Medical Board of California
March 2004

PERFORMANCE MEASUREMENT / INDICATOR REPORT

TABLE OF CONTENTS

I. Professional Qualifications 1
   a. Physicians with Practice Deficits 2
   b. Licensing Unqualified Physicians 6
II. Regulations and Enforcement 8
    a. Quality of Care Cases 9
III. Consumer Education 13
     a. Patients Informed 14
IV. Organizational Relationships 20
    a. MBC Initiatives/Programs 21
V. Organizational Effectiveness 23
   a. Use of MBC Resources 24
VI. Completion Status 28
    a. Professional Qualifications 28
    b. Regulations and Enforcement 30
    c. Consumer Education 32
    d. Organizational Relationships 33
    e. Organizational Effectiveness 34
PROFESSIONAL QUALIFICATIONS

GOAL: Ensure the professional qualifications of medical practitioners by setting requirements for education, experience and examinations

<table>
<thead>
<tr>
<th>Desired Outcome</th>
<th>Performance Indicator</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reduction in physicians with practice deficits that have or could lead to patient injuries</td>
<td>REPORTING MEASURES&lt;br&gt;▪ Percentage of successful diversion program cases&lt;br&gt;▪ Percentage of quality of care cases resulting in removal of a physician causing or potentially causing patient injury from practice&lt;br&gt;▪ Number of physicians undergoing compulsory physical and psychological competency exams under Section 820</td>
</tr>
<tr>
<td></td>
<td>TRACKING INDICATORS&lt;br&gt;▪ Number of currently active licensed California physicians participating in the diversion program</td>
</tr>
<tr>
<td>Reduced risk of the Board licensing unqualified physicians</td>
<td>TRACKING INDICATORS&lt;br&gt;▪ Number of applicants granted restricted or probationary licenses&lt;br&gt;▪ Number of applicants denied licenses or withdrawing from the licensure process</td>
</tr>
</tbody>
</table>
Goal:
Ensure the professional qualifications of medical practitioners by setting requirements for education, experience and examinations.

Desired Outcome:
Reduction in physicians with practice deficits that have or could lead to patient injuries.

Performance Measurement/Indicator:
The percentage of participants successfully terminated from the program annually.

Graph/Table Display:

<table>
<thead>
<tr>
<th>Fiscal Year of Completion</th>
<th>In-State Success Rate</th>
<th>Out-of-State Success Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>1998/99</td>
<td>65%</td>
<td>0%</td>
</tr>
<tr>
<td>1999/00</td>
<td>63%</td>
<td>20%</td>
</tr>
<tr>
<td>2000/01</td>
<td>87%</td>
<td>40%</td>
</tr>
<tr>
<td>2001/02</td>
<td>100%</td>
<td>67%</td>
</tr>
<tr>
<td>2002/03</td>
<td>82%</td>
<td>79%</td>
</tr>
</tbody>
</table>

Results Explanation and/or Variance Report:
There has been between 50 and 60 In-State participants exit the program annually. The Out-of-State success rate has a broader range of fluctuations because the total Out-of-State completions have been between 3 and 6 individuals. Out of State data has only been presented in the Annual Report since 2000/2001.
QUARTERLY MEASUREMENT/INDICATOR REPORT

Reporting Division/Committee: MEDICAL QUALITY / ENFORCEMENT COMMITTEE
Responsible Program: ENFORCEMENT PROGRAM

Goal:
Ensure the professional qualifications of medical practitioners by setting requirements for education, experience and examinations.

Desired Outcome:
Reduction in physicians with practice deficits that have or could lead to patient injuries.

Performance Measurement/Indicator:
Percentage of cases resulting in removal of physician causing or potentially causing patient injury during the reporting period.

Graph/Table Display:

Results Explanation and/or Variance Report:
Goal:
Ensure the professional qualifications of medical practitioners by setting requirements for education, experience and examinations.

Desired Outcome:
Reduction in physicians with practice deficits that have or could lead to patient injuries.

