

# Guam Board of Allied Health Examiners

REGULAR VIRTUAL BOARD MEETING

Friday, September 6, 2024 at 12PM

Join Zoom Meeting

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Meeting ID: 851 6661 9769

Passcode: 501841

## MINUTES

Item	Discussion	Responsible Party	Reporting Timeframe	Status		
<b>I</b>	<b>Call to Order</b>	Meeting Chaired by Dr. Balajadia	Chair	1208	Call to Order	
	<b>Proof of Publication</b>	Guam Daily Post 8/29/24; 9/4/24;	Chair	1208	Confirmed	
	<b>Roll Call</b>	<p><b>GBAHE Members</b>  <u>Present at HPLO:</u>  <input checked="" type="checkbox"/> Dr. Mamie Balajadia, Clinical Psychology, Chair  <input checked="" type="checkbox"/> Vince Pereda, Licensed Professional Counselor, Vice-Chair  <input checked="" type="checkbox"/> Dr. Gregory Miller, Chiropractic  <input checked="" type="checkbox"/> Sibyl Crisostomo, Speech Language Pathology  <input checked="" type="checkbox"/> Catherine San Nicolas, Clinical Dietician, Secretary &amp; Treasurer  <input checked="" type="checkbox"/> Nadine Cepeda, Licensed Professional Counselor, /Marriage Family Therapist/Licensed Mental Health Counselor  <input checked="" type="checkbox"/> Rosalind S. Taitingfong, Occupational Therapist  <input checked="" type="checkbox"/> Dr. Sungwook "Steve" S. Kim, Podiatrist  <input checked="" type="checkbox"/> Dr. Velma R. Harper, Veterinarian</p> <p><u>Virtual Attendance:</u>  <input checked="" type="checkbox"/> Dr. Dennis Triolo, Audiology  <input checked="" type="checkbox"/> Dr. Richard Chong, Acupuncture  <input checked="" type="checkbox"/> Ray Tajalle, Physician Assistant</p>	<p><b>Other Attendees</b>  <u>Present at HPLO:</u>                      Zennia Pecina, HPLO, Administrator                      Breanna Sablan, HPLO                      Rosemary Carman, HPLO                      Jennifer Bruan, HPLO                      Andrea Santos, Applicant, Speaker                      Marcelene Santos                      Milica Lepojevic, Speaker                      Joleen Baza, Licensee, IHP</p> <p><u>Virtual Attendance:</u>                      Graham Botha, OAG                      Melissa M. Casil, Licensee                      Emma Gillan-Matanane, Licensee                      Sharon Manibusan, HPLO                      Jamela Santos, Licensee                      Dr. Julienne D. Shin, Licensee</p>	Chair	1208	Quorum Established
	<b>Election of Officers</b>	<p>M. Balajadia proposed tabling the election of officers, expressing a preference to delay the matter due to the number of new members on the board. M. Balajadia requested that the election be postponed until January, suggesting that the current officers continue in their roles until the end of the year. It was recommended that the new elections be held in 2025.</p> <p><i>Motion to Table Until 2025: N. Cepeda; 2nd: S. Crisostomo</i></p>	GBAHE	1211	Unanimously Tabled	
<b>II</b>	<b>Adoption of Agenda</b>	<i>Motion to Approve: N. Cepeda; 2<sup>nd</sup>: C. Crisostomo.</i>	GBAHE	1211	Unanimously Adopted Agenda	

