Enforcement Program Central Complaint Unit Review Process



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Central Complaint Unit (CCU)



- Initial Review of Complaints
- Mandated Priorities
- Quality of Care Complaints
- Physician Conduct Complaints
- Medical Consultant Program
- Citation and Fine Program



Medical Board Priorities



- In 2003, Section 2220.05 was added to the Business and Professions Code, which establishes priorities for the Medical Board's investigative and prosecutorial resources as follows:
 - Gross negligence, incompetence, or repeated negligent acts that involve death or serious bodily injury to one or more patients;
 - Drug or alcohol abuse by a physician involving death or serious hodily injury to a patient;

Medical Board Priorities



- Repeated acts of clearly excessive prescribing of controlled substances, or repeated acts of prescribing or dispensing of controlled substances without a good faith prior exam or a medical reason;
- Repeated acts of clearly excessive recommending of cannabis to patients for medical purposes, or repeated acts of recommending cannabis to patients for medical purposes without a good faith prior exam or a medical reason; (added January 2016)

Medical Board Priorities



- Sexual misconduct with one or more patients during a course of treatment or an examination;
- Practicing medicine while under the influence of drugs or alcohol; and

 Repeated acts of clearly excessive prescribing, furnishing, or administering psychotropic medications to a minor

without a good faith prior examination of the patient and medical reason (added January 2017).



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Overview

Complaint Received from:

- •General Public
- Mandatory Reporting (e.g., malpractice insurance carriers, courts, coroner, peer review committees)

Entered into the Complaint Tracking System (Breeze)

- Acknowledgement Letter Sent
- •Referred if individual not licensed by the Board
- Type of Complaint/Priority
- Complaint File Referred to Analyst for Review

Analyst Reviews to Determine:

- Board Jurisdiction
- Incident Within Statute of Limitations

Refer to Appropriate Agency

(e.g., Osteopathic Medical Board, Nursing Board, Managed Healthcare, Healthcare Services

Quality of Care Issues

- Request Medical Release
- •Obtain patient records and
- Physician summary of treatment

Urgent/High Priority

- Sexual Misconduct
- Physician Impairment
- Unlicensed Practice
- •Hospital Discipline (805)

Refer to Investigation

Medical Review to determine if treatment within standard of practice. Recommends either:

- •Close No Violation (care within standard)
- •Close Insufficient Evidence (simple departure from the standard)
- •Refer to Investigation (possible extreme departure from the standard)

Technical Violations (e.g., Failure to Release Medical Records, False/Misleading Advertising, Patient Abandonment, Fraud)

- •Request Physician Response and
- Related Documentation

Refer to Manager to determine complaint disposition:

- •Close No Violation
- Close Insufficient Evidence or Compliance Obtained
- •Refer to Cite/Fine
- •Refer to Investigation







MEDICAL BOARD OF CALIFORNIA CONSUMER COMPLAINT FORM Please Print or Type

	PERSON RE	GISTERING THE	COMPLAINT	
OMr.OMs.				
Name: (Last Name)				
(Last Name)			(First Name)	(Middle Initial)
Mailing Address:				
_	(City)		c	State) (Zip Code)
Phone Number:			E-mail:	
○ _{Mr.} ○ _{Ms.}	(Daytime Number)	(Evening Number)		
Patient Name:	ast Name)		(First Name)	(Middle Initial)
Patient Date of Birth	:	Your Relati	onship to Patient:	
Signature:			Date:	
	NAT	TURE OF COMPL	AINT	
Please check the bo	x which best describes t	he nature of your cor	nplaint and provide de	tails on the next page.
Substandar	d Care (e.g., Misdiagnosi	s, Negligent Treatmen	t, Delay in Treatment, et	e.)
Prescribing prescribing,	Issues (e.g., excessive/un Internet)		Inlicensed Provider or Inlicensed practice	Aiding/Abetting
Sexual Misconduct Physician/Provider Impairment (e.g., Drug, Alcohol, Mental, Physical)				
Unprofessio	nal Conduct			

- Complaint is received from:
 - Public (patient, patient's family, friend, etc.)
 - Mandated Report
 - Licensee
 - Government AgencyAnonymous/Miscellaneous



Triageallegations



 Contact patient (or designee) for authorization to obtain records





- Contact physician for treatment summary and medical records (B&P 2220.08)
- Medical consultant review (upfront expert)

Medical Consultant Program



Pursuant to Business and Professions Code Section 2220.08:

(a) Except for reports received by the board pursuant to Section 805 that may be treated as complaints by the board and new complaints relating to a physician who is the subject of a pending accusation or investigation or who is on probation, any complaint determined to involve quality of care, before referral to a field office for further investigation, shall be reviewed by one or more medical experts with the pertinent education, training, and expertise to evaluate the specific standard of care issues raised by the complaint to r field investigation is required.

Medical Consultant Program



- Selection criteria used by CCU to approve applications for Medical Reviewers:
 - Current valid license
 - Active practice or retired within last three years
 - Specialty certification
 - No record of complaints on file with the Board and no medical malpractice cases
 - ther comparable experience desired



- Possible CCU Outcomes
 - Close case
 - Refer for formal investigation
 - Issue a citation and fine

Citation and Fine Program



Pursuant to Business and Professions Code Section 125.9:

(a) Except with respect to persons regulated under Chapter 11 (commencing with Section 7500), any board, bureau, or commission within the department, the board created by the Chiropractic Initiative Act, and the Osteopathic Medical Board of California, may establish, by regulation, a system for the issuance to a licensee of a citation which may contain an order of abatement or an order to pay an administrative fine assessed by the board, bureau, or commission where the licensee is in violation of the applicable licensing act or any regulation adopted pursuant thereto.

Citation and Fine Program



- (b) The system shall contain the following provisions:
- (1) Citations shall be in writing and shall describe with particularity the nature of the violation, including specific reference to the provision of law determined to have been violated.
- (2) Whenever appropriate, the citation shall contain an order of abatement fixing a reasonable time for abatement of the violation.

Complaint Statistics



Complaint Statistics for Fiscal Year 2015-16

	Complaints received	8,679
•	Complaints closed by CCU	9,001
•	Complaints referred to investigation	1,654
	Citations and Fines Issued	55

Average number of days to review complaints in CCU

146 days