Performance Measurement/Indicator:
The number of physicians undergoing a physical, mental or competency examination during the reporting period.

Graph/Table Display:

![Number of Physicians Taking an Examination](image_url)

Results Explanation and/or Variance Report:
Reporting Division/Committee: MEDICAL QUALITY/DIVERSION
Responsible Program: PHYSICIAN’S DIVERSION PROGRAM

Goal:
Enhance the professional qualifications of medical practitioners by setting requirements for education, experience and examinations

Desired Outcome:
Reduction in physicians with practice deficits that have or could lead to patient injuries.

Performance Measurement/Indicator:
The number of licensed physicians currently participating in the Diversion Program at the end of the fiscal year.

Graph/Table Display:

Results Explanation and/or Variance Report:
Reporting Division/Committee: DIVISION OF LICENSING
Responsible Program: LICENSING PROGRAM

Goal:
Ensure the professional qualifications of medical practitioners by setting requirements for education, experience and examinations.

Desired Outcomes:
Reduce the risk of the Board licensing unqualified physicians.

Performance Measurement/Indicator:
Number of applicants granted a restricted and/or probationary license during the reporting period.

Graph/Table Display:

Results Explanation and/or Variance Report:
The Licensing Program processes an average of 385 applications per month. Less than 1% of the applicants are granted restricted or probationary licenses.
QUARTERLY MEASUREMENT/INDICATOR REPORT

Reporting Division/Committee: DIVISION OF LICENSING
Responsible Program: LICENSING PROGRAM

Goal:
Ensure the professional qualifications of medical practitioners by setting requirements for education, experience and examinations.

Desired Outcome:
Reduce the risk of the Board licensing unqualified physicians.

Performance Measurement/Indicator:
Number of applicants denied licenses or withdrawing from the licensure process during the reporting period.

Graph/Table Display:

Results Explanation and/or Variance Report:
The Licensing Program processes an average of 385 applications per month. Less than 1% of the applicants are eliminated from the licensing process.
REGULATIONS AND ENFORCEMENT

GOAL: Protect the public by (1) preventing violations and (2) effectively enforcing laws and standards when violations occur

<table>
<thead>
<tr>
<th>Desired Outcome</th>
<th>Performance Indicator¹</th>
</tr>
</thead>
<tbody>
<tr>
<td>Quality of care cases resolved quickly and accurately</td>
<td>REPORTING MEASURES</td>
</tr>
<tr>
<td></td>
<td>▪ Percent of quality of care accusations that are upheld</td>
</tr>
<tr>
<td></td>
<td>▪ Average time to complete a Quality of Care investigation during the reporting period</td>
</tr>
<tr>
<td></td>
<td>▪ Average resolution time for cases resulting in removal of a physician causing or potentially causing patient injury from practice</td>
</tr>
<tr>
<td></td>
<td>TRACKING INDICATORS</td>
</tr>
<tr>
<td></td>
<td>▪ Percent of complaints that result in accusations or disciplinary actions</td>
</tr>
</tbody>
</table>

¹ Note: these measures are pending refinement by the Enforcement Committee. The SB 1950 definition ("resulting in serious injury or death") is operative
QUARTERLY MEASUREMENT/INDICATOR REPORT

Reporting Division/Committee: MEDICAL QUALITY/ENFORCEMENT COMMITTEE
Responsible Program: ENFORCEMENT PROGRAM

Goal:
Protect the public by (1) preventing violations and (2) effectively enforcing laws and standards when violations occur.

Desired Outcome:
To quickly and accurately resolve quality of care cases.

Performance Measurement/Indicator:
Average time to complete a Quality of Care investigation during the reporting period.

Graph/Table Display:

![Bar Chart]

Average Time to Complete a Quality of Care Investigation

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>285</td>
<td>305</td>
<td>325</td>
<td>335</td>
</tr>
</tbody>
</table>

Results Explanation and/or Variance Report:
Goal:
Protect the public by (1) preventing violations and (2) effectively enforcing laws and standards when violations occur.