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III	Approval of Minutes	<p><b>Draft Minutes</b> dated 8/2/2024 an 8/9/2024</p> <p>C. San Nicolas introduced herself and requested corrections to the minutes. She pointed out that her name was misspelled under item five, noting that it should be "Cathy" with a "C" and "San Nicolas," not "St. Nicholas." She further identified an error on page four, under the administrator's report, item seven, where her name was again incorrectly listed as "St. Nicholas." Additionally, she clarified that Rick Cruz is a respiratory therapist, not a specialist, and that Dr. Paul Thomas's name should be corrected to "Pomes." Dr. Kim also mentioned that his name had been misspelled, emphasizing that it should be "Dr. Sungwook," not "Dr. Soon-Wok."</p> <p><i>Motion to Approve as Amended: C. San Nicolas; 2nd: Dr. Miller.</i></p>	GBAHE	1212	Unanimously Approved as Amended
IV	Treasurer's Report	<p>C. San Nicolas presented the treasurer's report, outlining two key areas: the budget for the fiscal year and revenues. She explained that the budget is broken down into object class categories, identifying the appropriations and the available balances. The comment section further clarified the expenditures, and her site notes highlighted that no treasurer's reports were provided for several meetings in 2024, specifically from January. She noted that no financial information was received in January, but a report was completed in February. Due to her absence from March to August, no financial information was received, and therefore no reports were submitted. She expressed appreciation for HPLO's submission of the fiscal year's budget proposal, which included historical budget amounts and object class details from the fiscal office. Moving forward, she recommended that the treasurer be prepared to submit the budget each December for the next fiscal year's budget call. The total appropriation for the current fiscal year was \$55,022, compared to \$29,296 for the previous fiscal year.</p> <p>It was noted that the organization operates on a two-year reporting period, with the first year typically generating more revenue due to renewals, while the second year sees a decline. A comparison was made, as shown on the far right of the report, indicating a 27% increase since the implementation of the new rates. However, the true results will be clearer by December 2024. There was a request for a more detailed comparison of the number of licensees for each fiscal year, along with the corresponding revenues, in order to better understand the financial trends. Efforts will be made to gather this data for future reporting.</p>	C. San Nicolas	1215	Noted
V	Administrator's Report	<p>Z. Pecina delivered the administrator's report, beginning by welcoming all members and emphasizing the importance of having enough members to meet quorum every month. She mentioned that the confirmation for Dr. Cruz, a respiratory therapist, was still pending, but expected to be finalized soon. Additionally, there remains an opening for an occupational therapist (OT).</p> <p>Z. Pecina further reported on the Rules and Regulations, acknowledging the board's intention to amend the rules and regulations. She highlighted several administrative changes that would be presented and requested feedback to forward to the speaker and Attorney General G. Botha, who was attending online. Additionally, Z. Pecina mentioned that N. Cepeda and R. Carman had attended the Counseling Regulatory Court Summit in Puerto Rico and noted that N. Cepeda would provide a report on their participation.</p> <p>N. Cepeda provided a report on the Counseling Regulatory Court Summit she attended, noting the</p>	Z. Pecina	1218	Noted

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	<p>significance of Guam's representation, marking the first time in decades. She shared that key topics at the summit included major progress for licensed mental health professionals and Licensed Marriage Family Therapists, who were granted Medicare approval at a 75% exchange rate. Unfortunately, Licensed Professional Counselors (LPC) were not included in this advancement. Despite this, Cepeda emphasized that it was still a significant step forward, as these groups have been advocating for years. She explained that the process for obtaining reimbursement is now moving through Congress, highlighting the rigorous efforts required for such progress.</p> <p>N. Cepeda continued her report by highlighting artificial intelligence (AI) as a major issue within the regulatory landscape. She pointed out that various AI programs are now available, raising concerns about the impact on training, particularly the relationship between supervisors and supervisees. N Cepeda explained that improper training is becoming increasingly common, as evidenced by the growing number of complaints submitted to boards across different jurisdictions. The reliance on AI for training has led to a significant reduction in the quality of instruction. She emphasized that regulatory boards should take this issue seriously, as it is likely to lead to an increase in complaints in the future.</p> <p>N. Cepeda emphasized the significant role ethics plays in the ongoing discussions, particularly in relation to supervision. She noted that much of the summit focused on supervision, with a detailed examination of what individuals are doing and what regulatory boards are observing across different jurisdictions. She highlighted the need for standardized rules, regulations, guidelines, and supervision practices, as currently, each jurisdiction operates under different laws. Organizations like the NBCC and others are working toward creating more uniform standards, as numerous complaints are arising. Cepeda provided an example where inadequate supervision practices, such as unverified video sessions, allow individuals to manipulate the system, with some even having family members act as supervisors. She stressed that this issue is widespread across the country. Furthermore, the summit underscored the importance of background checks for professionals, as inconsistencies in the process are common. In positions of authority where individuals are entrusted to help others, background checks should be rigorous and standardized—a key initiative the summit is advocating for.</p>			
VI	<p><b>Legal Counsel's Report</b></p> <p>Mr. Graham Botha, the legal counsel, reported on progress with the resolution of complaints, noting that improvements have been made and that the process is ongoing. He mentioned that recent meetings with staff have helped to address and resolve several longstanding issues. With the addition of more board members, there is now a greater pool of individuals available to be appointed as investigators, which is expected to facilitate further progress. G. Botha also discussed the potential benefits of Guam joining existing multi-state regulatory agreements. He highlighted that participation in these agreements would provide valuable assistance, especially in dealing with challenges related to artificial intelligence, as larger jurisdictions have already explored these issues.</p> <p>S. Crisostomo inquired whether telehealth issues were included in the multi-state regulations discussed. In response, G. Botha acknowledged that it is highly likely that other jurisdictions have already addressed</p>	G Botha	1223	Noted Board Discussed the Possibility of Joining a Compact for each Profession Under the GBAHE

