MEDICAL BOARD OF CALIFORNIA

EXECUTIVE COMMITTEE
MEETING AGENDA

San Francisco Airport Marriott Waterfront
1800 Old Bayshore Hwy
Burlingame, CA 94010
650-692-9100 (Directions Only)
Irvine Room

Thursday, July 30, 2015
1:00 pm – 1:45 pm
(or until the completion of business)

Teleconference – See Attached Meeting Information

Action may be taken on any item listed on the agenda.

While the Board intends to webcast this meeting, it may not be possible to webcast the entire open meeting due to limitations on resources.

Please see Meeting Information Section for additional information on public participation.

MEMBERS OF THE EXECUTIVE COMMITTEE

David Serrano Sewell, J.D., Chair
Dev GnanaDev, M.D.
Michael Bishop, M.D.
Sharon Levine, M.D.
Ronald Lewis, M.D.
Denise Pines
Barbara Yaroslavsky

ORDER OF ITEMS IS SUBJECT TO CHANGE

ALL TIMES ARE APPROXIMATE AND SUBJECT TO CHANGE.
If a quorum of the Board is present, members of the Board who are not members of the Committee may attend only as observers.

1. Call to Order / Roll Call

2. Public Comment on Items Not on the Agenda
   Note: The Committee may not discuss or take action on any matter raised during this public comment section that is not included on this agenda, except to decide to place the matter on the agenda of a future meeting. [Government Code §§11125, 11125.7(a)]

3. Approval of Minutes from October 23, 2014 Meeting

4. Presentation and Update on Fiscal Year 15/16 Budget – Ms. Amaral and Ms. Kirchmeyer

5. Presentation on Satisfaction Survey – Ms. Robinson and Ms. Kirchmeyer

6. Discussion and Update on Strategic Plan – Ms. Robinson and Ms. Kirchmeyer

7. Future Agenda Items

8. Adjournment

Meeting Information

This meeting will be available via teleconference. Individuals listening to the meeting will have an opportunity to provide public comment as outlined below.

The call-in number for teleconference comments is: (877) 209-9920

Please wait until the operator has introduced you before you make your comments.

To request to make a comment during the public comment period, press *1; you will hear a tone indicating you are in the queue for comment. If you change your mind and do not want to make a comment, press #. Assistance is available throughout the teleconference meeting. To request a specialist, press *0.

During Agenda Item 2 – Public Comments on Items Not on the Agenda, the Board has limited the total public comment period via teleconference to 20 minutes. Therefore, after 20 minutes, no further comments will be accepted. Each person will be limited to three minutes per agenda item.

During public comment on any other agenda item, a total of 10 minutes will be allowed for comments via the teleconference line. After 10 minutes, no further comments will be accepted. Each person will be limited to three minutes per agenda item.

Comments for those in attendance at the meeting will have the same time limitations as those identified above for individuals on the teleconference line.

The mission of the Medical Board of California is to protect health care consumers through the proper licensing and regulation of physicians and surgeons and certain allied health care professions and through the vigorous, objective enforcement of the Medical Practice Act, and to promote access to quality medical care through the Board's licensing and regulatory functions.

NOTICE: The meeting is accessible to the physically disabled. A person who needs a disability-related accommodation or modification in order to participate in the meeting may make a request by contacting Lisa Toof at (916) 263-2389 or email lisa.toof@mbc.ca.gov or send a written request to Lisa Toof at the Medical Board of California, 2005 Evergreen Street, Ste. 1200, Sacramento, CA 95815. Providing your request at least five (5) business days before the meeting will help ensure availability of the requested accommodation.

Meetings of the Medical Board of California are open to the public except when specifically noticed otherwise in accordance with the Open Meeting Act. The audience will be given appropriate opportunities to comment on any issue presented in open session before the Committee, but the Chair may apportion available time among those who wish to speak.

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For additional information, call (916) 263-2389.

MEDICAL BOARD OF CALIFORNIA

EXECUTIVE COMMITTEE MEETING

Sheraton San Diego Hotel and Marina
1380 Harbor Island Drive / Bay Tower
San Diego, CA 92101

Thursday, October 23, 2014

MEETING MINUTES

Due to timing for invited guests to provide their presentations, the agenda items below are listed in the order they were presented.

Members Present:
David Serrano Sewell, J.D., Chair
Michael Bishop, M.D.
Dev GnanaDev, M.D.
Sharon Levine, M.D.
Ronald Lewis, M.D.
Barbara Yaroslavsky

Members Absent:
Denise Pines

Staff Present:
Dianne Dobbs, Legal Counsel, Department of Consumer Affairs
Laura Freedman, Legal Counsel, Department of Consumer Affairs
Lou Galiano, Audio/Video Specialist, Department of Consumer Affairs
Cassandra Hockenson, Public Affairs Manager
Troy Holmes, Investigator, Department of Consumer Affairs
Kimberly Kirchmeyer, Executive Director
Armando Melendez, Business Services Officer
Jose Partida, Investigator, Department of Consumer Affair's
Regina Rao, Associate Governmental Program Analyst
Eric Ryan, Supervising Investigator I, Department of Consumer Affairs
Jennifer Simoes, Chief of Legislation
Lisa Toof, Administrative Assistant II
See Vang, Business Services Officer
Curt Worden, Chief of Licensing

Members of the Audience:
Gloria Castro, Senior Assistant Attorney General, Attorney General's Office
Yvonne Choong, California Medical Association (CMA)
Genevieve Clavreul
Zennie Coughlin, Kaiser Permanente'

Julie D'Angelo Fellmeth, Center for Public Law
Karen Ehrlich, Licensed Midwife
Bridget Fogarty Gramme, Center for Public Interest Law
Jack French, Consumer's Union
Michael Gomez, Department of Consumer Affairs
Terry Jones, Supervising Deputy Attorney General, Attorney General's Office
Howard Krauss, M.D.
Carol Moss, Consumers Union
Ty Moss, Consumers Union

Agenda Item 1 Call to Order/Roll Call

Mr. Serrano Sewell called the meeting of the Executive Committee of the Medical Board of California (Board) to order on October 23, 2014, at 1:45 p.m. A quorum was present and due notice was provided to all interested parties.

Agenda Item 2 Public Comments on Items not on the Agenda

No public comment was heard on this agenda item.

Agenda Item 3 Approval of Minutes from the May 1, 2014 Meeting

Dr. Lewis made a motion to approve the May 1, 2014 meeting minutes as submitted; s/Ms. Yaroslavsky. Motion carried.

Agenda Item 4 Discussion on a Compendium of Medical Board of California Polices

Mr. Serrano Sewell noted at the last meeting it was recommended the Board put together a compendium of policies to be used by staff as they review initial legislation and to assist as legislation is amended during the legislative process. In some instances, these amendments may be made prior to a Board Meeting and staff will have to testify on a bill prior to the next meeting. In discussing this issue with Ms. Kirchmeyer and Ms. Simoes, it had been determined, in addition to this compendium, when bills that have a significant impact on the Board's business, Mr. Serrano Sewell will be speaking with Ms. Kirchmeyer to determine if there needs to be an interim Executive Committee Meeting to take a position on a bill prior to a legislative hearing. If an interim Executive Committee Meeting has to take place, a 10-day notice will be provided and a teleconference meeting will be held. However, on some bills, a compendium of policies would be of assistance in providing feedback on bills that come up prior to a Board meeting. This compendium has been established based upon Members' input, meetings, and internal discussions. He stated Ms. Simoes would walk through the three specific policies listed in the document included in the Board packet. Discussion today will be to provide any input into the document and if the language is agreed upon at today's meeting, the items can be taken to the full Board. Mr. Serrano Sewell added that further discussion can be had on any amendments that need to happen and can be continued at the next Executive Committee meeting, if necessary.

Mr. Serrano Sewell stated he views this compendium as a work in progress and asked his colleagues not to feel the need to take action right now. He stated these policies are important and will provide guidance to legislators and staff.

Ms. Simoes stated there are three policy areas staff is recommending the Board adopt. She stated the first policy is related to scope of practice. The Board has taken positions in the past on bills that affect scope of practice for health care practioners. These bills can be difficult to weigh the scope expansion versus the need to ensure consumer protection. In the past, the Board has both supported and opposed bills that would expand the scope of practice for other health care providers.

Ms. Simoes referred the members to page EXEC 4-2 in their packets, which is where the policies and principals begin. She stated these policies will depend on the particular language in each bill, though staff believes the policy statement could be adopted by the Board, due to the broadness of the policy, for bills that propose scope of practice expansions. She went through the statements in the policy. The first was the Department of Consumer Affairs (DCA), the Board and other health care boards at DCA are duty bound to foremost protect and serve California consumers. The second was protecting and serving health care consumers requires that DCA and other health care boards assure that California consumers are: a) evaluated and managed by California licensees practicing within their scope of practice, as defined by law and regulation; b) evaluated and managed by licensees who are in compliance with all applicable federal, state and local laws and regulations; c) evaluated and managed by competent licensees, practicing within community standards of care; d) entitled to be evaluated and managed in accordance with the highest standard of care applicable to any of the licensed or certified practioners. The third was that the Board hold that all California consumers should know the background, training, education, certification and history of disciplinary actions of any health care provider they may consider seeing. The fourth was the Board recommends that any legislatively-proposed expansion of scope of practice include criteria to be met regarding education, training, certification, and continuing oversight of any practioners who obtain expanded scope. Primarily, consumers must be protected, and any proposed scope expansion must assure adequate mechanisms and oversight to reduce patient risk of harm. She stated that care provided to patients in California should be of the same quality, regardless of who is providing the care.

Dr. Levine recommended adding the word “proctor” in the first sentence of the fourth statement between the words, “training,” and “certification.”

Mr. Serrano Sewell thanked Dr. Krauss for his contributions in this process, as he was extremely helpful in guiding the internal discussions that were had while putting this document together.

Ms. Yaroslavky made a motion to present this policy to the full Board as written with Dr. Levine’s suggested addition/s: Dr. GnanaDev.

Yvonne Choong, CMA, stated they have no problem with any of the policy statements themselves, and CMA does a policy compendium as well as does the American Medical Association. She recommended that the compendium be put on calendar for an annual review as laws change and it should be kept as current as possible.

Motion carried.

Ms. Simoes continued with the next policy, continuing medical education (CME). She stated there are many bills that initially propose requiring mandatory CME in a specific area. Due to the Board's history in opposing these types of bills, she always advises the legislative offices that the Board will likely oppose mandatory CME. Many times the author's office decides to include language instead that would encourage physicians take a certain type of CME or encourage the Board to set specific standards.

The policy statement recommendation is for the Board to oppose the concept of mandating specific CME topics. She added the Board believes that each licensed physician should decide which type of CME is most appropriate for their particular practice.

Dr. Lewis made a motion to accept the policy statement recommendation/s: Dr. GnanaDev.

Karen Ehrlich, Licensed Midwife, stated based on what was heard this morning from the African American representatives; it seems that something about cultural competency, which would span all specialties, should be included.

Motion carried.

Ms. Simoes continued with the next policy, funding for physician education. The Board has routinely supported bills that provided additional funding for the practice of medicine. This includes bills that improve or provide more funding for loan programs, provide more funding for medical schools, and provide funding for additional residency positions. When these types of bills are introduced, she advises the author's office that the Board will likely be in support of additional funding. The policy statement recommendation is the Board supports additional funding for physician education, including funding for additional residency positions, funding for medical schools in California, and funding for loan programs, including the Steven M. Thompson Loan Repayment Program.

Dr. GnanaDev made a motion to accept the policy recommendation as written/s: Dr. Lewis.

Dr. Levine stated Federal funding for residency slots comes from Medi-Care funding. The number of slots was frozen in 1997 with the Balanced Budget Act. Subsequent to that, many new residency positions have been created from different sources of funding and she feels this is an appropriate policy statement for the Board.

Dr. Bishop expressed his concern based on the recent legislation where the physicians bore the burden of funding the improvement to the Controlled Substance Utilization Review and Evaluation System (CURES), which he feels is inequitable. He feels that adopting a policy such as this may result in the physicians being the ones being taxed.

Dr. GnanaDev stated he understands Dr. Bishop's concerns and California is in bad shape when it comes to access to care. New York, which has half of the population of California has 13 medical

schools, yet California, which has twice the population, only has 9 medical schools, so funding needs to be found other places and not just on the physician side.

Motion carried (5-1, Bishop).

Agenda Item 5 Review of Current Committees, Task Forces, and Sub Committees

Mr. Serrano Sewell stated in the Board's strategic plan, every other October the Board should review the listing of committees to determine the necessity of the committee, its roles, and whether the committee needs to continue or can be eliminated. In August, Mr. Serrano Sewell met with Ms. Kirchmeyer to discuss the Board's committees. The recommendations from the meeting are listed on pages EXEC 5-1 to EXEC 5-5. On pages, EXEC 5-6 to EXEC 5-16 there is a document that identifies the current committees with their roles, membership, and issues. The main goal of reviewing the Board's committees is to find efficiencies, assist with time commitments for Members, and to increase output from the committees.

Mr. Serrano Sewell noted, it is recommended that the Board keep Enforcement, Licensing, Education and Wellness, and Executive Committees as standing committees and continue them for the next two years. For the Executive Committee Members, it is recommended that it be made up of the Board Officers – President, Vice President, and Secretary; the immediate Past President; and the Chairs of Enforcement, Licensing, and Education and Wellness Committees.

There are several committees that are required by law, and the recommendation is to keep those committees – the Specialty Faculty Permit Review Committee, the Midwifery Advisory Council, the Application Review Committee, and the Special Programs Committee. Mr. Serrano Sewell stated it is recommended that the Application Review and Special Programs Committees be combined. The duties and functions of these committees are very similar and there is no requirement to keep them separate, just that the Board have a committee to discuss applications and special program applications, when needed.

Mr. Serrano Sewell noted in the documents in this section, the recommendation is to eliminate the Access to Care/Cultural and Linguistic Competency Committee and its Subcommittee. The Committee has not met in several years and there has been no need to have the Committee. The role of this Committee, which was to find ways to improve access to care and to hear an update on the cultural and linguistic competency in CME, can be put into the Licensing Committee and the Education and Wellness Committee.

The Committee on Physician Supervisory Responsibilities is another Committee that has completed its main purposes. However, this Committee has brought up other issues that can be placed in either the Enforcement or the Licensing Committees, as appropriate. If additional discussions need to be had on an issue, it is better done at an interested parties meeting rather that within this Committee. The issue can then be brought back to the appropriate standing committee, Licensing or Enforcement, for appropriate action before going to the full Board.