Desired Outcome:
To quickly and accurately resolve quality of care cases.

Performance Measurement/Indicator:
Average resolution time for cases resulting in removal of physician causing or potentially causing patient injury during the reporting period.

Graph/Table Display:

Results Explanation and/or Variance Report:
REPORTING DIVISION/COMMITTEE: MEDICAL QUALITY/ENFORCEMENT COMMITTEE
RESPONSIBLE PROGRAM: ENFORCEMENT PROGRAM

GOAL:
Protect the public by (1) preventing violations and (2) effectively enforcing laws and standards when violations occur.

DESIRED OUTCOME:
To quickly and accurately resolve quality of care case.

PERFORMANCE MEASUREMENT/INDICATOR:
Percentage of complaints resulting in an accusation during the reporting period.

GRAPH/TABLE DISPLAY:

Results Explanation and/or Variance Report:
QUARTERLY MEASUREMENT/INDICATOR REPORT

Reporting Division/Committee: MEDICAL QUALITY/ENFORCEMENT COMMITTEE
Responsible Program: ENFORCEMENT PROGRAM

Goal:
Protect the public by (1) preventing violations and (2) effectively enforcing laws and standard when violations occur.

Desired Outcome:
To quickly and accurately resolve quality of care case.

Performance Measurement/Indicator:
Percentage of complaints resulting in disciplinary action during the reporting period.

Graph/Table Display:

Results Explanation and/or Variance Report:
## CONSUMER EDUCATION

**GOAL:** Increase public awareness of MBC’s mission, activities and services

<table>
<thead>
<tr>
<th>Desired Outcome</th>
<th>Performance Indicator</th>
</tr>
</thead>
</table>
| Patients are able to make informed decisions about medical practitioners and unlicensed practitioners and know how to seek remedies through accessible information provided by the Medical Board | **REPORTING MEASURES**  
- Number of media and consumer outreach activities  
- Number of hits to the MBC website  
- Number of calls to the Complaint Unit  
- Number of calls to the Consumer Information Unit  
- Number of non-jurisdictional complaints received  
- Level of complainant satisfaction with MBC response |
QUARTERLY MEASUREMENT/INDICATOR REPORT

Reporting Division/Committee: PUBLIC EDUCATION COMMITTEE
Responsible Program: PUBLIC INFORMATION OFFICE

Goal:
Increase public awareness of MBC’s mission, activities and services.

Desired Outcome:
Patients are able to make informed decisions about medical practitioners and unlicensed practitioners and know how to seek remedies through accessible information provided by the Medical Board.

Performance Measurement/Indicator:
Number of significant media and consumer outreach activities conducted during the fiscal year.

Graph/Table Display:

Public Information Outreach

<table>
<thead>
<tr>
<th>Reporting Period</th>
<th>Number of Events</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oct-Dec 02</td>
<td>4</td>
</tr>
<tr>
<td>Jan-Mar 03</td>
<td>3</td>
</tr>
<tr>
<td>April-Jun 03</td>
<td>3</td>
</tr>
<tr>
<td>July-Sept 03</td>
<td>3</td>
</tr>
<tr>
<td>Oct-Dec 03</td>
<td>3</td>
</tr>
<tr>
<td>Jan-Mar 04</td>
<td>4</td>
</tr>
</tbody>
</table>

Results Explanation and/or Variance Report:
Goal: Increase public awareness of MBC’s mission, activities and services.

Desired Outcome: Patients are able to make informed decisions about medical practitioners and unlicensed practitioners and know how to seek remedies through accessible information provided by the Medical Board.

Performance Measurement/Indicator: Number of unique hits to the MBC Web Site during the reporting period.

Graph/Table Display:

Results Explanation and/or Variance Report:
QUARTERLY MEASUREMENT/INDICATOR REPORT

Reporting Division/Committee: PUBLIC EDUCATION COMMITTEE
Responsible Program: ENFORCEMENT PROGRAM

Goal:
Increase public awareness of MBC’s mission, activities and services.