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	<p>telehealth and related issues. He suggested that if national standards are available, they should be considered for Guam, as larger states like California and Massachusetts have likely developed procedures and policies for these matters. G. Botha emphasized that Guam need not reinvent the wheel but could adapt existing national policies with specific exclusions or adjustments for local needs. This approach would allow Guam to address telehealth issues that are emerging locally, benefiting from the experience of other jurisdictions that have been dealing with these concerns for some time.</p> <p>Z. Pecina interjected to explain that Guam is already moving towards integration with national regulatory boards. She provided examples of fields such as nursing, medical, pharmacy, social work, and optometry, where efforts are underway to standardize processes, including criminal background check requirements and application procedures. This standardization helps ensure consistency across boards by using a common template, thus avoiding the need to reinvent the wheel.</p> <p>However, Z. Pecina noted that the Guam Board of Allied Health Examiners (GBAHE) faces challenges due to the diversity of positions and specialties it oversees. Achieving multi-state compact status for all professions will require significant effort and coordination. Currently, Guam has 15 professions, and the goal is to have them all participate in multi-state agreements.</p> <p>Z. Pecina explained that while nursing is already part of a compact state, other professions must individually choose to join and meet specific requirements. Each profession must be willing to be part of a compact, and there are associated fees. For instance, the nursing compact costs \$7,000 annually. Therefore, it is crucial to ensure that the board can generate sufficient funds to cover these costs for multi-state participation.</p> <p>N. Cepeda interjected to emphasize that while integrating into multi-state compacts offers benefits, it comes with significant costs that could be burdensome for smaller professions. She shared her experience from serving on the MFT National Board, highlighting the financial challenges associated with such integration. N. Cepeda raised concerns about whether the financial investment is in the best interest of certain professions, noting that while multi-state participation can simplify registration and practice, it may require meeting higher or more rigorous standards.</p> <p>Dr. Miller inquired about the vetting process for professionals within a compact. Z. Pecina explained that there is a comprehensive database and network for managing this process. When a professional's original compact license is issued, the necessary paperwork and information are entered into the databank. Any state hiring that professional can access the databank to verify credentials, streamlining the process. Previously, professionals had to obtain licenses in each state where they practiced, but with multi-state compacts, one license covers multiple states, simplifying and enhancing the efficiency of licensure management.</p> <p>N. Cepeda continued by noting that the financial implications of joining a compact can vary significantly</p>			