Lastly, Mr. Serrano Sewell recommended that the Board eliminate the subcommittees and task forces with the exception of the Prescribing Task Force, which has continued responsibilities

pertaining to prescribing practices. This two-Member task force allows staff to work with the Members and hold interested parties meetings. The information is then brought to the full board for discussion and possible action.

Mr. Serrano Sewell stated the purpose of this change is to increase the output of the committees, realizing that time is valuable, and to expand the scope of authority with each of the remaining committees that would be in place for the next two years.

Ms. Yaroslavsky made a motion to approve the committee changes as indicated in the Board packet/s: Dr. Lewis. Motion carried.

Agenda Item 6 Update on Strategic Plan

Ms. Kirchmeyer referred the Members to pages EXEC 6-1 through EXEC 6-21. She stated, these pages include an update on the Board's new strategic plan. The document has been color coded for easier reference, and there is a section where the status of the objective is listed. With the new strategic plan, several items identify something that has to happen each quarter or monthly. Board staff will identify that an objective has been completed by highlighting the date column in green. If something was unable to be completed, the date column will be red. If an objective is still being worked on, the date column will be yellow.

Ms. Kirchmeyer noted, the majority of the items in red in the packet are due to the Board's inability to run enforcement reports from the BreEZe system. The ISB staff continues to work on some reports and with DCA on others to get the reports finalized. Other items are red due to a lack of resources. Several key positions have been vacant, including the Deputy Director and a Chief of Enforcement, which will assist with some of the special projects. Board staff is assisting with those special projects that would normally be done by those positions. These objectives will be worked on in the next quarter to be sure goals are met.

Ms. Kirchmeyer stated she would appreciate feedback from the Members on the new layout of the strategic plan.

Dr. Levine suggested on EXEC 6-15; Goal 4.1c, adding the Senate and Assembly Health Committees. She noted many of the issues that come before the Board as legislation often come from or to the Health Committees, so she feels that it is important for those committees to understand the Board's function. She also noted in Goal 4.2b, she feels there may be a better way to reach a larger audience of stakeholders. It seems going hospital by hospital is a bit tedious for both the Board's public information staff as well as the Board Members. All stakeholder communities have associations that meet in informational sessions. The associations could carry the Board's message to those sessions, which would reach a much larger audience.

Agenda Item 7 Future Agenda Items

Ms. Yaroslavsky suggested a budget update at the next meeting.

Agenda Item 8 Annual Evaluation of the Executive Director

Adjourned to Closed Session at 2:35 p.m.

Returned from Closed Session at 3:13 p.m. for adjournment.

Agenda Item 9 Adjournment

With no further questions or comments from the Members or the public, the meeting was adjourned at 3:15 p.m.

0758 - Medical Board
Analysis of Fund Condition

(Dollars in Thousands)
Fund Condition with General Fund Loan Repayments

		ACTUAL 2013-14	CURRENT YEAR 2014-15	BY 2015-16	BY+1 2016-17	BY+2 2017-18
BEGINNING BALANCE		$ 26,498	$ 28,153	$ 20,058	$ 21,500	$ 13,181
Prior Year Adjustment		$ 234	$ -	$ -	$ -	$ -
Adjusted Beginning Balance		$ 26,732	$ 28,153	$ 20,058	$ 21,500	$ 13,181
REVENUES AND TRANSFERS						
Revenues:						
125600	Other regulatory fees	$ 157	$ 278	$ 258	$ 258	$ 258
125700	Other regulatory licenses and permits	$ 6,994	$ 6,122	$ 6,249	$ 6,249	$ 6,249
125800	Renewal fees	$ 48,914	$ 45,730	$ 45,710	$ 45,710	$ 45,710
125900	Delinquent fees	$ 238	$ 90	$ 89	$ 89	$ 89
141200	Sales of documents	$ 12	$ -	$ -	$ -	$ -
142500	Miscellaneous services to the public	$ 1	$ 30	$ 30	$ 30	$ 30
150300	Income from surplus money investments	$ 75	$ 76	$ 69	$ 52	$ 22
160400	Sale of fixed assets	$ -	$ 3	$ 3	$ 3	$ 3
161000	Escheat of unclaimed checks and warrants	$ 11	$ -	$ -	$ -	$ -
161400	Miscellaneous revenues	$ 2	$ 15	$ 15	$ 15	$ 15
Totals, Revenues		$ 56,404	$ 52,344	$ 52,423	$ 52,406	$ 52,376
Transfers:						
Proposed GF Loan Repayment (Budget Act of 2008)		$ -	$ -	$ 3,000	$ 3,000	$ -
Proposed GF Loan Repayment (Budget Act of 2011)		$ -	$ -	$ 7,000	$ -	$ 2,000
TOTALS, REVENUES AND TRANSFERS		$ 56,404	$ 52,344	$ 62,423	$ 55,406	$ 54,376
TOTAL RESOURCES		$ 83,136	$ 80,497	$ 82,481	$ 76,906	$ 67,557
EXPENDITURES						
Disbursements:						
0840 State Controller (State Operations)		$ 3	$ -	$ -	$ -	$ -
8880 FSCU (State Operations)		$ -	$ -	$ -	$ -	$ -
FISCAL		$ 259	$ 48	$ 107	$ -	$ -
1110 Program Expenditures (State Operations)		$ 54,721	$ 58,271	$ 57,951	$ 59,121	$ 60,314
	2014-15 and ongoing Approved Costs					
	BreEZe Costs	$ -	$ 1,531	$ -	$ -	$ -
	Enforcement Enhancements	$ -	$ 471	$ 415	$ 415	$ 415
	SB 304	$ -	$ 118	$ 118	$ 118	$ 118
	Anticipated Future Costs					
	Change in Business Process	$ -	$ -	$ -	$ 715	$ 715
	Expert Reviewer	$ -	$ -	$ -	$ 735	$ 735
	Adverse Events Report	$ -	$ -	$ -	$ 140	$ 140
	BreEZe Costs	$ -	$ 125	$ 2,403	$ 2,494	$ 2,400
	Establish Spending Authority for Midwifery	$ -	$ -	$ (13)	$ (13)	$ (13)
Total Disbursements		$ 54,983	$ 60,439	$ 60,981	$ 63,725	$ 64,824
1110 Reimbursement/Cost Recovery			$ 1,740	$ 900	$ 900	$ 900
FUND BALANCE						
Reserve for economic uncertainties		$ 28,153	$ 20,058	$ 21,500	$ 13,181	$ 2,733
Months in Reserve		5.6	3.9	4.0	2.4	0.5

NOTES:

A. Assumes workload and revenue projections are realized for FY 15/16 and beyond.
B. Interest on fund estimated at .361%.
C. $9 million was loaned to the General Fund by the Board in FY 11/12 and $6 million was loaned to the General Fund in FY 08/09. These loans will be repaid when the fund is nearing its minimum mandated level.
D. BreEZe revenue collections for FY 13/14 included revenue in advance, thereby overstating the Board's revenue in FY 13/14. This should be realized in FY 14/15.
E. FY 14/15 Total Disbursements excludes $125,000 anticipated BreEZe Spring Finance Letter costs.
F. FY 14/15 Year-to-Date reimbursement/cost recovery is a net reduction in expenditures and is reflected for display purposes only.

6/30/2015

0758 - Medical Board
Analysis of Fund Condition
(Dollars in Thousands)

	ACTUAL 2013-14	CURRENT YEAR 2014-15	BY 2015-16	BY+1 2016-17	BY+2 2017-18
BEGINNING BALANCE	$ 26,498	$ 28,153	$ 20,058	$ 11,500	$ 181
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125800 Renewal fees	$ 48,914	$ 45,730	$ 45,710	$ 45,710	$ 45,710
125900 Delinquent fees	$ 238	$ 90	$ 89	$ 89	$ 89
141200 Sales of documents	$ 12	$ -	$ -	$ -	$ -
142500 Miscellaneous services to the public	$ 1	$ 30	$ 30	$ 30	$ 30
150300 Income from surplus money investments	$ 75	$ 76	$ 69	$ 52	$ 22
160400 Sale of fixed assets	$ -	$ 3	$ 3	$ 3	$ 3
161000 Escheat of unclaimed checks and warrants	$ 11	$ -	$ -	$ -	$ -
161400 Miscellaneous revenues	$ 2	$ 15	$ 15	$ 15	$ 15
Totals, Revenues	$ 56,404	$ 52,344	$ 52,423	$ 52,406	$ 52,376
Transfers:					
TOTALS, REVENUES AND TRANSFERS	$ 56,404	$ 52,344	$ 52,423	$ 52,406	$ 52,376
TOTAL RESOURCES	$ 83,136	$ 80,497	$ 72,481	$ 63,906	$ 52,557
EXPENDITURES					
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SB 304		$ 118	$ 118	$ 118	$ 118
Anticipated Future Costs					
Change in Business Process	$ -	$ -	$ -	$ 715	$ 715
Expert Reviewer	$ -	$ -	$ -	$ 735	$ 735
Adverse Events Report	$ -	$ -	$ -	$ 140	$ 140
BreEZe Costs		$ 125	$ 2,403	$ 2,494	$ 2,400
Establish Spending Authority for Midwifery			$ (13)	$ (13)	$ (13)
Total Disbursements	$ 54,983	$ 60,439	$ 60,981	$ 63,725	$ 64,824
1110 Reimbursement/Cost Recovery		$ 1,740	$ 900	$ 900	$ 900
FUND BALANCE					
Reserve for economic uncertainties	$ 28,153	$ 20,058	$ 11,500	$ 181	$ (12,267)
Months in Reserve	5.6	3.9	2.2	0.0	-2.4

NOTES:

A. Assumes workload and revenue projections are realized for FY 15/16 and beyond.
B. Interest on fund estimated at .361%.
C. $9 million was loaned to the General Fund by the Board in FY 11/12 and $6 million was loaned to the General Fund in FY 08/09. These loans will be repaid when the fund is nearing its minimum mandated level.
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F. FY 14/15 Year-to-Date reimbursement/cost recovery is a net reduction in expenditures and is reflected for display purposes only.

6/30/2015

Medical Board of California
Fiscal Year 2014-15
Budget Expenditure Report
(As of May 31, 2015)
(92% of fiscal year completed)

OBJECT DESCRIPTION	BUDGET ALLOTMENT	EXPENDITURES / ENCUMBRANCES	PERCENT OF BUDGET EXPEND / ENCUMB	UNENCUMBERED BALANCE
PERSONAL SERVICES				
Salary & Wages				
(Staff & Exec Director)	9,272,626	7,445,879	80.3	1,826,747
Board Members	31,500	76,356	242.4	(44,856)
Temp Help	755,888	161,152	21.3	594,736
Overtime	44,433	21,235	47.8	23,198
Staff Benefits	5,084,579	4,062,442	79.9	1,022,138
BL 12-03 Blanket	0	484,807		0
TOTALS, PERS SERVICES	15,189,026	12,251,871	80.7	3,421,963
OPERATING EXP & EQUIP				
General Expense	72,874	284,557	390.5	(211,683)
Fingerprint Reports	333,448	287,537	86.2	45,911
Printing	194,755	163,738	84.1	31,017
Communications	106,190	120,151	113.1	(13,961)
Postage	149,511	108,213	72.4	41,298
Insurance	2,053	5,390	262.5	(3,337)
Travel In-State	130,298	107,636	82.6	22,662
Travel Out-of-State	0	2,641	0.0	(2,641)
Training	54,894	8,542	15.6	46,352
Facilities Operation (Rent)	928,140	1,105,073	119.1	(176,933)
Consult/Prof Services	2,301,088	2,002,902	87.0	298,186
Departmental Prorata	5,059,555	5,155,986	101.9	(96,432)
HQIU	16,320,487	15,014,644	92.0	1,305,843
Consolidated Data Center	650,230	120,838	18.6	529,392
Data Processing	117,492	328,267	279.4	(210,775)
Central Admin Svcs (Statewide Prorata)	2,883,789	2,866,649	99.4	17,140
Major Equipment	57,180	48,893	85.5	8,287
Other Items of Expense	0	7,109	0.0	(7,109)
Vehicle Operations	31,925	28,379	88.9	3,546
Attorney General Services	13,347,280	11,790,338	88.3	1,556,942
Office of Administrative Hearings	1,525,080	953,408	62.5	571,672
Evidence/Witness	1,893,439	1,513,887	80.0	379,552
Court Reporter Services	225,000	215,046	95.6	9,954
Minor Equipment	28,949	90,904	314.0	(61,955)
Special Items of Expense	0	0	0.0	0
TOTALS, OE&E	46,413,657	42,330,728	91.2	4,082,929
TOTALS, EXPENDITURES	61,602,683	54,582,599	88.6	7,020,084
Scheduled Reimbursements	(384,000)	(318,613)	83.0	(65,387)
Distributed Costs	(780,000)	(555,282)	71.2	(224,718)
NET TOTAL, EXPENDITURES	60,438,683	53,708,705	88.9	6,729,979
Unscheduled Reimbursements*		(1,740,078)		
		51,968,627		

** no authority to spend*

Medical Board of California
Fiscal Year 2014-15
Budget Expenditure Report - Licensing
(As of May 31, 2015)
(92% of fiscal year completed)

OBJECT DESCRIPTION	BUDGET ALLOTMENT	EXPENDITURES / ENCUMBRANCES	PERCENT OF BUDGET EXPEND / ENCUMB	UNENCUMBERED BALANCE
PERSONAL SERVICES				
Salary & Wages				
(Staff & Exec Director)	2,656,772	2,215,266	83.4	441,506
Board Members	0	0	0.0	0
Temp Help	214,000	30,152	14.1	183,848
Overtime	17,825	7,852	44.1	9,973
Staff Benefits	855,480	1,239,213	144.9	(383,733)
BL 12-03 Blanket	0	22,969		0
TOTALS, PERS SERVICES	3,744,078	3,515,452	93.9	251,594
OPERATING EXP & EQUIP				
General Expense	15,345	23,941	156.0	(8,596)
Fingerprint Reports	333,448	286,675	86.0	46,773
Printing	99,876	106,635	106.8	(6,759)
Communications	25,000	21,715	86.9	3,285
Postage	78,111	51,789	66.3	26,322
Insurance	0	0	0.0	0
Travel In-State	9,758	15,786	161.8	(6,028)
Travel Out-of-State	0	0	0.0	0
Training	5,000	0	0.0	5,000
Facilities Operation (Rent)	226,000	325,608	144.1	(99,608)
Consult/Prof Services	1,227,873	1,013,925	82.6	213,948
Departmental Prorata	610,898	615,109	100.7	(4,211)
HQIU	0	0	0.0	0
Consolidated Data Center	0	0	0.0	0
Data Processing	3,000	23,215	773.8	(20,215)
Central Admin Svcs (Statewide Prorata)	341,872	333,302	97.5	8,570
Major Equipment	0	0	0.0	0
Other Items of Expense	0	0	0.0	0
Vehicle Operations	0	0	0.0	0
Attorney General Services	190,000	21,557	11.3	168,443
Office of Administrative Hearings	0	0	0.0	0
Evidence/Witness	7,500	0	0.0	7,500
Court Reporter Services	250	0	0.0	250
Minor Equipment	0	519	0.0	(519)
Special Items of Expense	0	0	0.0	0
TOTALS, OE&E	3,173,931	2,839,776	89.5	334,155
TOTALS, EXPENDITURES	6,918,009	6,355,228	91.9	562,781
Scheduled Reimbursements	(384,000)	(318,613)	83.0	(65,387)
Distributed Costs	(31,131)	(22,044)	70.8	(9,087)
NET TOTAL, EXPENDITURES	6,502,878	6,014,571	92.5	488,307
Unscheduled Reimbursements*		0		
		6,014,571		