Desired Outcome:
Patients are able to make informed decision about medical practitioners and unlicensed practitioners and know how to seek remedies through accessible information provided by the Medical Board.

Performance Measurement/Indicator:
Number of public calls received on the Consumer Complaint Unit toll-free lines during a reporting period.

Graph/Table Display:

Results Explanation and/or Variance Report:

QUARTERLY MEASUREMENT/INDICATOR REPORT

Reporting Division/Committee: PUBLIC EDUCATION COMMITTEE
Responsible Program: LICENSING PROGRAM

Goal:
Increase public awareness of MBC’s mission, activities and services.

Desired Outcome:
Patients are able to make informed decisions about medical practitioners and unlicensed practitioners and know how to seek remedies through accessible information provided by the Medical Board.

Performance Measurement/Indicator:
Number of calls received in the Consumer Information Unit during the reporting period.

Graph/Table Display:

Results Explanation and/or Variance Report:
QUARTERLY MEASUREMENT/INDICATOR REPORT

Reporting Division/Committee: PUBLIC EDUCATION COMMITTEE
Responsible Program: ENFORCEMENT PROGRAM

Goal:
Increase public awareness of MBC’s mission, activities and services.

Desired Outcome:
Patients are able to make informed decisions about medical practitioners and unlicensed practitioners and know how to seek remedies through accessible information provided by the Medical Board.

Performance Measurement/Indicator:
Number of non-jurisdictional complaints filed with the Central Complaint during the reporting period.

Graph/Table Display:

Non-Jurisdictional Complaints

Number of Complaints

0
500
1000
1500

FY98/99
FY99/00
FY00/01
FY01/02
FY 02/03

Fiscal Year

Results Explanation and/or Variance Report:
QUARTERLY MEASUREMENT/INDICATOR REPORT

Reporting Division/Committee: PUBLIC EDUCATION COMMITTEE
Responsible Program: ENFORCEMENT PROGRAM

Goal:
Increase public awareness of MBC’s mission, activities and services.

Desired Outcome:
Patients are able to make informed decisions about medical practitioners and unlicensed practitioners and know how to seek remedies through accessible information provided by the Medical Board.

Performance Measurement/Indicator:
Level of complainant satisfaction with MBC response during the reporting period.

Graph/Table Display:

Consumer Satisfaction

Fiscal Year

1997 1998 1999 2000

% of Overall Satisfaction

Overall Satisfaction

19

Results Explanation and/or Variance Report:
**ORGANIZATIONAL RELATIONSHIPS**

GOAL: Improve effectiveness of relationships with related organizations to further MBC mission and goals

<table>
<thead>
<tr>
<th>Desired Outcome</th>
<th>Performance Indicator</th>
</tr>
</thead>
</table>
| MBC initiatives and programs promoted through effective relationships and alliances with partner organizations and agencies. | REPORTING MEASURES  
- Number of legislative initiatives approved by the Board with the assistance of partner agencies  
TRACKING INDICATORS  
- Number of organizational relationships resulting in collaborative activities and ventures |

20
QUARTERLY MEASUREMENT/INDICATOR REPORT

Reporting Division/Committee: EXECUTIVE COMMITTEE/FULL BOARD
Responsible Program: LEGISLATION/REGULATION OFFICE

Goal: Improve effectiveness with related organizations to further MBC’s mission and goals.

Desired Outcome: To increase the percentage of MBC legislative initiatives implemented through partnerships and relationships.

Performance Measurement/Indicator: Percentage of Board initiated legislation introduced during the legislative year.

Graph/Table Display:

Results Explanation and/or Variance Report:
QuARTERLY MEASUREMENT/INDICATOR REPORT

Reporting Division/Committee: EXECUTIVE COMMITTEE
Responsible Program: LEGISLATION/REGULATION OFFICE

Goal: Improve effectiveness with related organizations to further MBC’s mission and goals.