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	<p>between professions. She highlighted that for Licensed Professional Counselors (LPCs), there are ongoing costs associated with maintaining membership in the compact, which can be substantial—around \$6,500. Cepeda pointed out that this cost, combined with the financial capabilities of each specialty, must be carefully considered. With 15 different specialties, each with its own financial dynamics, it's crucial to evaluate whether the costs of joining a compact are justified for each profession.</p> <p>She recommended conducting thorough research to determine if joining the compact would be beneficial for specific specialties, emphasizing that understanding the financial impact is essential before making any decisions.</p>			
VII	<p><b>GBAHE Complaints</b></p> <p>The following complaints were reviewed by the GBAHE.</p> <p>Z. Pecina addressed the issue of complaints reviewed by the GBAHE, mentioning that several cases had no associated files. She explained that since joining HPLO in 2019, the search for these missing files has been ongoing, but no records have been found for complaints dating back to 2002, 2003, and 2004. Consequently, these complaints remain unresolved due to the absence of documentation. Pecina emphasized the need to formally close these cases given the missing files.</p> <p><b>A. GBAHE-CO-19-02, Veterinarian, Received 8/22/19.</b> Case will be closed due to the lack of an associated file. <i>Motion to Close: N. Cepeda; 2<sup>nd</sup>: S. Crisostomo</i></p> <p><b>B. GBAHE-CO-19-03, Veterinarian, Received 11/7/19.</b></p> <p><b>C. GBAHE-CO-19-04, Veterinarian, Received 11/7/19.</b> The conclusion was that the veterinarian failed to meet the standard of care for the kitten, which resulted in the animal's death. The issues included inadequate diagnosis and treatment of the kitten's fractured limbs, improper management of an infected wound, insufficient pain relief, and inadequate instructions for the owner on the kitten's care. Additionally, the veterinarian did not provide the patient's records until the owner paid their bill, a practice deemed unethical and harmful to the kitten's well-being. The records provided were also found to be inaccurate upon review by another veterinarian. Dr. Kenneth Litwak, DVM, PhD provided this review.</p> <p>M. Balajadia recommended suspending the veterinarian's license for one year, imposing a \$2,500 fine, and reporting the case to the National Practitioner Data Bank (NPDB). Dr. Miller inquired about the threshold for license suspension and whether it could be adjusted based on the seriousness of the case. M. Balajadia noted that the suspension could be reconsidered based on the veterinarian's reapplication. N. Cepeda commented on the seriousness of the case, emphasizing the importance of maintaining high standards of care and questioning the implications of lowering those standards for the community.</p> <p>M. Balajadia asked for additional suggestions regarding the case, emphasizing that the proposed actions were based on the current situation. She then proposed a motion to suspend the veterinarian's license for two years, until 2027, impose a \$2,500 fine, and report the case to the National Practitioner Data</p>	GBAHE	1237	Noted
		M Balajadia		Unanimously Closed
		Off-Island Expert, Kenneth Litwak		The Individuals License will be Suspended till 2027, a \$2500 fine will be Imposed. The Individual will be Reported to the NPDB once the Individual Responds to the Board's Decision.