** no authority to spend*

Medical Board of California
Fiscal Year 2014-15
Budget Expenditure Report - Enforcement
(As of May 31, 2015)
(92% of fiscal year completed)

OBJECT DESCRIPTION	BUDGET ALLOTMENT	EXPENDITURES / ENCUMBRANCES	PERCENT OF BUDGET EXPEND / ENCUMB	UNENCUMBERED BALANCE
PERSONAL SERVICES				
Salary & Wages				
(Staff & Exec Director)	2,490,580	1,927,018	77.4	563,563
Board Members	0	0	0.0	0
Temp Help	200,000	75,522	37.8	124,479
Overtime	14,554	5,465	37.5	9,089
Staff Benefits	2,909,133	1,172,310	40.3	1,736,824
BL 12-03 Blanket	0	448,960		0
TOTALS, PERS SERVICES	5,614,267	3,629,274	64.6	2,433,954
OPERATING EXP & EQUIP				
General Expense	15,340	114,557	746.8	(99,217)
Fingerprint Reports	0	832	0.0	(832)
Printing	35,279	32,472	92.0	2,807
Communications	14,510	48,073	331.3	(33,563)
Postage	60,000	54,416	90.7	5,584
Insurance	0	0	0.0	0
Travel In-State	17,531	30,172	172.1	(12,641)
Travel Out-of-State	0	1,677	0.0	(1,677)
Training	31,000	3,715	12.0	27,285
Facilities Operation (Rent)	367,140	345,349	94.1	21,791
Consult/Prof Services	985,494	967,874	98.2	17,620
Departmental Prorata	3,664,636	3,751,003	102.4	(86,368)
HQIU	16,320,487	15,014,644	92.0	1,305,843
Consolidated Data Center	0	0	0.0	0
Data Processing	17,492	40,068	229.1	(22,576)
Central Admin Svcs (Statewide Prorata)	2,103,100	2,094,530	99.6	8,570
Major Equipment	0	0	0.0	0
Other Items of Expense	0	5,620	0.0	(5,620)
Vehicle Operations	0	5,368	0.0	(5,368)
Attorney General Services	13,157,280	11,768,781	89.4	1,388,499
Office of Administrative Hearings	1,525,080	953,408	62.5	571,673
Evidence/Witness	1,820,939	1,375,247	75.5	445,693
Court Reporter Services	224,750	215,046	95.7	9,704
Minor Equipment	0	8,204	0.0	(8,204)
Special Items of Expense	0	0	0.0	0
TOTALS, OE&E	40,360,057	36,831,055	91.3	3,529,003
TOTALS, EXPENDITURES	45,974,324	40,460,328	88.0	5,513,996
Scheduled Reimbursements			0.0	0
Distributed Costs	(744,054)	(527,505)	70.9	(216,549)
NET TOTAL, EXPENDITURES	45,230,270	39,932,823	88.3	5,297,447
Unscheduled Reimbursements*		(268,499)		
		39,664,324		

** no authority to spend*

Health Quality Investigation Unit (HQIU)
Fiscal Year 2014-15
Budget Expenditure Report
(As of May 31, 2015)
(92% of fiscal year completed)

OBJECT DESCRIPTION	BUDGET ALLOTMENT	EXPENDITURES / ENCUMBRANCES	PERCENT OF BUDGET EXPEND / ENCUMB	UNENCUMBERED BALANCE
PERSONAL SERVICES				
Salary & Wages	8,147,742	7,052,923	86.6	1,094,819
Temp Help	1,073,743	1,297,437	0.0	(223,694)
Overtime	5,559	12,547	225.7	(6,988)
Staff Benefits	4,338,004	3,878,219	89.4	459,785
BL 12-03 Blanket	0	7,140	0.0	(7,140)
TOTALS, PERS SERVICES	13,565,048	12,248,266	90.3	1,316,782
OPERATING EXP & EQUIP				
General Expense	113,035	213,398	188.8	(100,363)
Printing	69,000	79,575	115.3	(10,575)
Communications	118,004	116,115	98.4	1,889
Postage	36,000	45,445	126.2	(9,445)
Insurance	39,000	30,056	77.1	8,945
Travel In-State	222,000	151,003	0.0	70,997
Travel Out-of-State	7,000	12	0.2	6,988
Training	27,000	25,904	0.0	1,096
Facilities Operation (Rent)	1,574,000	1,438,881	91.4	135,119
Consult/Prof Services	91,000	103,522	113.8	(12,522)
Departmental Prorata	0	0	0.0	0
Consolidated Data Center	15,000	0	0.0	15,000
Data Processing	0	39,218	0.0	(39,218)
Central Admin Svcs (Statewide Prorata)	0	0	0.0	0
Major Equipment	141,200	0	0.0	141,200
Other Items of Expense	28,000	0	0.0	28,000
Vehicle Operations	216,000	275,105	0.0	(59,105)
Attorney General Services	0	0	0.0	0
Office of Administrative Hearings	0	0	0.0	0
Evidence/Witness	0	10,984	0.0	(10,984)
Court Reporter Services	0	201,482	0.0	(201,482)
Minor Equipment	59,200	30,678	0.0	28,522
Special Items of Expense	0	5,000	0.0	(5,000)
TOTALS, OE&E	0	0	0.0	0
	2,755,439	2,766,378	100.4	(10,939)
TOTALS, EXPENDITURES	16,320,487	15,014,644	92.0	1,305,844
Scheduled Reimbursements				0
Distributed Costs				0
NET TOTAL, EXPENDITURES				
Unscheduled Reimbursements*	16,320,487	15,014,644	92.0	1,305,844
		0		
		15,014,644		

** no authority to spend*

Medical Board of California
Fiscal Year 2014-15
Budget Expenditure Report - Probation
(As of May 31, 2015)
(92% of fiscal year completed)

OBJECT DESCRIPTION	BUDGET ALLOTMENT	EXPENDITURES / ENCUMBRANCES	PERCENT OF BUDGET EXPEND / ENCUMB	UNENCUMBERED BALANCE
PERSONAL SERVICES				
Salary & Wages				
(Staff & Exec Director)	1,151,871	969,393	84.2	182,478
Board Members	0	0	0.0	0
Temp Help	26,000	0	0.0	26,000
Overtime	3,517	0	0.0	3,517
Staff Benefits	380,377	518,462	136.3	(138,085)
BL 12-03 Blanket	0	12,876		0
TOTALS, PERS SERVICES	1,561,765	1,500,731	96.1	73,910
OPERATING EXP & EQUIP				
General Expense	4,500	7,060	156.9	(2,560)
Fingerprint Reports	0	0	0.0	0
Printing	8,000	6,232	77.9	1,768
Communications	26,000	16,000	61.5	10,000
Postage	400	1,325	331.2	(925)
Insurance	1,803	2,695	149.5	(892)
Travel In-State	19,003	14,969	78.8	4,034
Travel Out-of-State	0	0	0.0	0
Training	5,000	2,357	47.1	2,643
Facilities Operation (Rent)	55,000	122,952	223.5	(67,952)
Consult/Prof Services	0	2,500	0.0	(2,500)
Departmental Prorata	169,967	175,820	103.4	(5,853)
HQIU	0	0	0.0	0
Consolidated Data Center	0	0	0.0	0
Data Processing	500	2,538	507.6	(2,038)
Central Admin Svcs (Statewide Prorata)	116,146	116,146	100.0	0
Major Equipment	0	0	0.0	0
Other Items of Expense	0	0	0.0	0
Vehicle Operations	31,925	23,011	72.1	8,914
Attorney General Services	0	0	0.0	0
Office of Administrative Hearings	0	0	0.0	0
Evidence/Witness	65,000	138,640	213.3	(73,640)
Court Reporter Services	0	0	0.0	0
Minor Equipment	0	10,130	0.0	(10,130)
Special Items of Expense	0	0	0.0	0
TOTALS, OE&E	503,244	642,374	127.6	(139,130)
TOTALS, EXPENDITURES	2,065,009	2,143,105	103.8	(78,096)
Scheduled Reimbursements				0
Distributed Costs				0
NET TOTAL, EXPENDITURES	2,065,009	2,143,105	103.8	(78,096)
Unscheduled Reimbursements*		(1,463,579)		
		679,526		

** no authority to spend*

G:\Executive Office\Executive Unit\2015 Board Meetings\July 30-31, 2015\Exec. Comm\[EXEC 4 att 6.xlsx]HQIU

Medical Board of California
Fiscal Year 2014-15
Budget Expenditure Report - Executive
(As of May 31, 2015)
(92% of fiscal year completed)

OBJECT DESCRIPTION	BUDGET ALLOTMENT	EXPENDITURES / ENCUMBRANCES	PERCENT OF BUDGET EXPEND / ENCUMB	UNENCUMBERED BALANCE
PERSONAL SERVICES				
Salary & Wages				
(Staff & Exec Director)	825,883	547,059	66.2	278,824
Board Members	31,500	76,356	242.4	(44,856)
Temp Help	172,888	0	0.0	172,888
Overtime	2,460	3,006	122.2	(546)
Staff Benefits	273,332	288,821	105.7	(15,489)
BL 12-03 Blanket	0	2		0
TOTALS, PERS SERVICES	1,306,063	915,244	70.1	390,821
OPERATING EXP & EQUIP				
General Expense	15,340	57,133	372.4	(41,793)
Fingerprint Reports	0	0		0
Printing	35,000	15,464	44.2	19,536
Communications	20,000	15,744	78.7	4,256
Postage	10,000	354	3.5	9,646
Insurance	0	2,310	0.0	(2,310)
Travel In-State	55,000	38,088	69.3	16,912
Travel Out-of-State	0	964	0.0	(964)
Training	4,000	2,320	58.0	1,680
Facilities Operation (Rent)	100,000	134,417	134.4	(34,417)
Consult/Prof Services	82,721	8,293	10.0	74,428
Departmental Prorata	184,182	184,182	100.0	0
HQIU	0	0	0.0	0
Consolidated Data Center	0	0	0.0	0
Data Processing	1,000	2,951	295.1	(1,951)
Central Admin Svcs (Statewide Prorata)	95,712	95,712	100.0	0
Major Equipment	0	0	0.0	0
Other Items of Expense	0	0	0.0	0
Vehicle Operations	0	0	0.0	0
Attorney General Services	0	0	0.0	0
Office of Administrative Hearings	0	0	0.0	0
Evidence/Witness	0	0	0.0	0
Court Reporter Services	0	0	0.0	0
Minor Equipment	0	435	0.0	(435)
Special Items of Expense	0	0	0.0	0
TOTALS, OE&E	602,955	558,366	92.6	44,589
TOTALS, EXPENDITURES	1,909,018	1,473,609	77.2	435,409
Scheduled Reimbursements				0
Distributed Costs				0
NET TOTAL, EXPENDITURES	1,909,018	1,473,609	77.2	435,409
Unscheduled Reimbursements*		(8,000)		
		1,465,609		

** no authority to spend*

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Medical Board of California
Fiscal Year 2014-15
Budget Expenditure Report - Information Systems
(As of May 31, 2015)
(92% of fiscal year completed)

OBJECT DESCRIPTION	BUDGET ALLOTMENT	EXPENDITURES / ENCUMBRANCES	PERCENT OF BUDGET EXPEND / ENCUMB	UNENCUMBERED BALANCE
PERSONAL SERVICES				
Salary & Wages				
(Staff & Exec Director)	1,304,218	1,157,648	88.8	146,570
Board Members	0	0	0.0	0
Temp Help	48,000	54,186	112.9	(6,186)
Overtime	3,704	2,093	56.5	1,611
Staff Benefits	404,516	525,071	129.8	(120,555)
BL 12-03 Blanket	0			0
TOTALS, PERS SERVICES	1,760,438	1,738,997	98.8	21,441
OPERATING EXP & EQUIP				
General Expense	7,000	6,667	95.2	333
Fingerprint Reports	0	0	0.0	0
Printing	6,600	1,354	20.5	5,246
Communications	11,000	10,360	94.2	641
Postage	500	16	3.2	484
Insurance	0	0	0.0	0
Travel In-State	14,006	4,566	32.6	9,440
Travel Out-of-State	0	0	0.0	0
Training	7,894	150	1.9	7,744
Facilities Operation (Rent)	80,000	74,024	92.5	5,976
Consult/Prof Services	5,000	10,130	202.6	(5,130)
Departmental Prorata	281,524	281,524	100.0	0
HQIU	0	0	0.0	0
Consolidated Data Center	650,230	120,838	18.6	529,392
Data Processing	95,000	255,677	269.1	(160,677)
Central Admin Svcs (Statewide Prorata)	151,879	151,879	100.0	0
Major Equipment	57,180	48,893	85.5	8,287
Other Items of Expense	0	0	0.0	0
Vehicle Operations	0	0	0.0	0
Attorney General Services	0	0	0.0	0
Office of Administrative Hearings	0	0	0.0	0
Evidence/Witness	0	0	0.0	0
Court Reporter Services	0	0	0.0	0
Minor Equipment	28,950	70,462	243.4	(41,512)
Special Items of Expense	0			0
TOTALS, OE&E	1,396,764	1,036,539	74.2	360,224
TOTALS, EXPENDITURES	3,157,202	2,775,536	87.9	381,666
Scheduled Reimbursements				0
Distributed Costs	(2,279)	(4,428)	194.3	2,149
NET TOTAL, EXPENDITURES	3,154,923	2,771,108	87.8	383,815
Unscheduled Reimbursements*				
		2,771,108		