Desired Outcome:
To increase the number of partnerships with organizations supportive of MBC initiatives, programs and improvements.

Performance Measurement/Indicator:
Number of collaborative or partnership activities conducted with various organizations throughout the fiscal year.

Graph/Table Display:

No data is available at this time for this measure. Discussions are currently underway to determine if measures can be developed for this goal/objective. The final determination will be reported at the May 2004 Quarterly Board meeting.

Results Explanation and/or Variance Report:
ORGANIZATIONAL EFFECTIVENESS

Goal: Enhance organizational effectiveness and systems to improve service to constituents

<table>
<thead>
<tr>
<th>Desired Outcome</th>
<th>Performance Indicator</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ability of MBC to achieve its mission through effective and efficient use of revenue and staff resources to support priority initiatives and programs</td>
<td>REPORTING MEASURES</td>
</tr>
<tr>
<td></td>
<td>• Percentage of staff indicating job satisfaction through the annual survey</td>
</tr>
<tr>
<td></td>
<td>• Percentage of staff remaining employed with the MBC – retention rate</td>
</tr>
<tr>
<td>TRACKING INDICATORS</td>
<td>• Percentage of time data and systems are available to staff when needed</td>
</tr>
<tr>
<td></td>
<td>• Average ticket resolution completed on time</td>
</tr>
</tbody>
</table>
Reporting Division/Committee: FULL BOARD / EXECUTIVE COMMITTEE
Responsible Program: ADMINISTRATIVE SUPPORT SERVICES

Goal:
Enhance organizational effectiveness and systems to improve service to constituents.

Desired Outcome:
Ability of MBC to achieve its mission through effective and efficient use of revenue and staff resources to support priority initiatives and programs.

Performance Measurement/Indicator:
Percentage of employees satisfied with their employment at MBC during the fiscal year.

Graph/Table Display:

Results Explanation and/or Variance Report:
Results were based on surveys sent to MBC employees (permanent, part-time), medical consultants, retired annuitants and students. Response rate was 71%. Next year’s goal is to increase the response rate to 80%.
**Goal:**
Enhance organizational effectiveness and systems to improve service to constituents.

**Desired Outcome:**
Ability of MBC to achieve its mission through effective and efficient use of revenue and staff resources to support priority initiatives and programs.

**Performance Measurement/Indicator:**
Employee vacancy rate for the major programs within the MBC during the reporting period.

### Graph/Table Display:

<table>
<thead>
<tr>
<th>Year</th>
<th>1st Qtr</th>
<th>2nd Qtr</th>
<th>3rd Qtr</th>
<th>4th Qtr</th>
</tr>
</thead>
<tbody>
<tr>
<td>FY 01/02</td>
<td>0%</td>
<td>5%</td>
<td>10%</td>
<td>15%</td>
</tr>
<tr>
<td>FY 02/03</td>
<td>20%</td>
<td>15%</td>
<td>10%</td>
<td>5%</td>
</tr>
<tr>
<td>FY 03/04</td>
<td>10%</td>
<td>5%</td>
<td>0%</td>
<td>0%</td>
</tr>
</tbody>
</table>

**Results Explanation and/or Variance Report:**

As a result of the vacancy sweep and 12% reduction in personal services, imposed on July 1, 2003, by the Department of Finance the MBC had no vacant positions during the first and second quarter of this fiscal year.
QUARTERLY MEASUREMENT/INDICATOR REPORT

Reporting Division/Committee: EXECUTIVE COMMITTEE
Responsible Program: INFORMATION SYSTEMS BRANCH

Goal:
Enhance organizational effectiveness and systems to improve service to constituents.

Desired Outcome:
Ability of MBC to achieve its mission through effective and efficient use of revenue and staff resources to support priority initiatives and programs.

Performance Measurement/Indicator:
Percentage of time data systems is available to staff during critical working hours.

