Sample Meeting Agenda & Script

This document provides one way to structure the meeting and some potential talking points. Please feel free to adjust the speaking roles and add personal stories or points of interest when planning your meeting!

- Zoom Link Meeting Info: [Insert Mg link here]
- Legislator Name:
- Staffer Name:

Meeting Flow

Assign each of these roles before the meeting.

- Introduce team and NASW:
- Talk about role of social workers (speaking time: 2-3 minutes):
- Talk about AB 2091 (speaking time: 3-5 minutes):
- Talk about AB 2167 (speaking time: 3-5 minutes):
- Talk about SB 1002 (speaking time: 3-5 minutes):
- Closing:

Introduction

Thank the member/staffer for meeting with us today.

Facilitate introductions: introduce yourself, your pronouns, and name if you are with an organization or you are a constituent. Team Leader should call on each Team Member to introduce themself.

Inform the member/staffer who we are and why we're here:

- We are here representing the National Association of Social Workers, California Chapter (NASW-CA). NASW is a membership organization that represents professionals with a degree in social work.
- The mission of NASW-CA is to improve the conditions of life for all California residents through promoting the quality and effectiveness of social work practice in the state.
- Social work is set apart from other helping professions by its “person-in-environment” orientation. Social workers work to address all manner of injustice, whether that be as a Licensed Clinical Social Worker (LCSW) providing therapy to help a client overcome life challenges or advocating for client populations and addressing social justice issues at a macro level.
- We are participating in an annual Lobby Day, and we are here to speak about AB 2091 (Bonta), AB 2167 (Kalra), and SB 1002 (Portantino).

Bills

Talk about AB 2091 (Bonta)

- What is it?
  - Reproductive Privacy Protection Act
• What does it do?
  o Protects the medical privacy of those coming from out of state for reproductive health care.
  o This bill ensures that out of state subpoenas, which seek information on a patient coming for reproductive healthcare from out of state, are not granted.
  o AB 2091 also ensures the Department of Insurance can enforce violations of the release of certain medical records related to sensitive services.

• Why is it needed/background
  o On June 24, 2022, the US Supreme Court overturned Roe v. Wade, the landmark 1973 Supreme Court decision that affirmed the constitutional right to abortion.
  o Prior to this decision, many states had passed laws to codify the right to abortion or to restrict abortion in an attempt to ultimately overturn Roe v. Wade. The overturning of Roe v. Wade leaves the question up to the states on abortion rights.
  o Last year, Texas passed a law which encourages people to act as bounty hunters to seek out and sue those who provide ANY form of support to people seeking an abortion.
  o Additionally, last year alone, 108 abortion restrictions were enacted in 19 states.

• What is current law in California?
  o California has enshrined in the state Constitution, the inalienable right to privacy and provides that every individual possesses this right with respect to their personal reproductive health decisions. Current law also protects the release of certain medical records related to sensitive services.
  o California must respect the privacy of those who come to our state for reproductive healthcare and this bill will protect their medical privacy.

• NASW interest
  o NASW affirms all individuals have a right to bodily autonomy, that abortion is health care, and that all individuals have the right to freedom of choice in accessing essential health care services most especially their reproductive health.

• What is the potential impact?
  o Hostile state laws, which target patients who seek reproductive health care, have the potential to infringe on rights that are protected in California. This bill protects those rights.

• Ask for support: “Can we count on the member’s support?”

**Talk about AB 2167 (Kalra)**

• What does this bill do?
  o AB 2167 (Kalra) requires a court to consider alternatives to incarceration at sentencing.
    ➢ What does this mean? Judges are encouraged to consider alternatives (diversion, restorative justice, collaborative courts, and other community-based programs) when sentencing someone to jail or prison.

• Why is it needed?
  o Starting in the mid-1970s, rates of incarceration in California began to rise rapidly in an unprecedented manner.
CA’s overreliance on incarceration has failed to improve public safety while disproportionately harming vulnerable and marginalized communities.

Every California county with sufficient data shows significant racial disparities in its imprisonment rate.

There is almost NO evidence that long sentences deter the crimes they are intended to deter.