** no authority to spend*

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Medical Board of California
Fiscal Year 2014-15
Budget Expenditure Report - Administration
(As of May 31, 2015)
(92% of fiscal year completed)

OBJECT DESCRIPTION	BUDGET ALLOTMENT	EXPENDITURES / ENCUMBRANCES	PERCENT OF BUDGET EXPEND / ENCUMB	UNENCUMBERED BALANCE
PERSONAL SERVICES				
Salary & Wages				
(Staff & Exec Director)	843,302	629,496	74.6	213,806
Board Members	0	0	0.0	0
Temp Help	95,000	1,292	1.4	93,708
Overtime	2,373	2,820	118.8	(447)
Staff Benefits	261,740	318,565	121.7	(56,825)
BL 12-03 Blanket	0			0
TOTALS, PERS SERVICES	1,202,415	952,173	79.2	250,242
OPERATING EXP & EQUIP				
General Expense	15,349	75,202	489.9	(59,853)
Fingerprint Reports	0	30	0.0	(30)
Printing	10,000	1,581	15.8	8,419
Communications	9,680	8,261	85.3	1,419
Postage	500	313	62.5	187
Insurance	250	385	154.0	(135)
Travel In-State	15,000	4,056	27.0	10,944
Travel Out-of-State	0	0	0.0	0
Training	2,000	0	0.0	2,000
Facilities Operation (Rent)	100,000	102,724	102.7	(2,724)
Consult/Prof Services	0	181	0.0	(181)
Departmental Prorata	148,348	148,348	100.0	0
HQIU	0	0	0.0	0
Consolidated Data Center	0	0	0.0	0
Data Processing	500	3,817	763.5	(3,317)
Central Admin Svcs (Statewide Prorata)	75,080	75,080	100.0	0
Major Equipment	0	0	0.0	0
Other Items of Expense	0	1,489	0.0	(1,489)
Vehicle Operations	0	0	0.0	0
Attorney General Services	0	0	0.0	0
Office of Administrative Hearings	0	0	0.0	0
Evidence/Witness	0	0	0.0	0
Court Reporter Services	0	0	0.0	0
Minor Equipment	0	1,155	0.0	(1,155)
Special Items of Expense	0	0		0
TOTALS, OE&E	376,707	422,622	112.2	(45,915)
TOTALS, EXPENDITURES	1,579,122	1,374,794	87.1	204,328
Scheduled Reimbursements			0.0	0
Distributed Costs	(2,536)	(1,305)	51.5	(1,231)
NET TOTAL, EXPENDITURES	1,576,586	1,373,489	87.1	203,097
Unscheduled Reimbursements*				
		1,373,489		

** no authority to spend*

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MEDICAL BOARD OF CALIFORNIA BUDGET OVERVIEW BY BOARD COMPONENT

	EXEC	ENFORCE	OPERATION SAFE MEDICINE	LICENSING	ADMIN SERVICES	INFO SYSTEMS	PROBATION MONITORING	BOARD TOTAL
FY 11/12								
$ Budgeted	1,885,220	40,510,088		5,336,015	1,585,554	3,069,028	2,013,445	54,399,350
$ Spent *	1,775,576	33,754,208		4,745,127	1,543,636	2,810,667	503,487	45,132,701 *
Positions Authorized	8.8	164.1		53.3	15.0	17.0	25.0	283.2
FY 12/13								
$ Budgeted	2,132,008	39,300,606	525,515	6,399,247	1,570,587	3,754,162	2,239,391	55,921,516
$ Spent *	1,762,058	37,058,493	672,700	5,770,689	1,671,010	3,001,574	720,484	50,657,008 *
Positions Authorized	8.8	147.0	6.0	53.3	14.0	17.0	25.0	271.1
FY 13/14								
$ Budgeted	2,304,466	40,127,776	716,147	8,386,914	1,833,855	3,363,720	2,281,227	59,014,105
$ Spent*	1,427,599	40,148,898	879,418	6,023,718	1,650,434	3,166,541	1,424,973	54,721,581 *
Positions Authorized	8.8	147.0	6.0	53.3	14.0	17.0	25.0	271.1
FY 14/15								
$ Budgeted **	1,909,018	45,230,270		6,502,878	1,576,586	3,154,922	2,065,009	60,438,683
$ Spent thru 05/31*	1,473,609	39,932,823		6,014,571	1,373,489	2,771,108	2,143,105	53,708,705 *
Positions Authorized	8.0	44.0		53.1	14.0	17.0	24.0	160.1

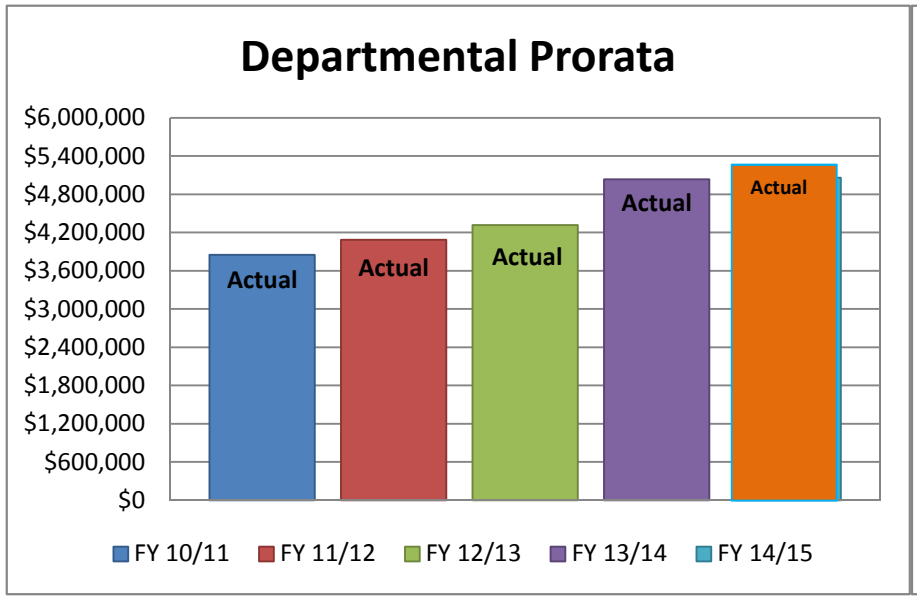
** net expenditures (includes unscheduled reimbursements)*

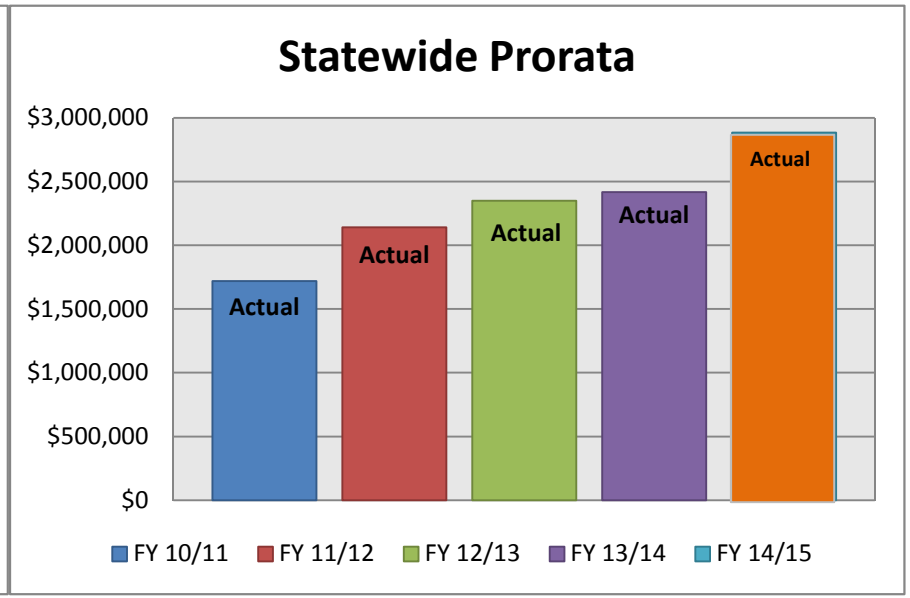
*** Budgeted does not include pending current year budget adjustments.*