Graph/Table Display:

![System Availability Graph]

Results Explanation and/or Variance Report:

Hours of operation include 06:00 to 18:00, Monday thru Friday.
Goal:
Enhance organizational effectiveness and systems to improve service to constituents.

Desired Outcome:
Ability of MBC to achieve its mission through effective and efficient use of revenue and staff resources to support priority initiatives and programs.

Performance Measurement/Indicator:
Average number of minutes required for ticket resolution.

Graph/Table Display:

Results Explanation and/or Variance Report:
**COMPLETION MEASUREMENTS**

Professional Qualifications  
**GOAL:** Ensure the professional qualifications of medical practitioners by setting requirements for education, experience and examinations

<table>
<thead>
<tr>
<th><strong>Ongoing Responsibilities</strong></th>
<th><strong>Status Update</strong></th>
<th><strong>Lead Responsibility</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Improve and expedite the review process</td>
<td>Completed: Many improvements made to the process, resulting in shortened time frames for licensing.</td>
<td>Division of Licensing</td>
</tr>
<tr>
<td>Determine future Board handling of alternative medicine: appropriate use, balance, licensing and Board responsibilities (such as new boards)</td>
<td>Two major factors identified for action; Committee will meet on November 31 for discussion and to formulate recommendation to the Board.</td>
<td>Non-Conventional Medicine Committee</td>
</tr>
<tr>
<td>Identify physicians who would benefit from rehabilitation and provide options. Develop a pilot program to implement</td>
<td>Pilot has been developed, Memo of Understanding signed by Cedars Sinai and legislation was passed to grant immunity for participation. As of yet, no candidate has been recommended or selected for participation.</td>
<td>Diversion Committee/Division of Medical Quality</td>
</tr>
</tbody>
</table>
## COMPLETION MEASUREMENTS

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Lead</th>
<th>Target Date</th>
<th>Completion Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Research and bring back a recommendation on accreditation of offshore medical schools that provides for periodic review and revisiting of certification and ensures continuing quality of offshore-educated physicians practicing in California</td>
<td>Re-certification Committee</td>
<td>January 2003</td>
<td>Regulatory Hearing held on May 9, 2003, and regulations were adopted relating to standards and methodologies of review of international medical schools. The regulations are moving forward to DCA and OAL for approval.</td>
</tr>
<tr>
<td>Review eligibility requirements and uniformity of licensing between U.S. and foreign schools to match requirements with quality control</td>
<td>Division of Licensing</td>
<td>April 2003</td>
<td>As schools are identified as needing further review because of changes in administration, etc., reviews will be conducted in compliance with adopted regulations.</td>
</tr>
<tr>
<td>Explore ways to achieve continued competency and report on options, including augmenting or replacing continuing education requirements with peer reviews or competency recertification</td>
<td>Re-certification Committee</td>
<td>July 2004</td>
<td>Dr. Kohatsu was researching this matter and no action will be taken until a new Medical Director is appointed.</td>
</tr>
</tbody>
</table>
| Outline a course of action for dealing with standards of practice for expert witnesses, including:  
  - Identification of issues and problems  
  - Optional solutions  
  - Potential course of action | Division of Medical Quality                | January 2004 |                                                                                                                                                   |
| Design and implement a physician recognition program focused on both individual and group recognition of those who improve access and fill gaps in the medical system | Physician Recognition Committee           | March 2003  | The Committee reviewed applications and made two selections, one individual and one medical group. Award for the one individual was given at the January meeting; the group will receive its award during the May 2004 meeting. |
**COMPLETION MEASUREMENTS**

Regulations and Enforcement

**GOAL:** Protect the public by (1) preventing violations and (2) effectively enforcing laws and standards when violations occur

