

## Notes from October 12, 2020 for the NCCPSS Expert Commission

Members Attending: Brandon Rollings, Tara Bohley, Joseph Martinez, Karen Kranbuehl, Wes Rider, Jennifer Whitfield, Denise Baker, Cherene Caraco, Greg Rice, Charlyne Boyette, Bernice Adjabeng, Rosemary Weaver

Welcome and Agenda: Review Public Comments for the Recommendations

Facilitator: Brandon Rollings

Notetaker: Greg Rice

Brandon has created a spreadsheet of the public comments and broken down by roles, respondents, and topics. Comments also have been color-coded for priority of questions, comments, and suggestions. We will address the questions first today. First question is three parts from PSS.

1. Part 1. The first question is dealing with the scope and definitions (p.3) for CPSS. It seems there is a misunderstanding but we will respond to the question. We need to set up our process for our responses; first in draft form then review and reach consensus. It was suggested to then post our brief responses on the NCCPSS website.

Part 2. The second question is about a CPSS who also has a CADC credential. We say each credential is separate and distinct to itself. Each credential has their own standards and code of ethics.

They asked if they would be notified when their Advanced WRAP Facilitator certificate is to expire. We think that is the responsibility of the CPSS to keep track of for themselves and has nothing to do with the CPSS Registry.

Part 3. The third part states a concern about what the examination and other certification requirements will be. We know this is true because it will be decided by the Certification Oversight Board. This might be a focus of another full meeting! Some key words to consider are:

Statutes that have the authority to write rules related to the subject matter.

Framework of board where there is more specificity clarified and flexibility permitted

2. From LME/MCO: What rubric will be used to score applicants for board members? We have to ask should rubric be spelled out in statute. For board member selection, how will the representative
3. group of CPSS be determined? What specific training will be required? We were informed that when "starting to regulate the public, you want there to be clarity and consistency in the regulation." We have to decide how appointments will be handled, specifically the three appointing bodies: speaker of the house, President pro tem of the senate, and the governor's office. We will need to rethink this process.
4. Powers and Duties of the Board. Labor issues including \$18.00/hr. pay. The board is not an advocacy organization.

5. LME/MCO questions about the representation of course owners on the Oversight Board. We have excluded course owners from the board in order to create checks and balances and avoid ethical issues. It is perceived as too much of a conflict of interest. How do course owners get a voice? We have mechanisms for input and feedback now with the registry.

Will board members be subject to the state ethics act? Board members would be required to have ethics training within six months of joining the board then every two years thereafter. Ethics training is required if the board does make rules. Members would be required to complete a statement of economic interest.

6. Exam for certification. Asked for more information about the exam. Will it be norm referenced? Proposed date of the exam? Specific information about the exam is unavailable at this time. Board will decide.
7. What is the role of the board in determining PSS policies as relates to downward review of billing hours? This question requires some clarification so Brandon offered to reach to the LME/MCO who asked the question. \*Denise requested our two documents: 1) Overview and Justification and 2) the recommendations.
8. How will board members be chosen for the Ethics Committee? This is something that the board should decide. The board may need to have rule-making authority. The recommendations did not seem to have a clear framework for ethics investigation. We need balance between protecting the public and giving the CPSS a time specific process. The recommendations do include requirements (in business days) for certain steps in the notification process but need to have a framework for the beginning to the end (like 60 days). This framework needs to be in the statute or in the rule making power of the board. Denise says rulemaking may take many months. There are examples where you set a deadline for adoption of the rule in the statute and this gives the authority to adopt the rule using temporary procedures.

#### Thoughts on Public Comments:

With rulemaking authority the board will be subject to open meeting laws and ethics, and training. The spirit of this process is to make sure it is a process with integrity that can be legally defended. What kind of chance do we have of this actually getting passed? We should try to solve the problem in the least restrictive way we can.

A comment suggesting a physician serve on the board led to our discussion about the recommendations specifying that all members need to be people with lived experience. An opinion expressed about us valuing our lived experience as a credential and valuing the CPSS leadership in guiding this profession with integrity. Some people asked about having an advocacy organization that could be guided in the direction of PVNC. Remember that all slides and recordings from last week's training are on the Google drive.