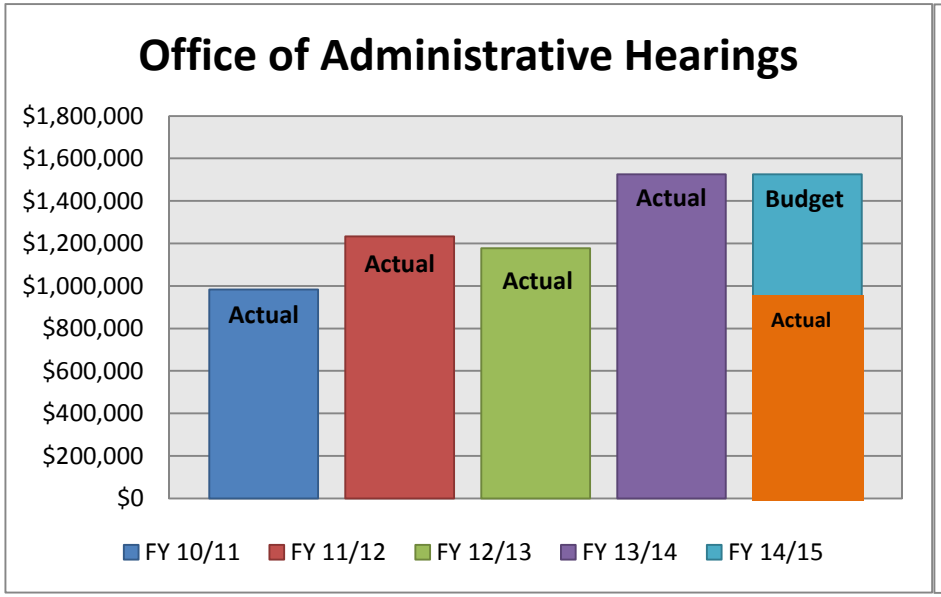
6/26/2015

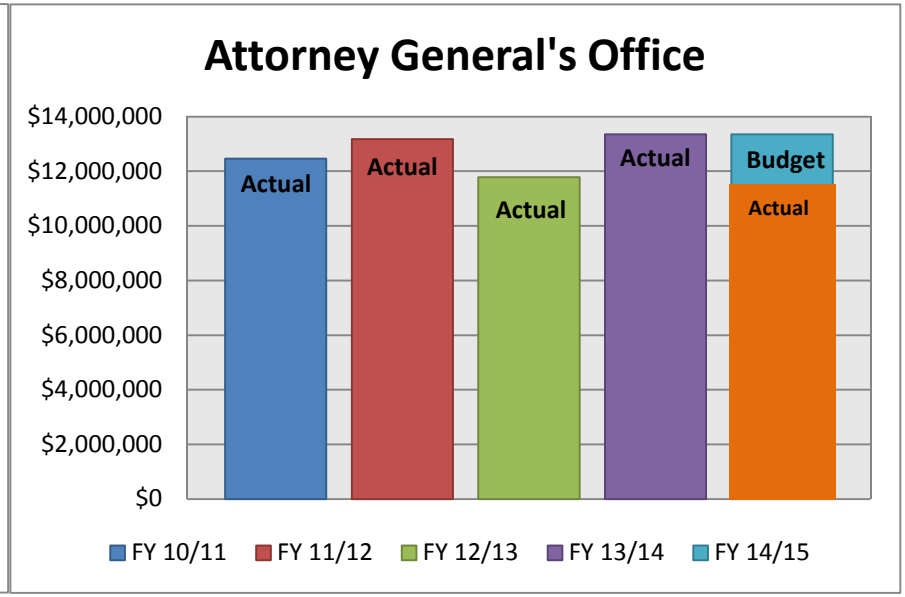
Budget Overview by Program.xls

External Agencies' Spending









FY 14/15 actual expenditures through 5/31/15

Board Members' Expenditures - Per Diem/Travel
July 1, 2014 - June 30, 2015

NAMES	JULY	AUG	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APRIL	MAY	JUNE	YTD
DR BHOLAT - Per diem	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Travel	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	**$ -**
DR. BISHOP - Per diem	$ 600.00	$ 200.00	$ 600.00	$ 700.00	$ 300.00	$ 600.00	$ 600.00	$ 600.00	$ 300.00	$ 800.00	$ 900.00	$ -	$ 6,200.00
Travel	$ 875.32	$ -	$ 511.52	$ 75.60	$ -	$ 671.39	$ 809.30	$ -	$ -	$ 543.44	$ 522.79	$ -	$ 4,009.36
	$ 1,475.32	$ 200.00	$ 1,111.52	$ 775.60	$ 300.00	$ 1,271.39	$ 1,409.30	$ 600.00	$ 300.00	$ 1,343.44	$ 1,422.79	$ -	**$ 10,209.36**
DR GNANADEV - Per diem	$ 1,400.00	$ 1,000.00	$ 1,100.00	$ 900.00	$ 400.00	$ 700.00	$ 1,000.00	$ -	$ -	$ -	$ -	$ -	$ 6,500.00
Travel	$ 823.38	$ -	$ 115.96	$ 683.22	$ -	$ -	$ 817.20	$ -	$ -	$ -	$ -	$ -	$ 2,439.76
	$ 2,223.38	$ 1,000.00	$ 1,215.96	$ 1,583.22	$ 400.00	$ 700.00	$ 1,817.20	$ -	$ -	$ -	$ -	$ -	**$ 8,939.76**
DR HAWKINS - Per diem	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Travel	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	**$ -**
DR. KRAUSS - Per diem	$ 1,400.00	$ -	$ -	$ 1,400.00	$ -	$ -	$ -	$ -	$ -	$ -	$ 1,300.00	$ -	$ 4,100.00
Travel	$ -	$ -	$ -	$ 691.22	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ 691.22
	$ 1,400.00	$ -	$ -	$ 2,091.22	$ -	$ -	$ -	$ -	$ -	$ -	$ 1,300.00	$ -	**$ 4,791.22**
DR. LEVINE - Per diem	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Travel	$ -	$ -	$ -	$ 750.51	$ -	$ -	$ 442.00	$ -	$ -	$ -	$ 245.39	$ -	$ 1,437.90
	$ -	$ -	$ -	$ 750.51	$ -	$ -	$ 442.00	$ -	$ -	$ -	$ 245.39	$ -	**$ 1,437.90**
DR. LEWIS - Per diem	$ 1,500.00	$ 900.00	$ 1,000.00	$ 1,500.00	$ 900.00	$ 900.00	$ 1,300.00	$ 1,200.00	$ 1,000.00	$ 700.00	$ 1,100.00	$ -	$ 12,000.00
Travel	$ 615.60	$ -	$ -	$ 1,550.71	$ 530.33	$ 756.80	$ 968.22	$ 900.61	$ -	$ -	$ 563.70	$ -	$ 5,885.97
	$ 2,115.60	$ 900.00	$ 1,000.00	$ 3,050.71	$ 1,430.33	$ 1,656.80	$ 2,268.22	$ 2,100.61	$ 1,000.00	$ 700.00	$ 1,663.70	$ -	**$ 17,885.97**
MR. LUI - Per diem	$ -	$ -	$ -	$ 300.00	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ 300.00
Travel	$ -	$ -	$ -	$ 414.51	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ 414.51
	$ -	$ -	$ -	$ 714.51	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	**$ 714.51**
MS. PINES - Per diem	$ 1,300.00	$ 1,100.00	$ 1,100.00	$ 1,200.00	$ 1,000.00	$ 1,000.00	$ 1,500.00	$ 1,200.00	$ 1,100.00	$ 1,500.00	$ 1,000.00	$ -	$ 13,000.00
Travel	$ 677.46	$ -	$ -	$ -	$ -	$ -	$ 783.75	$ 656.95	$ -	$ -	$ 70.00	$ -	$ 2,188.16
	$ 1,977.46	$ 1,100.00	$ 1,100.00	$ 1,200.00	$ 1,000.00	$ 1,000.00	$ 2,283.75	$ 1,856.95	$ 1,100.00	$ 1,500.00	$ 1,070.00	$ -	**$ 15,188.16**
MS.SCHIPSKE - Per diem	$ 1,600.00	$ 1,100.00	$ 1,200.00	$ 1,100.00	$ 800.00	$ 1,000.00	$ 800.00	$ 300.00	$ 1,100.00	$ 1,100.00	$ 1,100.00	$ -	$ 11,200.00
Travel	$ -	$ -	$ -	$ 166.36	$ -	$ -	$ -	$ -	$ -	$ -	$ 129.40	$ -	$ 295.76
	$ 1,600.00	$ 1,100.00	$ 1,200.00	$ 1,266.36	$ 800.00	$ 1,000.00	$ 800.00	$ 300.00	$ 1,100.00	$ 1,100.00	$ 1,229.40	$ -	**$ 11,495.76**
MR. SERRANO SWELL- Per diem	$ 700.00	$ 700.00	$ 700.00	$ 800.00	$ 600.00	$ 500.00	$ 500.00	$ 700.00	$ 700.00	$ 700.00	$ 700.00	$ -	$ 7,300.00
	$ 413.72	$ -	$ -	$ 639.41	$ -	$ -	$ 254.80	$ -	$ -	$ -	$ 580.37	$ -	$ 1,888.30
	$ 1,113.72	$ 700.00	$ 700.00	$ 1,439.41	$ 600.00	$ 500.00	$ 754.80	$ 700.00	$ 700.00	$ 700.00	$ 1,280.37	$ -	**$ 9,188.30**
MS.WRIGHT - Per diem	$ 1,600.00	$ 1,400.00	$ 1,600.00	$ 1,600.00	$ 900.00	$ 1,400.00	$ 1,400.00	$ 1,100.00	$ 1,000.00	$ 1,100.00	$ 1,100.00	$ -	$ 14,200.00
Travel	$ 210.03	$ -	$ -	$ 669.34	$ -	$ -	$ 705.24	$ -	$ -	$ -	$ 65.00	$ -	$ 1,649.61
	$ 1,810.03	$ 1,400.00	$ 1,600.00	$ 2,269.34	$ 900.00	$ 1,400.00	$ 2,105.24	$ 1,100.00	$ 1,000.00	$ 1,100.00	$ 1,165.00	$ -	**$ 15,849.61**
MS. YAROSLAVSKY - Per diem	$ 1,000.00	$ 700.00	$ 1,200.00	$ 1,400.00	$ 700.00	$ 800.00	$ 1,400.00	$ 1,200.00	$ 900.00	$ 1,700.00	$ -	$ -	$ 11,000.00
Travel	$ 799.36	$ 1,116.37	$ 462.44	$ 678.26	$ -	$ -	$ 756.17	$ 1,921.63	$ -	$ -	$ 375.45	$ -	$ 6,109.68
	$ 1,799.36	$ 1,816.37	$ 1,662.44	$ 2,078.26	$ 700.00	$ 800.00	$ 2,156.17	$ 3,121.63	$ 900.00	$ 1,700.00	$ 375.45	$ -	**$ 17,109.68**
DR. YIP - Per diem	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
Travel	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -
	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	$ -	**$ -**

As of: 6/19/15

TOTAL PER DIEM	$ 85,800.00
TOTAL PER DIEM BUDGETED	$ 31,500.00
TOTAL TRAVEL	$ 27,010.23
TOTAL	**$ 112,810.23**

MEDICAL BOARD OF CALIFORNIA
Song Brown Family Physician Training Program-Voluntary Fee
MONTHLY PROFILE: JULY 2010 - JUNE 2015

	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11	Apr-11	May-11	Jun-11
Fund Transferred to OSHPD	6,822	0	6,491	5,622	7,825	6,905	7,343	6,200	7,187	5,323	3,166	1,247
FYTD TOTAL	6,822	6,822	13,313	18,935	26,760	33,665	41,008	47,208	54,395	59,718	62,884	64,131

	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	May-12	Jun-12
Fund Transferred to OSHPD	7,275	8,405	7,527	6,867	5,897	6,550	8,689	7,622	7,527	4,603	3,398	1,575
FYTD TOTAL	7,275	15,680	23,207	30,074	35,971	42,521	51,210	58,832	66,359	70,962	74,360	75,935

	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13
Fund Transferred to OSHPD	6,876	8,876	8,027	7,925	7,017	6,176	7,788	7,626	8,366	5,597	3,000	1,075
FYTD TOTAL	6,876	15,752	23,779	31,704	38,721	44,896	52,684	60,310	68,675	74,272	77,272	78,347

	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14	May-14	Jun-14
Fund Transferred to OSHPD	7,575	8,541	8,575	4,377	14,890	16,537	18,111	13,880	16,355	10,747	8,505	8,834
FYTD TOTAL	7,575	16,116	24,691	29,068	43,958	60,495	78,606	92,486	108,841	119,588	128,093	136,927

	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15
Fund Transferred to OSHPD	14,780	14,473	15,555	15,900	13,207	14,394	16,036	15,124	20,145	12,832	13,153	0
FYTD TOTAL	14,780	29,253	44,808	60,708	73,915	88,309	104,345	119,469	139,614	152,446	165,599	165,599

revised 7/13/15

MEDICAL BOARD OF CALIFORNIA
Steven M. Thompson Loan repayment Program-Mandatory $25 Fee
MONTHLY PROFILE: JULY 2010 - JUNE 2015

	Jul-10	Aug-10	Sep-10	Oct-10	Nov-10	Dec-10	Jan-11	Feb-11	Mar-11	Apr-11	May-11	Jun-11
Fund Transferred to HPEF	151,050	137,645	137,612	122,522	146,450	146,750	140,939	128,875	142,507	86,377	57,740	28,456
FYTD TOTAL	151,050	288,695	426,307	548,829	695,279	842,029	982,968	1,111,843	1,254,350	1,340,727	1,398,467	1,426,923

	Jul-11	Aug-11	Sep-11	Oct-11	Nov-11	Dec-11	Jan-12	Feb-12	Mar-12	Apr-12	May-12	Jun-12
Fund Transferred to HPEF	121,725	154,255	153,175	127,595	124,125	136,400	177,500	146,828	149,700	91,300	64,175	320,167
FYTD TOTAL	121,725	275,980	429,155	556,750	680,875	817,275	994,775	1,141,603	1,291,303	1,382,603	1,446,778	1,766,945

	Jul-12	Aug-12	Sep-12	Oct-12	Nov-12	Dec-12	Jan-13	Feb-13	Mar-13	Apr-13	May-13	Jun-13
Fund Transferred to HPEF	131,775	155,948	140,826	156,275	132,548	131,200	143,941	141,224	138,595	103,703	54,075	27,392
FYTD TOTAL	131,775	287,723	428,549	584,823	717,371	848,571	992,511	1,133,735	1,272,330	1,376,033	1,430,108	1,457,499

	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14	May-14	Jun-14
Fund Transferred to HPEF	143,563	175,398	154,168	87,780	134,782	150,000	183,612	135,632	152,693	104,324	75,224	100,833
FYTD TOTAL	143,563	318,961	473,129	560,909	695,691	845,691	1,029,303	1,164,935	1,317,628	1,421,952	1,497,176	1,598,009

	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14	Jan-15	Feb-15	Mar-15	Apr-15	May-15	Jun-15
Fund Transferred to HPEF	142,130	137,184	152,900	156,863	136,882	145,117	157,636	141,128	185,309	121,008	144,433	0
FYTD TOTAL	142,130	279,314	432,214	589,077	725,959	871,076	1,028,712	1,169,840	1,355,149	1,476,157	1,620,590	1,620,590

revised 7/13/15

MEDICAL BOARD STAFF REPORT

DATE REPORT ISSUED: July 15, 2015
ATTENTION: Members, Executive Committee
SUBJECT: Consumer Satisfaction Survey Results
STAFF CONTACT: Letitia Robinson, Research Specialist

REQUESTED ACTION:
Review the Board's consumer satisfaction survey results to determine how the Medical Board of California (Board) is meeting the needs of consumers. This report is intended to provide the Members with an update and no action is needed at this time.

BACKGROUND:
As part of the Board's Strategic Plan, consumer surveys are being conducted. These surveys are a valuable tool for evaluating and enhancing the Board's organizational effectiveness and systems to improve services. There are three types of surveys currently being conducted by the Board:

- Applicant Survey
- Newsletter Survey
- Website Users Survey

The Board is using SurveyMonkey, a web-based system, to conduct these surveys. The applicant survey was started in August 2012. Information on the initial results were included in the 2012 Sunset Report and the 2013 Supplemental Sunset Report. The Newsletter survey was launched in the Fall 2012 Newsletter. In March 2013, the Board began the website user survey. Fiscal Years (FY) 12-13, 13-14, and 14-15 survey results are being provided.

DISCUSSION:
Applicant Survey
Initially, the applicant survey link was included in a letter sent to newly licensed physicians. Board staff sent these letters by email and regular mail. Unfortunately when the State eliminated the Board's student assistant positions, the Board was unable to continue sending these letters. Due to these staffing constraints, there were no surveys results from the third quarter of FY 2013-2014 to the second quarter of FY 2014-2015.

Shortly after initiating the survey in 2012, the Board decreased the number of questions from 17 to 5. This was done in an effort to increase the response rate and only include the most effective questions to measure applicants' satisfaction with the licensure process.

Beginning February 2015, the Board began sending email blasts to newly licensed physicians. Through the BreEZe system, email addresses are extracted twice monthly and an email with the survey link is sent.

The outcome of the "Applicant Satisfaction Survey - Quarterly Results" (**Attachment 1**) indicated as follows:

- In 2013, the Board revised the Physician's and Surgeon's Application. In addition, the online tutorials and clearer instructions were added to the website. These changes have contributed to the positive survey results. Of the applicants surveyed, 86% to 96% indicated the application instructions clearly state how to complete the application. And 80% to 94% stated the Board's website information was helpful.

- Many applicants using the BreEZe system were satisfied with the information it provided. On average, 68% reported they were either very satisfied or somewhat satisfied.

- On average, 70% of applicants reported there were satisfied with the service staff provided and with the application process.

Newsletter Survey
The Newsletter survey link is included in each edition of the Board's Newsletter. The Newsletter is produced four times per year and is sent electronically via email blast to all licensees and other interested parties. In addition, the Winter Newsletter is sent out annually via regular mail to all licensees who do not have an email account. This also includes the Newsletter survey link information. This will allow the readers to complete the survey.

This survey has produced a very low response rate. This can be attributed to the fact that the Newsletters are only being distributed four times per year. Over the three fiscal years, the Board only received 142 responses. In early additions of the Newsletter, the survey link was near the end of the Newsletter. In an effort to increase the response rate, the survey link is currently being advertised on Page 3 with the President's Message.

The survey consists of 16 questions. Most questions were intended for the readers to rate the usefulness of each section of the Newsletter. Out of the 16 questions, 4 rate the overall usefulness or satisfaction of the Newsletter.

The outcome of the "Newsletter Satisfaction Survey - Quarterly Results" (**Attachment 2**) indicated as follows:

- The majority of the readers reported being satisfied with the content of the Newsletter. On average 75% of the readers reported the contents as excellent, very good, or good in FY 14-15.

- The usefulness of the annual report question received very high ratings. Of the 11 quarters reported, 4 quarters received ratings of 100% for very useful, informative, or somewhat informative.

- On average 69% of the readers preferred to receive the Newsletter via email, 28% preferred hard copy via regular mail, and 3% preferred Social Media delivery.

- The majority of the Board's Newsletter audience is Physician/Surgeon. On average the Physician/Surgeon response rate was 80% in FY 12-13, 92% in FY 13-14, and 75% in FY 14-15.

Website Users Survey
The website users survey link is on the Board's website. Originally, the survey consisted of 17 questions. There were 277 responses in FY 13-14 and 113 responses in FY 14-15. The decline in the responses may be contributed to the changes in the Board's website layout in January 2014. In an effort to increase the declining response rate, the survey was decreased to 5 questions beginning in FY 14-15.

Of these 5 questions, 1 is intended to obtain readers feedback on topics or suggestions for improvement and is not included in the survey results. The remaining 4 questions are intended to obtain readers overall satisfaction while navigating the Board's website, as well as, identifying the type of individuals who visit the Board's website.

The outcome of the "Website Satisfaction Survey - Quarterly Results" (**Attachment 3**) indicated as follows:

- In FY 13-14, website users consisted of about 57% current licensees, 15% consumer/patients, and 17% categorized as other. In FY 14-15, website users consisted of about 33% current licensees, 30% consumer/patients, and 20% categorized as other.

- The majority of our website users were seeking information on license renewal, verifying a license, and filing a complaint. Ratings for filing a complaint increased in FY 14-15 by 14% compared to FY 13-14. This may be contributed to the BreEZe system enhancement that allows a consumer/patient to file a complaint electronically.

- Unfortunately, with the implementation of the new BreEZe system in the second quarter of FY 13-14 most website users reported they were unable to find the information they were seeking and reported dissatisfaction with the Board's website. Some commented that the Board's website was confusing and cumbersome, others stated the renewal processing and verifying a license was not user-friendly. Prior to the BreEZe system, on average 85% of the website users reported they were able to find the information they were seeking.