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	Bank (NPDB). She also noted that the report would be finalized only after receiving the veterinarian's response. <i>Motion to Suspend license till 2027. Impose a Fine of \$2500, and report to the NPDB. Cepeda; 2<sup>nd</sup>: V. Pereda</i>			
	<b>D. GBAHE-CO-20-01 Veterinarian, Received 5/4/20.</b> M. Balajadia stated that there is no real evidence pertaining to this complaint. <i>Motion to Close: V. Pereda; 2<sup>nd</sup>: Dr. Harper</i>	M. Balajadia		Unanimously Closed
	<b>E. GBAHE-CO-20-02 Veterinarian, Received 3/13/20.</b> M. Balajadia stated that she needs to review the file and the attorneys' remarks.	M. Balajadia		Ongoing
	<b>F. GBAHE-CO-20-06, Veterinarian, Received 1/31/20.</b> M. Balajadia stated that this case will be assigned to Dr. Harper for her to review.	Dr. Harper		In Progress
	<b>G. GBAHE-CO-21-07, Veterinarian, Received: 11/22/21.</b> This case will be assigned to Dr. Harper for her to review	Dr. Harper		In Progress
	<b>H. GBAHE-CO-21-08, Veterinarian, Received: 11/22/21.</b> This case will be assigned to Dr. Harper for her to review	Dr. Harper		In Progress
	<b>I. GBAHE-CO-22-03, MF Therapist, Received 2/21/22.</b> M. Balajadia addressed the case, she indicated the need to consult with legal counsel, specifically Mr. G. Botha, to obtain recommendations before proceeding with further action.	M. Balajadia		Legal Counsel will be Consulted
	<b>J. GBAHE-CO-23-02 Veterinarian Received 12/28/23</b> Sent to off-island consultant.	Off-Island Consultant		In Progress
	<b>K. GBAHE-CO-23-03 Veterinarian Received 12/28/23</b> Sent to off-island consultant.	Off-Island Consultant		In Progress
	<b>L. GBAHE-CO-24-03 Veterinarian Received 8/6/24</b> M. Balajadia states that because it is a new case the board would have to wait for the investigation report before it is reported out.	M. Balajadia		In Progress
<b>VIII</b>	<b>New Business</b>			
	<b>A. Initial/New Applications:</b>	GBAHE	1303	
	<b>1. Bowen, Neal A. for Clinical Psychologist (M. Balajadia)</b> M. Balajadia discussed the credentials of Dr. Neal A. Bowen, a Clinical Psychologist, and noted that the educational requirements outlined in the law specify a PhD or PsyD in clinical psychology or psychology with a field specialization in clinical or counseling from APA accreditation or designated by ASPBB. She indicated that Dr. Bowen does not meet these legal requirements. <i>Motion to Reject Application: Dr. Harper; 2<sup>nd</sup>: Dr. Kim</i>			Unanimously Rejected
	<b>2. Callejo, Kate Rina T. for Physical Therapist (G. Miller)</b> <i>Motion to Approve: N. Cepeda; 2<sup>nd</sup>: S. Crisostomo.</i>			Unanimously Approved
	<b>3. Danielly, Yoika for Clinical Psychologist (M. Balajadia)</b> <i>Motion to Approve: N. Cepeda; 2<sup>nd</sup>: S. Crisostomo</i>			Unanimously Approved
	<b>4. Kashmiri, Bismah for Speech Language Pathologist (S. Crisostomo)</b> <i>Motion to Approve: N. Cepeda; 2<sup>nd</sup>: S. Crisostomo</i>			Unanimously Approved

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	<p><b>5. Pirilli, Amanda C. for Occupational Therapist (S. Crisostomo)</b>  <i>Motion to Approve: N. Cepeda; 2<sup>nd</sup>: S. Crisostomo</i></p>			Unanimously Approved
	<p><b>B. Temporary License</b></p>			
	<p><b>1. Danielly, Yoika for Clinical Psychologist (M. Balajadia)</b>  M. Balajadia reported on Yoika Danielly, who was initially granted a temporary license to work in Guam. She noted that within the 60-day period, she was issued a permanent license. As a result, the temporary license is now void.</p>			Noted
	<p><b>C. Late Renewal Application</b></p>			
	<p><b>1. Taimanglo, Patricia L.G. for Clinical Psychologist (M. Balajadia)</b>  <i>Motion to Approve: Dr. Miller; 2<sup>nd</sup>: N. Cepeda</i></p>			Unanimously Approved
	<p><b>D. Approval for Endoscopic Evaluations</b></p>			
	<p><b>1. Scardilli, Samantha R., SLP (S. Crisostomo)</b>  S. Crisostomo provided an update regarding the endoscopic procedure for speech-language pathologists, which was introduced to the board in 2011. She explained that, at that time, the board required practitioners to complete a course and demonstrate proficiency in inserting the scope without causing harm to the patient. This requirement needed to be submitted to the board for clearance to perform endoscopic procedures independently.  <i>Motion to Approve: N. Cepeda; 2<sup>nd</sup>: Dr. Harper</i></p>			Unanimously Approved
	<p><b>E. Request to Appear and Address the Board</b></p>			
	<p><b>1. Milica Lepojevic</b>  Milica Lepojevic addressed the board, expressing gratitude for the opportunity to speak. She conveyed her appreciation for the board's willingness to address her concerns about the licensing process for LPCs, LMHCs, and providers. Her goal was to seek clarification on issues she deemed crucial to ensuring that the licensing process is conducted efficiently, professionally, and in accordance with relevant laws.</p> <p>Milica Lepojevic continued, stating that since March 9, 2024, she has sought written clarification on her concerns, sending over ten emails and making more than ten health reports. She noted receiving varied and conflicting responses from the board, which has caused significant personal hardship by hindering her progress with her graduate hours and supervised work. She respectfully requested that the board provide a firm and clear resolution to her concerns to enable her to proceed with confidence.</p> <p>Milica Lepojevic clarified a point of confusion stemming from a response she received on March 11, 2024, from a member of the HPLO, who had consulted a board member for that response. M. Lepojevic's question concerned the supervision requirements for LPC, LMHC, and MFP applicants. She understood that supervision must be provided by a licensed counselor who has held the license for at least five years. However, she noted that those with a Licensed Psychology Associate (LPA) license have different supervision rules, where clinical</p>			Complaints were Noted and a Motion Will be Made after all who have Requested to Address the Board have Done so