<table>
<thead>
<tr>
<th>Ongoing Responsibilities</th>
<th>Completion Status</th>
<th>Lead Responsibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monitor and implement SB 1950 (Complaint Disclosure)</td>
<td>Project to develop regulations are in process. New Web Profiles were operational on April 24, 2003. Staff is working on regulations.</td>
<td>Public Education Committee/Division of Licensing/Enforcement Committee</td>
</tr>
<tr>
<td>Assess status of allied professional certification and explore capacity and options</td>
<td>• Under discussion as it relates to resource management and Board priorities.</td>
<td>Enforcement Committee/Division of Licensing</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Lead</th>
<th>Target Date</th>
<th>Completion Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appoint an Enforcement Monitor</td>
<td>Enforcement Committee</td>
<td>March 2003</td>
<td>Enforcement and Diversion Program staff has been working closely with the Enforcement Monitor to ensure the appropriate information is provided to assist with the evaluation.</td>
</tr>
<tr>
<td>Assemble data for Board discussion to determine validity of issues, correct any differential practices and communicate results to the public and licensees</td>
<td>Enforcement Committee (data collection) Public Education Committee (communication)</td>
<td>November 2002</td>
<td>Data will be available after physician surveys are gathered and are entered into the data systems. Appropriate data will be included in physician profiles, and overall statistical data will be published.</td>
</tr>
<tr>
<td>Reform the enforcement program to expedite reviews and investigation and to improve the quality and consistency of expert reviews and legal rulings.</td>
<td>Enforcement Committee</td>
<td>November 2003</td>
<td>Enforcement Committee continues to meet.</td>
</tr>
</tbody>
</table>
## COMPLETION MEASUREMENTS

<table>
<thead>
<tr>
<th>Task</th>
<th>Responsible Committee</th>
<th>Date</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Complete and implement revision of the Disciplinary Guidelines to improve timeliness, quality and uniformity of discipline</td>
<td>Division of Medical Quality</td>
<td>November 2003</td>
<td>Scheduled for discussion and vote at May 9, 2003 DMQ meeting.</td>
</tr>
<tr>
<td>Explore establishing an early warning system to provide for early identification of problem physicians through monitoring, technology and partnerships for inspection</td>
<td>Enforcement Committee</td>
<td>November 2003</td>
<td></td>
</tr>
<tr>
<td>Examine, assess and monitor the Diversion Program and determine potential new options including location of program administration to ensure confidentiality and confidence in the system</td>
<td>Diversion Committee</td>
<td>January 2004</td>
<td>The Enforcement Monitor has begun the appropriate data gathering required to perform an assessment of the Diversion Program.</td>
</tr>
<tr>
<td>Consider new potential legislation on complaint disclosure to augment SB 1950 and fill gaps</td>
<td>Executive Committee</td>
<td>January 2004</td>
<td></td>
</tr>
</tbody>
</table>
### COMPLETION MEASUREMENTS

#### Consumer Education

**GOAL:** Increase public awareness MBC mission, activities and services

#### Ongoing Responsibilities

<table>
<thead>
<tr>
<th>Ongoing Responsibilities</th>
<th>Completion Status</th>
<th>Lead</th>
</tr>
</thead>
<tbody>
<tr>
<td>Expand the use of the Web site to communicate with consumers and licensees</td>
<td><em>Continuously being improved New Profiles are now in Use. Staff “User Group” meets regularly to reassess user issues and problems.</em></td>
<td>Public Education Committee</td>
</tr>
<tr>
<td>Use existing communication channels to improve legally mandated reporting and outreach on MBC programs and improvements</td>
<td>Committee has proactively sought the involvement of Coroners, court reporters, malpractice insurers, hospitals &amp; the media in their quarterly meetings.</td>
<td>Public Education Committee</td>
</tr>
<tr>
<td>Utilize the Board as a speakers’ bureau to communicate MBC initiatives to constituencies</td>
<td>Speaker's Bureau is in planning stages.</td>
<td>Public Education Committee</td>
</tr>
<tr>
<td>Use medical consultants as a communications tool for MBC initiatives and programs</td>
<td>Will be incorporated into the Speaker's Bureau.</td>
<td>Public Education Committee</td>
</tr>
</tbody>
</table>