Attachment 1
Applicant Satisfaction Survey - Quarterly Results

1. Did the application instructions clearly state how to complete the application?

Answer Options	FY 2012 - 2013				FY 2013 - 2014				FY 2014 - 2015			
	Q1 - 61	Q2 - 167	Q3 - 142	Q4 - 173	Q1 - 180	Q2 - 25	Q3 - 0	Q4 - 0	Q1 - 0	Q2 - 0	Q3 - 125	Q4 - 258
	%	%	%	%	%	%	%	%	%	%	%	%
Yes	88%	93%	94%	94%	89%	96%	n/a	n/a	n/a	n/a	86%	88%
No	12%	7%	6%	6%	11%	4%	n/a	n/a	n/a	n/a	14%	12%

2. If you visited the Medical Board's website for assistance, was the information helpful?

Answer Options	FY 2012 - 2013				FY 2013 - 2014				FY 2014 - 2015			
	Q1 - 61	Q2 - 167	Q3 - 142	Q4 - 173	Q1 - 180	Q2 - 25	Q3 - 0	Q4 - 0	Q1 - 0	Q2 - 0	Q3 - 125	Q4 - 258
	%	%	%	%	%	%	%	%	%	%	%	%
Yes	87%	90%	94%	90%	87%	92%	n/a	n/a	n/a	n/a	80%	81%
No	13%	10%	6%	10%	13%	8%	n/a	n/a	n/a	n/a	20%	19%

3. If you used the BreEZe online system, how satisfied were you with the information it provided?

Answer Options	FY 2012 - 2013				FY 2013 - 2014				FY 2014 - 2015			
	Q1 - 61	Q2 - 167	Q3 - 142	Q4 - 173	Q1 - 180	Q2 - 25	Q3 - 0	Q4 - 0	Q1 - 0	Q2 - 0	Q3 - 125	Q4 - 258
	%	%	%	%	%	%	%	%	%	%	%	%
Very satisfied	33%	31%	37%	41%	35%	44%	n/a	n/a	n/a	n/a	25%	28%
Somewhat satisfied	34%	36%	37%	35%	32%	24%	n/a	n/a	n/a	n/a	36%	36%
Somewhat dissatisfied	16%	8%	6%	12%	9%	4%	n/a	n/a	n/a	n/a	10%	11%
Very dissatisfied	5%	7%	6%	2%	7%	8%	n/a	n/a	n/a	n/a	10%	7%
Not Applicable, I did not use the Web Applicant Access System.	12%	18%	13%	11%	17%	20%	n/a	n/a	n/a	n/a	19%	18%

Attachment 1
Applicant Satisfaction Survey - Quarterly Results

4. How satisfied were you with the courteousness, helpfulness, and responsiveness of the staff person who processed your application?

Answer Options	FY 2012 - 2013				FY 2013 - 2014				FY 2014 - 2015			
	Q1 - 61	Q2 - 167	Q3 - 142	Q4 - 173	Q1 - 180	Q2 - 25	Q3 - 0	Q4 - 0	Q1 - 0	Q2 - 0	Q3 - 125	Q4 - 258
	%	%	%	%	%	%	%	%	%	%	%	%
Very satisfied	53%	60%	53%	56%	50%	52%	n/a	n/a	n/a	n/a	44%	41%
Somewhat satisfied	12%	16%	20%	19%	22%	16%	n/a	n/a	n/a	n/a	22%	22%
Somewhat dissatisfied	12%	5%	5%	7%	4%	0%	n/a	n/a	n/a	n/a	14%	14%
Very dissatisfied	10%	5%	6%	6%	7%	12%	n/a	n/a	n/a	n/a	12%	16%
Not applicable; I did not have any communication with the staff person who processed my application.	14%	13%	16%	12%	17%	20%	n/a	n/a	n/a	n/a	8%	7%

5. How satisfied were you with the application process?

Answer Options	FY 2012 - 2013				FY 2013 - 2014				FY 2014 - 2015			
	Q1 - 61	Q2 - 167	Q3 - 142	Q4 - 173	Q1 - 180	Q2 - 25	Q3 - 0	Q4 - 0	Q1 - 0	Q2 - 0	Q3 - 125	Q4 - 258
	%	%	%	%	%	%	%	%	%	%	%	%
Very satisfied	44%	49%	50%	42%	44%	44%	n/a	n/a	n/a	n/a	30%	31%
Somewhat satisfied	23%	26%	24%	31%	26%	44%	n/a	n/a	n/a	n/a	33%	29%
Somewhat dissatisfied	15%	11%	13%	17%	19%	4%	n/a	n/a	n/a	n/a	19%	21%
Very dissatisfied	18%	14%	14%	9%	11%	8%	n/a	n/a	n/a	n/a	18%	19%

Attachment 2
Newsletter Satisfaction Survey - Quarterly Results

1. My overall satisfaction about the content of the Medical Board's Newsletter is:

Answer Options	FY 2012 - 2013				FY 2013 - 2014				FY 2014 - 2015			
	Q1 - 0	Q2 - 9	Q3 - 14	Q4 - 14	Q1 - 38	Q2 - 9	Q3 - 4	Q4 - 8	Q1 - 25	Q2 - 8	Q3 - 7	Q4 - 6
	%	%	%	%	%	%	%	%	%	%	%	%
Excellent	n/a	33%	0%	43%	21%	11%	0%	25%	16%	25%	14%	33%
Very Good	n/a	45%	29%	21%	18%	33%	50%	38%	24%	38%	29%	17%
Good	n/a	11%	29%	36%	34%	22%	25%	13%	28%	13%	29%	33%
Average	n/a	0%	36%	0%	16%	34%	0%	13%	20%	13%	14%	0%
Disappointed	n/a	11%	6%	0%	11%	0%	25%	11%	12%	11%	14%	17%

2. Please rate the usefulness of the Annual Report (fall issue):

Answer Options	FY 2012 - 2013				FY 2013 - 2014				FY 2014 - 2015			
	Q1 - 0	Q2 - 9	Q3 - 14	Q4 -14	Q1 - 38	Q2 - 9	Q3 - 4	Q4 - 8	Q1 - 24	Q2 - 7	Q3 - 7	Q4 - 6
	%	%	%	%	%	%	%	%	%	%	%	%
Very Useful	n/a	22%	29%	36%	27%	22%	0%	13%	13%	14%	14%	17%
Informative	n/a	67%	43%	21%	34%	22%	75%	38%	42%	43%	57%	50%
Somewhat Informative	n/a	11%	21%	43%	34%	56%	0%	38%	33%	43%	15%	16%
Not Useful At All	n/a	0%	7%	0%	5%	0%	25%	11%	12%	0%	14%	17%

Attachment 2
Newsletter Satisfaction Survey - Quarterly Results

3. I prefer to receive the Newsletter:

Answer Options	FY 2012 - 2013				FY 2013 - 2014				FY 2014 - 2015			
	Q1 - 0	Q2 - 9	Q3 - 14	Q4 - 14	Q1 - 36	Q2 - 9	Q3 - 4	Q4 - 8	Q1 - 23	Q2 - 7	Q3 - 7	Q4 - 6
	%	%	%	%	%	%	%	%	%	%	%	%
Via Email	n/a	78%	79%	64%	61%	67%	100%	75%	66%	71%	29%	66%
Hard copy via Regular Mail	n/a	22%	21%	36%	28%	33%	0%	25%	30%	29%	71%	17%
Social Media (when it becomes available)	n/a	0%	0%	0%	11%	0%	0%	0%	4%	0%	0%	17%

4. My main interest in the Newsletter is as a:

Answer Options	FY 2012 - 2013				FY 2013 - 2014				FY 2014 - 2015			
	Q1 - 0	Q2 - 9	Q3 - 14	Q4 - 14	Q1 - 36	Q2 - 9	Q3 - 4	Q4 - 8	Q1 - 23	Q2 - 7	Q3 - 7	Q4 - 6
	%	%	%	%	%	%	%	%	%	%	%	%
Physician / Surgeon	n/a	67%	86%	86%	78%	100%	100%	88%	91%	71%	86%	50%
Associated Medical Professional	n/a	0%	0%	0%	11%	0%	0%	0%	0%	0%	14%	17%
Interested Reader	n/a	11%	7%	14%	8%	0%	0%	0%	9%	14%	0%	0%
Member of the Media	n/a	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Government Member	n/a	11%	0%	0%	3%	0%	0%	0%	0%	0%	0%	17%
Other	n/a	11%	7%	0%	0%	0%	0%	12%	0%	15%	0%	16%

Attachment 3
Website Satisfaction Survey - Quarterly Results

1. Which of the following best decribes you?

Answer Options	FY 2012 - 2013				FY 2013 - 2014				FY 2014 - 2015			
	Q1 - 0	Q2 - 0	Q3 - 0	Q4 - 71	Q1 - 110	Q2 - 76	Q3 - 48	Q4 - 43	Q1 - 35	Q2 - 27	Q3 - 24	Q4 - 27
	%	%	%	%	%	%	%	%	%	%	%	%
Consumer/Patient	n/a	n/a	n/a	1%	2%	16%	17%	23%	29%	15%	42%	33%
Applicant (applying for licensure)	n/a	n/a	n/a	3%	6%	8%	10%	2%	6%	11%	8%	11%
Current Licensee	n/a	n/a	n/a	82%	89%	40%	52%	47%	29%	33%	38%	33%
Educator	n/a	n/a	n/a	1%	0%	1%	2%	2%	9%	4%	0%	0%
Employer/Recruiter	n/a	n/a	n/a	3%	0%	5%	10%	0%	2%	7%	0%	8%
Media	n/a	n/a	n/a	0%	0%	0%	2%	0%	2%	0%	0%	0%
Other (please specify)	n/a	n/a	n/a	10%	4%	30%	6%	26%	23%	30%	12%	15%

2. During your most recent visit to the Board's website, which of the following best describes the information you were seeking? [1/]

Answer Options	FY 2012 - 2013				FY 2013 - 2014				FY 2014 - 2015			
	Q1 - 0	Q2 - 0	Q3 - 0	Q4 - 71	Q1 - 110	Q2 - 76	Q3 - 48	Q4 - 43	Q1 - 35	Q2 - 27	Q3 - 24	Q4 - 27
	%	%	%	%	%	%	%	%	%	%	%	%
License Renewal	n/a	n/a	n/a	82%	83%	26%	38%	28%	40%	30%	17%	22%
Application for Licensure	n/a	n/a	n/a	7%	4%	13%	15%	5%	0%	7%	4%	7%
Verifying a License	n/a	n/a	n/a	4%	6%	41%	29%	23%	23%	15%	29%	18%
Filing a Complaint	n/a	n/a	n/a	1%	4%	5%	6%	14%	20%	15%	29%	18%
Public Documents	n/a	n/a	n/a	6%	2%	15%	8%	7%	14%	4%	8%	0%
Name/Address Change	n/a	n/a	n/a	3%	4%	3%	6%	9%	9%	4%	8%	4%
Board Publications/Media	n/a	n/a	n/a	4%	3%	7%	2%	2%	3%	7%	0%	0%
Continuing Education	n/a	n/a	n/a	4%	1%	1%	2%	0%	3%	4%	4%	0%
Legislation/Regulation	n/a	n/a	n/a	1%	2%	3%	0%	5%	3%	0%	0%	0%
Other (please specify)	n/a	n/a	n/a	11%	11%	25%	19%	23%	37%	41%	42%	52%

[1/] Results exceeding 100% is attributed to raters having the option to choose multiple answers.

Attachment 3
Website Satisfaction Survey - Quarterly Results

3. Were you successful in finding the information you were seeking?

Answer Options	FY 2012 - 2013				FY 2013 - 2014				FY 2014 - 2015			
	Q1 - 0	Q2 - 0	Q3 - 0	Q4 - 71	Q1 - 110	Q2 - 76	Q3 - 48	Q4 - 43	Q1 - 35	Q2 - 27	Q3 - 24	Q4 - 27
	%	%	%	%	%	%	%	%	%	%	%	%
Yes	n/a	n/a	n/a	86%	84%	50%	31%	21%	14%	22%	21%	11%
No	n/a	n/a	n/a	14%	16%	50%	69%	79%	86%	78%	79%	89%

4. Overall, how satisfied are you with the Board's website?

Answer Options	FY 2012 - 2013				FY 2013 - 2014				FY 2014 - 2015			
	Q1 - 0	Q2 - 0	Q3 - 0	Q4 - 71	Q1 - 110	Q2 - 76	Q3 - 48	Q4 - 43	Q1 - 35	Q2 - 27	Q3 - 24	Q4 - 27
	%	%	%	%	%	%	%	%	%	%	%	%
Extremely satisfied	n/a	n/a	n/a	24%	26%	9%	2%	9%	9%	11%	0%	11%
Somewhat satisfied	n/a	n/a	n/a	45%	40%	30%	13%	14%	11%	15%	12%	4%
Neither satisfied nor dissatisfied	n/a	n/a	n/a	9%	16%	5%	10%	2%	17%	18%	17%	7%
Somewhat dissatisfied	n/a	n/a	n/a	14%	11%	16%	17%	19%	20%	15%	4%	26%
Extremely dissatisfied	n/a	n/a	n/a	9%	8%	40%	58%	56%	43%	41%	67%	52%

Medical Board of California

STRATEGIC PLAN 2014

July 2015 Update

Goal 1: Professional Qualifications: Promote the professional qualifications of medical practitioners by setting requirements for licensure and relicensure, including education, experience, and demonstrated competence.

1.1	Define what is necessary to demonstrate competency and promote safe re-entry into medical practice after extended absences, including looking at the current difference between the requirement for retraining for re-entry (5 years) and the disciplinary re-entry (18 months).	HIGH - 1	
Activities	**Date**	**Responsible Parties**	**Status**
a. Examine and identify other states' definitions and requirements for re-entry into practice.	Jan-2015	Licensing Outreach Manager	
b. Compare the elements with California's existing practices for re-entry and determine if there are differences.	Jan-2015	Licensing Outreach Manager	
c. Consult with experts in the field of professional skills and competency.	May-2015	Licensing Outreach Manager	
d. Draft a report based upon this research, then propose appropriate length of non-practice to Board for review and approval.	Oct-2015	Chief of Licensing; Licensing Outreach Manager	June 30, 2015 - Held Interested Parties Meeting on the issue of reentry to begin discussions. Need to schedule a second Interested Parties meeting in Southern California.
e. Make recommendations to the Business and Professions Committees and seek legislation.	Nov-2015	Chief of Legislation	

Green activity is complete. Yellow activity is in process or ongoing. Red activity has not been completed in the timeframe requested.