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	<p>psychologists can provide supervision regardless of how long they have been licensed.</p> <p>She questioned whether someone holding an LPA license, while pursuing LPC, LMHC, or MFP licensure, could be supervised by clinical psychologists licensed for less than three years or LPCs who have been licensed for more than five years.</p> <p>M. Lepojevic continued to address the board, referencing a response she initially received, which confirmed that supervision by a clinical psychologist licensed for less than three years or an LPC licensed for more than five years was permissible. She cited Guam law under 10 Guam Code Annotated Health and Safety Chapter 12, specifically sections 12.1.301, 12.1.302, and 12.1.303, which outline that supervisors must be licensed MFP, LPC, LMHC, or LCFW with at least five years of experience or a clinical psychologist or psychiatrist with at least three years of experience. She emphasized that these requirements were not altered by the new law adopted in December 2024, which she supported in Congress.</p> <p>However, M. Lepojevic highlighted confusion arising from a subsequent response received on June 6, 2024. This response referenced Section 10.407d of the new rules and regulations adopted in December 2022, which specifies requirements for clinical supervision via telehealth. This section states that the clinical supervisor must be licensed for five years and physically located in Guam, excluding LPCs and social workers as possible supervisors. She pointed out that this rule only applies to telehealth supervision and does not address face-to-face supervision, which has not been clearly communicated by the board.</p> <p>M. Lepojevic emphasized the need for clear differentiation between telehealth and face-to-face supervision. She argued that face-to-face supervision should adhere to the original guidelines set forth under 10 Guam Code Annotated Chapter 12, which permits LPCs, LMHCs, MFPs, and LCFWs to supervise if they have at least five years of licensure. She stressed that, to her knowledge, the law governing face-to-face supervision has not been amended.</p> <p>M. Lepojevic expressed frustration over the lack of response from the board regarding this matter, which has left her unable to finalize her choice of supervisor and continue her work for the past six months. She asked the board to consider the personal and professional impact of this uncertainty, both on herself and other applicants, and requested a definitive clarification on the supervisory requirements.</p> <p>N. Cepeda addressed the board, acknowledging the ongoing challenge in obtaining clarity on the supervisory requirements due to frequent changes in the Attorney General's office. N. Cepeda confirmed that despite persistent efforts to secure a definitive answer, including collaboration with V. Pereda on the LPC section, the issue remains unresolved.</p>			



