for each one of those areas nuke med techs, CRTs, S&Os. They're all a different agency, as they're called within that HAL system. So that's all I wanted to clarify.”

MR. SHULTZ: “Joseph Shultz, Program Director, Fresno City College…is there anything that the RHB would allow the schools to do in terms of like an externship during that 30 to 60 to 90 days that it takes for them to… turn their ARRT registration, along with the State registration?”

CHAIRPERSON TAYLOR: “Send Marilyn Cantrell a proposed agenda item and what we could do is evaluate that for a topic in the spring.”

COMMITTEE MEMBER CAGNON: “We've heard that on-line would certainly go a long way toward solving all the problems. I would encourage… professional societies represented in the audience, and certainly amongst the Committee, get your professional society to send a letter to Gonzalo and the Governor saying give these guys the resources to get this to happen as soon as possible.”
XIII. CLOSING COMMENTS

Chairperson Taylor thanked those who assisted with, attended, and participated in the meeting. She noted that the next RTCC meeting would be held in Southern California on April 19, 2017. Chairperson Taylor adjourned the meeting at 2:57 p.m.