According to a survey by Crime Survivors for Safety and Justice and Californians for Safety and Justice, most crime victims in California support additional reforms to our criminal justice system. According to the survey, 75 percent of surveyed victims favor reducing sentence lengths for people in prison who are assessed as a low risk to public safety. (https://safeandjust.org/wp-content/uploads/ASI_CACrimeSurvivorBrief-RD1-1.pdf)

Other states limit incarceration, including Alabama, Arkansas, Minnesota, Tennessee, New York, and Federal law similarly requires sentences to be no greater than necessary.

What is the potential impact?

California can safely reduce the number of people behind bars by modifying the Penal Code to explicitly encourage more restraint in the use of incarceration.

Like everything else about the criminal justice system, there are significant racial disparities in sentencing and the system is expensive, and ineffective.

By encouraging alternatives to incarceration, CA can produce better public safety outcomes for all. We must pass AB 2167 (Kalra).

Ask for support: “Can we count on the member's support?”

Talk about SB 1002 (Portantino)

What does it do?

This bill will enable injured workers to seek immediate mental and behavioral health care from a Licensed Clinical Social Worker (LCSW) within the workers’ compensation system.

Why is this needed?

Injured workers must often wait for extensive time periods before seeking full psychiatric treatment due to a scarcity of available psychiatric or psychological providers. This delay in mental health care and evaluation often results in the injured worker’s delayed return to work and increased costs to the system.

California is facing a mental and behavioral health crisis, which has further escalated due to the stresses of the Covid-19 Pandemic.

States such as Texas and New York have mobilized LCSWs to help fill the need for mental health clinicians: However, California workers’ compensation law does not include LCSWs in the definition of those permitted to assess, evaluate, and treat mental illness among affected workers.

How does SB 1002 fix this problem?
SB 1002 would address the shortage of qualified mental health clinicians in our state’s WC System by adding LCSWs to treat the most common mental health conditions experienced by injured workers, including PTSD, anxiety, and depression.

SB 1002 adds Licensed Clinical Social Workers to the Provider Directories, alongside the list of approved Psychologists and Psychiatrists in the Workers’ Compensation Network System. The Primary Treating Physician (PTP) refers to the Provider Directories for all referrals.

Specifically, the bill allows Medical Provider Networks (MPNs), Workers’ Compensation Healthcare Organizations (HCO), Joint Powers Authorities (JPA), and Self-Insured Self-Administered Employers to add LCSWs as providers in their networks.

Currently, LCSWs are included in the Workers Compensation Networks as Ancillary Services. The PTP refers injured workers to the mental health specialists listed in the Provider Directories, not the list of Ancillary providers, which includes interpreters, Physical Therapists, and transporters.

Thus, LCSWs are not visible to PTPs so they can’t refer to an LCSW.

Why does this bill not do?
- SB 1002 does not allow an LCSW to determine disability within the workers’ compensation system.
- SB 1002 does not allow LCSWs to act outside their Scope of Practice and will allow LCSW’s to assist the worker in recognizing when there is a need to seek more comprehensive services and treatment from a psychologist or psychiatrist.

(If asked) Why are MFTs not included?
- MFTs do not deal primarily with workplace-related issues. If MFTs were included, it would require a comprehensive disability evaluation with a Qualified Medical Evaluator (QME) before the referral is made, defeating the purpose of the bill.
- CAMFT has not taken a support or oppose position on this bill.

What is the potential impact?
- More workers will receive prompt treatment for their mental and behavioral health conditions under the workers’ compensation system. Putting LCSWs in Provider Networks will identify up to 29,636 LCSWs who can provide timely treatment to meet the mental health care needs of our injured workers under their care.

Ask for support: “Can we count on the member’s support?”

Closing
- Ask the legislator or staffer if they have any questions about the bills.
  - If you don’t know the answer to a question, don’t make one up on the spot. Team Leaders should make a note of the question and let them know someone will get back to them.
- Ask if the member will be supporting each bill with their vote (if someone did not do this already)
- Refer them to NASW-CA’s Lobby Days web page for more information & drop the link in the chat: https://www.naswca.org/page/social-workers-lead
- Thank the member or staffer for their time and support. End the meeting.
Team Leaders: After your meeting, please fill out the Seal the Deal Form