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	<p>N. Cepeda explained that there had been confusion about why certain provisions were removed from the supervision guidelines and indicated that a mistake may have led to the removal of specific requirements. The guidance received from an attorney suggested that even though the telehealth regulations did not include LPCs, the issue was left in a state of uncertainty.</p> <p>N. Cepeda expressed frustration with the lack of resolution and emphasized the need for clear guidance to address the confusion and impact on applicants, particularly those who are LPCs. The uncertainty affects applicants' ability to move forward with their licensing process and creates significant challenges for those impacted by the regulatory changes.</p> <p>M. Lepojevic sought clarification on two points: whether telehealth supervision for all providers requires supervisors to hold a license for five years and whether face-to-face supervision follows a different requirement.</p> <p>M. Balajadia responded by reviewing the law and confirming that for telehealth supervision, the requirement is indeed for supervisors to have five years of licensure. She clarified that this rule applies to both clinical psychologists and other licensed providers. She indicated that this requirement aligns with the current regulations and is not subject to a three-year period as initially considered. M. Balajadia advised M. Lepojevic to consult the specific sections of the law related to supervision for detailed guidance and noted that the new law stipulates a five-year licensure requirement for telehealth supervision.</p> <p>M. Lepojevic questioned how applicants should proceed with their undergraduate hours and applications given conflicting information about supervision requirements, particularly concerning LPCs as supervisors. M. Balajadia, addressing the issue, reiterated that the current law mandates supervisors for telehealth to have five years of licensure. She acknowledged the confusion stemming from past responses and emphasized that this requirement aligns with the current regulations.</p> <p>N. Cepeda clarified that while Section 10-407B does list LPCs as potential supervisors in certain settings, the qualifications for clinical supervisors require them to be licensed and physically located in Guam with at least five years of experience. N. Cepeda noted that there was an error in earlier communications and emphasized that this is the current standard, despite previous misunderstandings. She expressed frustration with the inconsistency and confusion in the process but confirmed that the law specifies the five-year requirement for clinical supervisors.</p> <p>M. Balajadia raised a concern regarding a video published by M. Lepojevic, questioning her representation of her qualifications.</p>			

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	<p>M. Balajadia asked M. Lepoievic to clarify her credentials, emphasizing that public statements suggesting she holds a doctorate in psychology or marriage and family therapy (MFT) are misleading. M. Balajadia noted that while M. Lepoievic has a PhD in communications, this does not qualify her to present herself as a therapist.</p> <p>Lepoievic responded that she obtained certification as a hypnotherapist and is a member of the International Association of Counselors and Therapists. She clarified that she has not claimed to be a doctor in the field of counseling or therapy but has presented herself as a hypnotherapist. She also mentioned that she offers communication courses, and her webpage specifies her qualifications.</p> <p>M. Balajadia maintained that presenting oneself as a doctor in the context of counseling or therapy without appropriate credentials is inappropriate. She urged Lepoievic to ensure that her public representation aligns with her actual qualifications and legal requirements in Guam.</p> <p><b>2. Nora Garces</b></p> <p><b>3. Andrea Santos</b>            Andrea Santos addressed the board to request the acceptance of her hours and application for an initial license. She also sought clarification on changes in public law number 36-13 regarding supervisor qualifications.</p> <p>A. Santos explained that she has been working under the direct supervision of an LPC since October 2020. However, when she attempted to submit the final sections of her application on August 1, she was informed that her hours were now considered void due to recent changes in the law which purportedly rendered LPCs ineligible to supervise.</p> <p>She referenced the initial application form dated 07-01-16, which specified that LPCs, along with clinical psychologists and psychiatrists, were acceptable supervisors. She noted that the revised application form from 06-29-21, which is still available on the board's website, also lists LPCs as acceptable supervisors. A. Santos requested the board to review her situation and provide clarification on the new supervisory requirements to ensure her hours and application can be processed correctly.</p> <p>Andrea Santos expressed her concern about the lack of communication regarding the changes in supervisor qualifications. She highlighted that she relied on the information provided in the application forms, believing that LPCs were appropriate supervisors while she worked towards her LPC certification.</p> <p>A. Santos emphasized that this significant change was not widely communicated within the</p>			<p>Not Present</p> <p>A Motion was made for V Pereda and N Cepeda to Create a Resolunon Pertaining to the Supervisory Requirements in the Rules and Regs and Present it to the Board at the Next Meeting.</p>