#### Objectives

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Lead</th>
<th>Target Date</th>
<th>Completion Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>CE1</td>
<td>Public Education Committee</td>
<td>May 2003</td>
<td>Plan is completed and was adopted by the Board on May 10, 2003, keeping in mind the present budgetary restraints.</td>
</tr>
</tbody>
</table>
COMPLETION MEASUREMENTS

Organizational Relationships
GOAL: Improve effectiveness of relationships with related organizations to further MBC mission and goals

<table>
<thead>
<tr>
<th>Ongoing Responsibilities</th>
<th>Completion Status</th>
<th>Lead Responsibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work with collateral organizations to advocate improved access to quality care for all Californians</td>
<td>Working with a variety of organizations on legislation.</td>
<td>Executive Committee</td>
</tr>
<tr>
<td>Pursue open communications with related organizations such as the California Medical Association (CMA) and the Center for Public Interest Law (CPIL), including a common language, common understanding of issues and joint legislative strategies</td>
<td>Working with a variety of organizations on legislation.</td>
<td>Executive Committee/ Public Education Committee</td>
</tr>
<tr>
<td>Align relationship-building activities with communication plan priorities</td>
<td>Communication Plan completed, and was adopted on May 10, 2003 by the full Board.</td>
<td>Public Education Committee</td>
</tr>
</tbody>
</table>

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<tbody>
<tr>
<td>OR1 Identify collateral organizations and strengthen relationships, including the following: CMA, CPIL, the Healthcare Association (HCA), the Office of Administrative Hearings and Hearing Officers (OAH) and the Department of Consumer Affairs (DCA)</td>
<td>Executive Committee</td>
<td>June 2003</td>
<td>Board President and Executive Director have met with CMA and various media to improve communications with the various organizations.</td>
</tr>
<tr>
<td>OR2 Develop a position paper on the crisis in access to medical care, outlining issues and potential courses of action</td>
<td>Executive Committee</td>
<td>June 2003</td>
<td>The Indigent Care Committee was established and they will be exploring the issues.</td>
</tr>
<tr>
<td>OR3 Identify creative approaches to access to care, and will develop a recommendation for action and follow-up by the Board.</td>
<td>Executive Committee</td>
<td>January 2005</td>
<td>Indigent Care Committee has been established to Explore and identify issues and develop recommendations for remedies.</td>
</tr>
</tbody>
</table>
COMPLETION MEASUREMENTS

Organizational Effectiveness
GOAL: Enhance organizational effectiveness and systems to improve service to constituents

<table>
<thead>
<tr>
<th>Ongoing Responsibilities</th>
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<th>Lead Responsibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide the Board with a financial overview of source and use of funds and methods for leveraging resources</td>
<td>Staff working With Board officers, Department of Consumer Affairs, and Dept. of Finance.</td>
<td>Staff</td>
</tr>
<tr>
<td>Work with other organizations to accomplish the MBC agenda</td>
<td>The PEC is continuously working with others to Provide outreach &amp; cooperation. Staff is working with Numerous organizations on legislation.</td>
<td>Staff</td>
</tr>
</tbody>
</table>

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</tr>
</thead>
<tbody>
<tr>
<td>OE1</td>
<td>Set priorities based on MBC’s core mission to emphasize protection of the public</td>
<td>Executive Committee</td>
<td>June 2003/ Ongoing</td>
</tr>
<tr>
<td>OE2</td>
<td>Work with DCA and its departments to upgrade information technology systems to provide the level of sophistication needed to meet public information needs and manage licensing, enforcement and discipline</td>
<td>Staff</td>
<td>2007</td>
</tr>
<tr>
<td>OE3</td>
<td>Address potential business system improvements to meet consumer information and system management needs in the interim</td>
<td>Staff</td>
<td>April 2003</td>
</tr>
<tr>
<td>OE4</td>
<td>Review investigative staff compensation and align with market conditions</td>
<td>Executive Committee</td>
<td>June 2003</td>
</tr>
</tbody>
</table>