Goal 1: Professional Qualifications: Promote the professional qualifications of medical practitioners by setting requirements for licensure and relicensure, including education, experience, and demonstrated competence.

1.2	**Examine the Federation of State Medical Boards' (FSMB) Maintenance of Licensure (MOL) and the American Board of Medical Specialties' (ABMS) Maintenance of Certification (MOC) initiatives to determine if changes are needed to existing requirements in California (continuing medical education) in order to ensure maintenance of competency of California physicians.**	**HIGH - 2**	
Activities		**Date**	**Responsible Parties**	**Status**
a.	Review the FSMB MOL and the ABMS MOC documents and identify the various components.	Jan-2015	Licensing Outreach Manager	July 24, 2014 – ABMS provided a presentation to the Licensing Committee on MOC.
b.	Compare the elements with California's laws and regulations regarding continuing medical education and determine if there are differences.	Apr-2015	Licensing Outreach Manager	
c.	Staff will draft changes to laws and regulations as necessary.	May-2015	Licensing Outreach Manager	
d.	Hold an interested parties meeting to discuss the proposed changes.	Jun-2015	Chief of Licensing	
e.	Present the final changes to the laws and regulations to the Board for consideration.	Jul-2015	Chief of Legislation	
f.	Based on the discussion by the Board, if legislative changes are needed, find an author and initiate the legislative process.	Oct-2015	Chief of Legislation	
g.	Based on the discussion by the Board, if regulatory changes are needed, have staff initiate the rule-making process.	Oct-2015	Licensing Outreach Manager	

Green activity is complete. Yellow activity is in process or ongoing. Red activity has not been completed in the timeframe requested.

Goal 2: Regulations and enforcement: Protect the public by effectively enforcing laws and standards.

2.1	Effectively transition the investigators from the Board to Department of Consumer Affairs in order to improve investigative time frames.		High - 1	
Activities		**Date**	**Responsible Parties**	**Status**
a.	Identify existing investigative timeframes.	Dec-2013	Executive Director and Chief of Enforcement	Completed – however, due to BreEZe only have statistics as of October 3, 2013.
b.	Hold regular meetings with DCA to discuss the transition of the investigators.	Oct-2013 and ongoing	Executive Director and Chief of Enforcement	Completed
c.	Review and approve the Memorandum of Understanding to identify how the transition will be implemented and DCA/Board responsibilities.	Mar-2014	Executive Director, Chief of Enforcement and Senior Staff Counsel	Completed
d.	Update the Board on the transition of staff.	Quarterly	Executive Director and Chief of Enforcement	Ongoing; Updates at each Board meeting.
e.	Meet with labor relations to discuss transition issues.	Apr-2014	Executive Director and Chief of Enforcement	Completed
f.	Meet with staff to discuss the transition.	Ongoing	Executive Director and Chief of Enforcement	Completed
g.	Finalize the transition and movement of staff.	Jul-2014	Executive Director and Chief of Enforcement	Completed
h.	Gather and review investigative timeframes.	Monthly	Executive Director and Enforcement Manager	Due to the transition to the BreEZe system, unable to obtain reports indicating these timeframes.
i.	Report investigative timeframes to the Board.	Quarterly	Executive Director and Enforcement Manager	Due to the transition to the BreEZe system, unable to obtain reports indicating these timeframes.

Green activity is complete. Yellow activity is in process or ongoing. Red activity has not been completed in the timeframe requested.

Goal 2: Regulations and enforcement: Protect the public by effectively enforcing laws and standards.

2.2	Review the laws and regulations pertaining to the Board's responsibility to regulate outpatient surgery centers and suggest amendments.		High - 2	
Activities		**Date**	**Responsible Parties**	**Status**
a.	Review existing laws to determine which laws/regulations need to be revised to meet the current needs for consumer protection and medical education.	Oct-2013	Chief of Licensing	Completed
b.	Provide a summary of the proposed changes to the interested parties.	Jan-2014	Chief of Licensing	Completed
c.	Determine which changes can be done with regulations versus legislation.	Jan-2014	Senior Staff Counsel	Completed
d.	Hold an interested parties meeting to discuss the proposed changes.	Jan-2014	Chief of Licensing	Completed
e.	Present the proposed changes to the Board to initiate the legislative process, if needed.	Oct-2014	Chief of Legislation	These changes are in SB 396 (Hill) and this bill is currently moving through the Legislature.
f.	Initiate the rule-making process.	Oct-2014	Chief of Licensing and Senior Staff Counsel	May 2015 Board meeting – approved moving forward with regulatory changes. July 31, 2015 – a regulatory hearing is scheduled to approve the regulatory changes.
g.	Work with the stakeholders to facilitate implementation of regulatory and statutory changes.	Jan-2015 and Jan-2016	Chief of Licensing and Senior Staff Counsel	Awaiting finalization of regulatory and legislative changes.

Green activity is complete. Yellow activity is in process or ongoing. Red activity has not been completed in the timeframe requested.

Goal 2: Regulations and enforcement: Protect the public by effectively enforcing laws and standards.			
2.3	**Identify methods to help ensure the Board is receiving all the mandated reports.**	**High - 3**	
Activities	**Date**	**Responsible Parties**	**Status**
a. Send individual notifications to all mandated reporters regarding the reporting requirements.	Annually	Enforcement Manager	Pending the hiring of the Chief of Enforcement and will be done in October 2015.
b. Obtain a list of reports from the National Practitioner Databank to cross check with the Board's information.	May annually	Research Program Specialist	Board staff has received the 2015 data put has not completed the verification process.
c. Identify opportunities for placement of articles on mandatory reporting in professional newsletters/publications and provide content to be used.	July-2014 and ongoing	Public Information Officer	The Fall Newsletter had an article addressing “Mandatory Reporting Requirements for Physicians and Others” that included requirements for physicians not only reporting to the Board, but to other entities. Board staff is still looking to work with the California State Coroners Association on getting the word out to the various county Coroners regarding Business and Professions Code section 802.5
d. Conduct outreach on reporting requirements to all mandated reporters, as resources allow.	July-2014 and ongoing	Public Information Officer	In November 2014 Staff provided a Presentation to Los Angeles County Department of Health Services Quality Improvement and Patient Safety Program on mandatory requirements.

Green activity is complete. Yellow activity is in process or ongoing. Red activity has not been completed in the timeframe requested.

Goal 2: Regulations and enforcement: Protect the public by effectively enforcing laws and standards.

2.4	Determine whether the Registered Dispensing Optician (RDO) Program should remain within the authority of the Board.		High - 4
Activities		**Date**	**Responsible Parties**	**Status**
a.	Initiate discussions with the DCA, Board of Optometry, stakeholders, professional groups, and consumer representatives to discuss the potential transfer of the RDO program.	Aug-2014	Chief of Legislation; Executive Director	Completed Fall/Winter 2014.
b.	Write a summary report of the discussions for the Board's review and approval.	Oct-2014	Chief of Legislation; Executive Director	Completed at January 2015 Board Meeting.
c.	Make recommendations to the Business and Professions Committees and seek legislation if necessary.	Nov-2014	Chief of Legislation; Executive Director	Completed. Decided no action needed at this time.

2.5	Examine the Expert Reviewer Program and policies to determine how it may be improved, including recruitment, evaluation of experts, opportunities for education, and policies governing the Board's use of experts.		High - 5
Activities		**Date**	**Responsible Parties**	**Status**
a.	Continue to evaluate, revise, and update the training program and materials for experts.	Ongoing	Enforcement Manager	Pending the hiring of the Chief of Enforcement.
b.	Require the Deputies Attorney General who use the experts to provide evaluations on each expert report and each expert that testifies.	Within 30 days of completion of each expert task	Enforcement Manager	This is being completed as cases proceed through the enforcement process.
c.	Examine the evaluations to determine if there is a need for remediation or elimination of the experts.	Within 30 days of the evaluation	Enforcement Manager	The Expert Reviewer Program Analyst watches the evaluations to determine appropriate action, and when necessary forwards the information to appropriate parties. Full assessment is pending the hiring of the Chief of Enforcement.
d.	Continue to provide statewide trainings for the expert reviewers.	Provide two trainings	Enforcement Manager	Pending the hiring of the Chief of Enforcement.
e.	Provide a status report to the Board on the Expert Reviewer Program.	Quarterly	Enforcement Manager	Completed – July 2015

Green activity is complete. Yellow activity is in process or ongoing. Red activity has not been completed in the timeframe requested.

Goal 2: Regulations and enforcement: Protect the public by effectively enforcing laws and standards.				
2.6	**Partner with the Office of Administrative Hearings (OAH) and Health Quality Enforcement Section (HQES) of the Attorney General's (AG) office to identify opportunities, and design curriculum, for the ongoing education of judges.**		**Med - 6**	
Activities		**Date**	**Responsible Parties**	**Status**
a.	Examine recent disciplinary decisions to identify any training needed for the Administrative Law Judges.	Monthly	Enforcement Manager	Currently the Executive Director is performing this function but will be transitioned to the Chief of Enforcement.
b.	Identify subject matter experts and arrange OAH training at least every other month.	Six times annually	Enforcement Manager	Pending hiring of the Chief of Enforcement. Training has been identified and the Chief of Enforcement will identify speakers and assist OAH.
c.	Provide OAH with updates on the Board issues and changes to disciplinary guidelines.	Annually	Executive Director and Enforcement Manager	Meeting will be scheduled with OAH in August 2015.
2.7	**Study disciplinary and administrative cases, including looking at physicians in training, to identify trends or issues that may signal dangerous practices or risks.**		**Med - 7**	
Activities		**Date**	**Responsible Parties**	**Status**
a.	Identify the metrics to be used to examine disciplinary cases within last five years.	Aug-2014	Research Program Specialist	Pending initiation due to other important projects and lack of staff.
b.	Identify the red flags that could be used to predict patterns before serious harm occurs.	Nov-2014	Research Program Specialist	
c.	Draft a report based upon the findings to present to the Board for possible action.	Jan-2015	Research Program Specialist	

Green activity is complete. Yellow activity is in process or ongoing. Red activity has not been completed in the timeframe requested.

Goal 3: Consumer and Licensee Education: Increase Public and Licensee awareness of the Board, its mission, activities and services.				
3.1	**Review the Board's public disclosure laws regarding posting postgraduate information and move forward with rescinding the 10-year time limit for posting disciplinary information/documents.**		**High - 1**	
Activities		**Date**	**Responsible Parties**	**Status**
a.	Seek legislation to rescind the 10-year time limit for posting disciplinary information/documents.	Feb-2014	Chief of Legislation	AB 1886 – passed and became effective January 1, 2015.
b.	Discuss the proposal to remove the posting of postgraduate training information with interested parties, specifically consumer interest groups.	Aug-2014	Chief of Legislation and Chief of Licensing	Due to the ability in BreEZe to gather this information, at the July 2014 Board Meeting staff presented, and the Board approved, the recommendation to not seek legislation to remove the posting of postgraduate information.
c.	Provide the recommendation on postgraduate training information to the Board for approval.	Oct-2014	Chief of Legislation and Chief of Licensing	Due to the ability in BreEZe to gather this information, at the July 2014 Board Meeting staff presented, and the Board approved, the recommendation to not seek legislation to remove the posting of postgraduate information.
d.	Make recommendations to the Business and Professions Committees and seek legislation.	Nov-2014	Chief of Legislation	Board will not seek legislation.

Goal 3: Consumer and Licensee Education: Increase Public and Licensee awareness of the Board, its mission, activities and services.				
3.2	**Expand all outreach efforts to educate physicians, medical students, and the public, regarding the Board's laws, regulations, and responsibilities.**		**High - 2**	
Activities		**Date**	**Responsible Parties**	**Status**
a.	Engage in two or more consumer outreach events with area organizations, as travel permits.	Quarterly	Public Information Officer	Board staff held or attended 16 events from January 1, 2015 to June 30, 2015, including town halls, presentations at Rainbow Chamber of Commerce, senior centers, high schools, health care classes at CSU, etc.
b.	Continue to provide articles and information in the Newsletter regarding potential violations to assist physicians in understanding the laws and regulations.	Quarterly	Public Information Officer	Four articles were included in the Spring 2015 Newsletter. The Board anticipates it will have at least six articles in the Summer 2015 Newsletter. The PIO is assisting the Department of Consumer Affairs with an Article on Midwifery for their Consumer Connection Magazine.
c.	Launch a Twitter account to provide stakeholders with updates on best practices, changes in laws and regulations, and recent Board activities.	Aug-2014	Public Information Officer	Launched in January 2015; Sent out 37 Tweets during the period of January to June 2015. Twitter impressions have grown to 4,771 with 203 followers. The Natalie Coughlin PSA, which won the State's Gold Award, has been re-tweeted many times and has garnered the most response.
d.	Provide two or more articles to appropriate media outlets regarding laws and regulations and what they mean to stakeholders.	Quarterly	Public Information Officer	The Board's Prescribing Guidelines were shared with several agencies and media outlets who have provided links to the Guidelines in their stories. Staff worked with the County of Los Angeles Department of Consumer Affairs assisting them with information they published about the Board. On June 3, 2015, Staff worked with Telemundo on a story for their audience "It's Safe for Undocumented Immigrants in the Hispanic Community to File a Complaint When Concerned About Their Medical Care."

Green activity is complete. Yellow activity is in process or ongoing. Red activity has not been completed in the timeframe requested.

Goal 3: Consumer and Licensee Education: Increase Public and Licensee awareness of the Board, its mission, activities and services.

3.3	Examine opportunities for the Board to provide training to licensees via the internet, including hosting webinars on subjects of importance to public protection and public health.		High - 3	
Activities		**Date**	**Responsible Parties**	**Status**
a.	Work with DCA to establish webinar protocol and the tools needed to hold successful webinars.	Jun-2014	Public Information Officer	The Board recently obtained editing software and plan to start a tutorial on "How to File a Complaint". In addition, a tutorial on "How to Look Up Your Physician" is also being planned.
b.	Work with healthcare agencies and organizations regarding topics of interest for training purposes.	Sep-2014	Public Information Officer	The Board continues to partner with the California Department of Public Health regarding the Statewide work group that seeks to curb prescription drug misuse and abuse. Additional plans for this campaign are in discussion. The Board has partnered with the California State Bar and the legislature to educate consumers and stakeholders on the joint mission of consumer protection. Board staff are working with the California Medical Association on the corporate practice of medicine and utilization review. In March 2015 Board staff gave a presentation and update on the Outpatient Surgery Settings Program to the California Ambulatory Surgery Association. On May 15, 2015 Board staff was a panelist during a session entitled "Bring State-level Organizations Together for Surgical and Procedural Patient Safety in California" as part of a conference entitled "Eliminating Serious Patient Safety Events in Surgical and Procedural Areas: A Statewide Conference and Call to Action for California Hospitals."
c.	Develop interactive webinar content for licensees to promote public protection.	Jan-2015	Public Information Officer	
d.	Conduct webinars to promote public protection.	Apr-2015 and bi-annually	Public Information Officer	Please see above tutorial project on "How to File a Complaint" and "How to Look Up Your Physician."