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	<p>field, nor to key local agencies like Guam Behavioral Health and Wellness and the Judiciary. She appealed to the board to consider these points and accept her application, allowing her to fully participate in the profession despite the recent changes.</p> <p>A. Santos continued her plea by presenting stark statistics illustrating Guam's severe mental health crisis. She noted that Guam's suicide rate in 2021 was 21.2 per 100,000, which is significantly higher than the U.S. average, placing it 12th out of 194 countries in terms of suicide mortality. Guam also has the second highest per capita rate of rape in the U.S., with 64.2 incidents compared to the national rate of 25.2. In 2023, over 1,500 referrals were made to CPS, involving more than 2,200 children. Additionally, in 2021, 10% of adults reported illicit drug abuse, excluding marijuana, and a third of adults reported mental health symptoms, while local youth are experiencing higher levels of sadness and hopelessness compared to their U.S. counterparts.</p> <p>A. Santos argued that while these critical issues were being highlighted, the rules governing mental health professions were changing, seemingly excluding LPCs from supervisory roles. She questioned the rationale behind these changes and expressed concern that the new rules would limit the ability of LPCs to supervise and mentor new professionals, thereby exacerbating the mental health crisis. She urged the board to reconsider the implications of the rule changes, emphasizing that they could further narrow the pipeline for new mental health professionals and diminish community support.</p> <p>A. Santos pointed out that in other jurisdictions, such as California, Oregon, Arizona, Alaska, and Colorado, LPCs are permitted to supervise not only aspiring LPCs but also those seeking to become MFTs, LMHCs, and other professional counselors. She questioned how the exclusion of nearly half of Guam's licensed mental health professionals could serve the community's interests or benefit the government. She expressed skepticism about the legitimacy of the rule change, stating she could not see a valid government interest or benefit to the community in removing LPCs from supervisory positions.</p> <p>She urged the board to reconsider the change and acknowledge its broader implications, citing her personal experience with mental health services that had been life-saving for her. A. Santos pleaded with the board to act with compassion and foresight to avoid making it more difficult for individuals to access essential care.</p> <p>N. Cepeda acknowledged Andrea Santos' qualifications and background, noting her teaching experience at San Diego State and previous training work with school counselors. N. Cepeda expressed regret over the removal of LPCs as supervisors, admitting that there was no clear rationale for the decision and that attempts to obtain legal guidance had been unsuccessful. N.</p>			

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	<p>Cepeda mentioned the challenges in addressing the issue due to the lack of legal clarity and the difficulty in coordinating a solution with attorneys.</p> <p>V. Pereda also voiced frustration over the elimination of LPCs as qualified supervisors, stating that the change had occurred without his knowledge. He expressed personal disappointment, particularly because his daughter, an experienced LPC, was directly affected by this decision. Pereda shared his concern over the implications of the change but felt limited in what actions could be taken since it is now established law.</p> <p>M. Balajadia emphasized the importance of quality supervision in the licensure process. She highlighted that effective supervision is crucial and should involve regular case discussions, ideally once a week. M. Balajadia expressed concern that not all LPCs are adequately prepared to be supervisors and that some may provide inadequate supervision just to fulfill the requirements. She noted that proper documentation and timely updates of supervision hours are essential and stressed the need for good supervisory practices to ensure professional development. M. Balajadia acknowledged the difficulties faced by those unable to move forward due to current regulations but reiterated the importance of competent supervision.</p> <p>Z. Pecina suggested a potential solution to address the current issue by proposing a resolution as a quick fix. She noted that while the rules and regulations might be inflexible, a resolution could provide the necessary adjustments. Z. Pecina recommended incorporating this resolution into the amendments.</p> <p>Dr. Harper agreed with the approach and emphasized the need to assign someone to review the resolution promptly. She proposed that at the next meeting or as soon as possible, this person should present a formal plan on how to implement the resolution and address the board's questions about its application. Dr. Harper stressed the importance of formalizing the resolution and moving forward with its implementation.</p> <p><i>Motion to Create a Resolution and Present it to the Board at the Next Meeting: Dr. Harper; 2nd: S. Crisostomo</i></p>			
IX	Workgroup Session	GBAHE	1354	Noted, No Workgroup Session
X	Next Board Meeting	GBAHE	1354	Set Date
XI	Adjournment	GBAHE	1354	Adjourned

Minutes Drafted by: FLAME TREE Freedom Center, Inc.

Date Submitted: \_\_\_\_\_

Submitted by the GBAHE Secretary: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by the GBAHE with or without changes: \_\_\_\_\_ Date: \_\_\_\_\_

Certified by or Attested by the Chairperson: Melbalayadia Date: 10/4/2024