Green activity is complete. Yellow activity is in process or ongoing. Red activity has not been completed in the timeframe requested.

Goal 3: Consumer and Licensee Education: Increase Public and Licensee awareness of the Board, its mission, activities and services.				
3.4	**Establish a proactive approach in communicating via the media, and other various publications, to inform and educate the public, including California's ethnic communities, regarding the Board's role in protecting consumers through its programs and disciplinary actions.**		**High - 4**	
Activities		**Date**	**Responsible Parties**	**Status**
a.	Expand and continue to cultivate relationships with various ethnic communities through their individual media outlets by providing information and education on the Board's role and responsibilities.	Quarterly	Public Information Officer	On April 8, 2015, Board staff attended and participated in a State Information Officers Counsel presentation titles "Communicating Your Message to Culturally Diverse Media Groups." On June 8, 2015, Board staff attended a meeting with Editor and Senior Vice-President of the Sacramento Bee. Discussions ranged from the diversity of the community to the new approach for media.
b.	Engage in television and radio interviews promoting transparency and providing needed information as requested.	Ongoing	Public Information Officer	Staff continues to work with the San Jose Mercury News regarding the issue involving psychotropic drugs and foster kids. The PIO has given several interviews and quotes to a variety of media outlets on a variety of topics.
c.	Create PSAs and videos that can be placed online for viewing that address topics of interest as well as educate stakeholders.	Aug-2014 and ongoing	Public Information Officer	On May 20, 2015, the Board's video/PSA featuring Natalie Coughlin won the State Information Officer Counsel (SIOC) Gold Award for excellence. This resulted in over a thousand viewings on YouTube. On May 20, 2015, the Board's video for physicians featuring Dr. Bishop won the SIOC Silver Award for excellence. This resulted in over 600 viewings on YouTube.
d.	Promote the Board's website and provide consumer friendly information on how to file a complaint.	Ongoing	Public Information Officer	Currently, Board staff is working on a video explaining how to file a complaint. Next, Board staff will look to develop a video explaining how to verify a license.

Green activity is complete. Yellow activity is in process or ongoing. Red activity has not been completed in the timeframe requested.

Goal 3: Consumer and Licensee Education: Increase Public and Licensee awareness of the Board, its mission, activities and services.				
3.5	**Establish a method for hosting public seminars taught by legal or enforcement personnel on disciplinary cases, laws violated, and other issues of importance to the profession and the public.**		**Med - 5**	
Activities		**Date**	**Responsible Parties**	**Status**
a.	Develop a list of groups who have shown interest for Board speakers in the past, in order to identify similar groups that the Board can reach out to for potential seminars.	Sep-2014	Public Information Officer	Board staff has a list, and will continue to expand it in the future.
b.	Cultivate relationships with groups not previously engaged, in order to provide seminars.	Sep-2014	Public Information Officer	The Newsletter has a regular boxed article offering Board speakers to provide presentations at meetings and events regarding the Board's mission and functions/duties The PIO makes contacts at various outreach events that result in being invited to more outreach events.
c.	Revise and update presentations already developed for the purpose of providing seminars.	Jan-2015	Public Information Officer, Senior Staff Counsel, and Enforcement Manager	Corporate Practice of Medicine Presentation was provided on January 29, 2015 and is on the Board's website. A presentation for Board Members was updated and completed in June 2015 and is available when necessary for presentations.
d.	Conduct and record the seminar and post it on the Board's website.	Mar-2015 and ongoing	Public Information Officer, Senior Staff Counsel, and Enforcement Manager	Corporate Practice of Medicine Presentation was provided on January 29, 2015 and is on the Board's website.

Goal 4: Organizational Relationships: Improve effectiveness by building relationships with related organizations to further the Board's mission and goals.

4.1	**Build collaborative relationships with elected officials and their staffs to work toward shared interests in consumer protection and advancing the profession.**		**High - 1**	
Activities		**Date**	**Responsible Parties**	**Status**
a.	Develop a plan to visit Senate and Assembly Business and Professions Committee members and staff with Board members.	Oct-2014	Chief of Legislation	Completed February 2015.
b.	Invite legislative members and staff to Board meetings.	Quarterly	Chief of Legislation	Ongoing.
c.	Continue to reach out to new legislative members to inform them of the Board's roles and responsibilities.	Ongoing	Chief of Legislation	Ongoing as new Members join the Senate and Assembly Business and Professions Committee. Board staff and a Board Member met with the Speaker of the Assembly at her district office to discuss Board functions.
4.2	**Improve educational outreach to hospitals, health systems, and similar organizations about the Board and its programs.**		**High - 2**	
Activities		**Date**	**Responsible Parties**	**Status**
a.	Arrange licensing fairs and orientations at teaching facilities to educate applicants on the Board and its application and licensing processes.	Monthly	Licensing Outreach Manager	Held 17 events from January 1, 2015 to June 30, 2015.
b.	Provide presentations on the Board's roles, responsibilities, mandatory reporting requirements, and processes at hospitals, health systems, and similar organizations, as travel permits.	Quarterly	Public Information Officer and Appropriate Subject Matter Expert	In March 2015 staff gave a presentation and update on the Outpatient Surgery Settings Program to the California Ambulatory Surgery Association. Board staff attend two meetings with the UC Regents Graduate Medical Education to update the GME associate deans regarding Board issues including postgraduate training requirements, physician reentry to practice, and informed them of the interested parties meeting on June 30. Staff gave a presentation regarding disruptive and impaired physicians to 50-60 physicians at a medical center. In November 2014, Staff and a Board Member provided a presentation on discipline, drugs, and duties to health care providers at the Multidisciplinary Healthcare Conference.

Green activity is complete. Yellow activity is in process or ongoing. Red activity has not been completed in the timeframe requested.

Goal 4: Organizational Relationships: Improve effectiveness by building relationships with related organizations to further the Board's mission and goals.

4.3	**Optimize relationships with the accreditation agencies, associations representing hospitals and medical groups, consumer organizations, professional associations and societies, the Federation of State Medical Boards, federal government agencies, and other state agencies, including the Department of Consumer Affairs and the Business, Consumer Services and Housing Agency.**	**High - 3**	
Activities		**Date**	**Responsible Parties**	**Status**
a.	Develop a contact list of representatives for stakeholder organizations.	Mar-2014 and update annually	Public Information Officer	The Public Information Officer is maintaining a contact list for the stakeholder organizations who have contacted the Board and will continue to add to this list.
b.	Offer to make presentations to all stakeholder organizations to provide educational information and updates on the Board's current activities, as travel permits.	May-2014 and ongoing	Public Information Officer	In March 2015 Board staff met with staff from the Department of Business Oversight to discuss the Corporate Practice of Medicine. Staff attended the California Worker's Compensation Institutes 51st Annual Meeting to discuss utilization review. Staff provided a presentation at the Riverside District Attorney's Office during a consumer protection roundtable. Staff provided a presentation regarding the investigation process at the Department of Insurance Fraud training. Board staff provided a presentation for the Employers Fraud Task Force on utilization review.
c.	Maintain regular communication with stakeholders, including attending stakeholder meetings as appropriate, as travel permits.	Ongoing	Public Information Officer	Board staff continues to regularly meet with the California Medical Association and Consumer's Union on issues of interest as requested. Board staff have attended and provided comments on webinars provided by the Federation of State Medical Boards.
d.	Invite stakeholders to participate in the Board's Newsletter with articles and information, approved by the Editorial Committee, pertinent to licensees.	Mar-2014 and ongoing	Public Information Officer	In the Fall 2014 Newsletter there were articles on: POLST (physician orders for life sustaining treatment) from the Coalition for Compassionate Care of California; information for Medi-Cal providers on the Recovery Audit Contractor Program from the Department of Health Care Services; and Medi-Cal participation from the University of California, San Francisco. In the Spring 2015 Newsletter there were articles on: organ donors from the Donate Life Campaign; information on Million Hearts campaign from the Department of Health Care Services; information on Fentanyl from the Drug Enforcement Administration; and information on physician assistant delegation of services agreements from the Physician Assistant Board.
e.	Provide activity reports to the Education and Wellness Committee.	At each committee meeting	Public Information Officer	Presented at the January 29, 2015 Education and Wellness Committee.

Green activity is complete. Yellow activity is in process or ongoing. Red activity has not been completed in the timeframe requested.

Goal 5: Organizational Effectiveness: Evaluate and enhance organizational effectiveness and systems to improve service.

5.1	**Review licensing applications within 45 days. Reduce complaint processing, investigations, and discipline timelines by 10% from prior fiscal year; reduce complaint processing median to less than 70 days, with 50-60% less than 50 days.**	**High - 1**	
Activities		**Date**	**Responsible Parties**	**Status**
a.	Gather and evaluate statistics regarding the Board's application review timeframes.	Quarterly	Chief of Licensing	Completed at January 2015 Board meeting. Will present at July 2015 Board meeting in the Licensing Chief's Report.
b.	Determine if the Board is reviewing applications within 45 days, and if not, identify possible problems and solutions.	Quarterly	Chief of Licensing	Completed at January 2015 Board meeting in the Licensing Chief's Report.
c.	Implement the possible solutions for licensing process enhancement.	As Necessary	Chief of Licensing	Ongoing; BreEZe online application deficiency status went online July 1, 2015
d.	Gather and evaluate statistics regarding the Board's enforcement timeframes.	Quarterly	Enforcement Manager	Due to BreEZe, the Board has been unable to obtain enforcement statistics.
e.	Determine if the Board is meeting enforcement timeframes goals, and if not, identify possible problems and solutions.	Quarterly	Enforcement Manager	Due to BreEZe, the Board has been unable to obtain enforcement statistics.
f.	Implement the possible solutions for enforcement process enhancements.	As Necessary	Enforcement Manager	

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Goal 5: Organizational Effectiveness: Evaluate and enhance organizational effectiveness and systems to improve service.				
5.2	**Obtain and monitor feedback from those who access Board services and provide a report to the Board.**		**High - 2**	
Activities		**Date**	**Responsible Parties**	**Status**
a.	Evaluate consumer satisfaction statistics.	Quarterly	Research Program Specialist	The Board is revising all compliant closure letters to include the updated website link to the DCA's consumer satisfaction survey.
b.	Evaluate applicant satisfaction statistics.	Quarterly	Research Program Specialist	Ongoing.
c.	Evaluate web user satisfaction statistics.	Quarterly	Research Program Specialist	Ongoing.
d.	Evaluate Newsletter reader satisfaction statistics.	Quarterly	Research Program Specialist	Ongoing.
e.	Create a summary report of satisfaction statistics and present them to the Board.	Quarterly	Research Program Specialist and Executive Director	Statistics will be presented at the July 2015 Board meeting and ongoing.
f.	Implement changes as needed based upon the feedback received.	As Necessary	Research Program Specialist and Executive Director	

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Goal 5: Organizational Effectiveness: Evaluate and enhance organizational effectiveness and systems to improve service.				
5.3	**Establish a consistent approach to educating staff about the Board's activities and priorities set by Board Members, including but not limited to facilitating staff attendance at meetings and Board Member attendance at staff meetings.**		**Med - 3**	
Activities		**Date**	**Responsible Parties**	**Status**
a.	Send an email to all staff after each Board meeting indicating the action taken by the Board and any projects that will need to be completed.	Quarterly	Executive Director	This is being completed after each Board meeting.
b.	Send emails to all staff updating them on projects of the Board.	Monthly	Executive Director	This has been done more on a quarterly or as-needed basis,
c.	Hold regular staff meetings and provide a Q and A time for staff.	Quarterly	Executive Director	Ongoing.
d.	Send an email to staff notifying them of upcoming meetings where they may attend.	Quarterly	Executive Director	Ongoing.
e.	Invite Board Members to all staff meetings.	Quarterly	Executive Director	Ongoing.

Goal 5: Organizational Effectiveness: Evaluate and enhance organizational effectiveness and systems to improve service.				
5.4	**Conduct a review every two years of each of the Committees established by the Board to determine if they are still needed, if they are fulfilling the purpose for which they were established, and determine if they should continue, be reconfigured, or eliminated.**		**Med - 4**	
Activities		**Date**	**Responsible Parties**	**Status**
a.	Add an agenda item to the Board's October meeting to review the Committees.	Oct-2014 and Biennially	Executive Director	Completed at the October 2014 meeting.
b.	Review the Committee Roster in October and identify Committees that may no longer be needed or may need reconfigured.	Oct-2014 and Biennially	Executive Director	Completed at the October 2014 meeting.
c.	Prepare a memo for the Board Meeting Packet identifying the purpose of every committee and making staff recommendations.	Oct-2014 and Biennially	Executive Director	Completed at the October 2014 meeting.
d.	Discuss the Committee Roster at the Board meeting.	Oct-2014 and Biennially	Executive Director	Completed at the October 2014 meeting.
e.	Update the Committee Roster as approved by the Board.	Oct-2014 and Biennially	Executive Director	Completed at the October 2014 meeting.

Goal 6: Access to Care, Workforce, and Public Health: Understanding the implications of Health Care Reform and evaluating how it may impact access to care and issues surrounding healthcare delivery, as well as promoting public health, as appropriate to the Board's mission in exercising its licensing, disciplinary and regulatory functions.

6.1	Inform the Board and stakeholders on the Affordable Care Act (ACA) and how it will impact the physician practice, workforce, and utilization of allied healthcare professionals, and access to care for patients.	High	
Activities	**Date**	**Responsible Parties**	**Status**
a. Continue to invite appropriate speakers to inform the Board about the ACA.	Bi-annually	Chief of Legislation and Executive Director	There will be a presentation at the July 2015 Board meeting.
b. Identify and obtain ACA articles to print in the Board's Newsletter.	Bi-annually	Public Information Officer	An article will be placed in the Fall Newsletter regarding the information from the presentation at the July 2015 Board meeting.
c. Educate physicians on opportunities to assist patients not within the ACA in obtaining access to care.	Bi-annually	Public Information Officer	

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