MEDICAL BOARD STAFF REPORT

DATE REPORT ISSUED: July 11, 2017

ATTENTION: Members, Medical Board of California

SUBJECT: Enforcement Program Summary
STAFF CONTACT: Christina Delp, Chief of Enforcement

Requested Action:

This report is intended to provide the Members with an update on the Enforcement Program at the Medical Board of California (Board). No action is needed at this time.

Expert Reviewer Program:

There are currently 1,131 active experts in the Board's expert database. 196 experts were utilized to review 368 cases from January 1, 2016 through June 30, 2017. **Attachment A** provides the Expert Reviewer Program statistics. Additional experts are needed in the following specialties:

- Allergy and Immunology
- Addiction Medicine with additional certification in Family or Internal Medicine, or Psychiatry
- Colon and Rectal Surgery
- Dermatology
- Family Medicine
- Gastroenterology
- Neurological Surgery
- Neurology
- Pain Medicine
- Pathology
- Pediatric Cardiac Surgery
- Pediatric Gastroenterology
- Pediatric Pulmonology
- Pediatric Surgery
- Plastic Surgeons
- Psychiatry (general, forensic, and addiction)
- Urology
- Vascular Surgery

Staff is actively recruiting experts to attend one of two expert reviewer training sessions scheduled for fall. Training will be held in Sacramento on September 28, 2017 and in Sylmar on November 2, 2017.

Central Complaint Unit:

Due to an increase in the number of complaints received and one remaining vacancy, the Central Complaint Unit (CCU) had an increase in the average number of days to initiate a complaint for the full fourth quarter of fiscal year (FY) 2016/2017. However, with the addition of one new intake staff person, the average number of days to initiate a complaint in the month of June was nine, which is within the timeframe mandated to open a complaint pursuant to Business and Professions Code section 129(b). In addition, the overall average for all of FY 2016/2017 decreased by four days, down to 11 days, from 15 days in FY 2015/2016.

CCU analysts continued to be successful in their effort to reduce the complaint process aging of all case types. The average time to process a complaint in the CCU at the end of FY 2016/2017 was 122 days, compared to 146 days at the end of FY 2015/2016, a decrease of 24 days.

Both CCU Management Services Technician (MST) vacancies mentioned in the previous Enforcement Summary have been filled. One MST began employment at the end of April and the second MST reported to work on July 3, 2017. CCU management is currently in the process of filling four vacancies, two Associate Governmental Program Analyst (AGPA) positions resulting from staff departures and two Staff Services Analyst (SSA) positions allocated through the Budget Change Proposal process. All positions have been advertised and interviews are expected to take place in July.

One important note regarding the CCU and the Board is that it received 9,862 complaints in FY 2016/2017, an increase of 977 complaints, compared to FY 2015/2016.

Discipline Coordination Unit:

The Discipline Coordination Unit held interviews in April for two vacant SSA vacancies. One candidate was selected and began employment in May. The other vacancy was recently re-advertised and interviews to fill this vacancy will be held in August.

Complaint Investigation Office

The Complaint Investigation Office (CIO) non-sworn Special Investigators continue to monitor a case load of approximately 50 cases. Since the last Enforcement Summary provided at the April Board Meeting, CIO has closed 78 cases and has transmitted 12 cases to the Attorney General's Office – 5 Malpractice, 4 criminal /conviction cases, 3 Petitions for Reinstatement of licensure. The average number of day for CIO to complete an investigation is 258 days.

On March 1, 2017, staff from the Attorney General's Health Quality Enforcement Section provided training to CIO staff. The training will assist CIO staff with conducting thorough investigations against physicians alleged to have a mental or physical illness affecting competency and their ability to practice medicine safely.

Probation Unit:

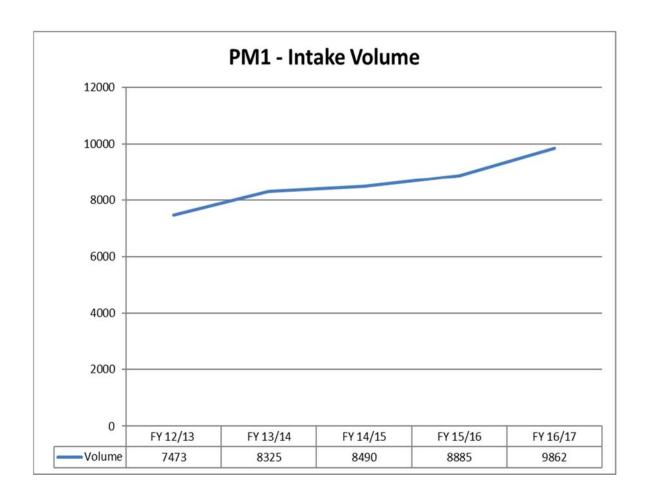
The Probation Unit filled one Inspector III (supervisory) position in the San Dimas field office. However, the Inspector III position at the Cerritos field office has been difficult to fill because few candidates have applied for the position. This position was recently re-advertised. Interviews were held in April to fill the vacant Limited-Term Inspector positions at the Cerritos and Tustin field offices. Candidates were selected and start dates are pending hiring clearances.

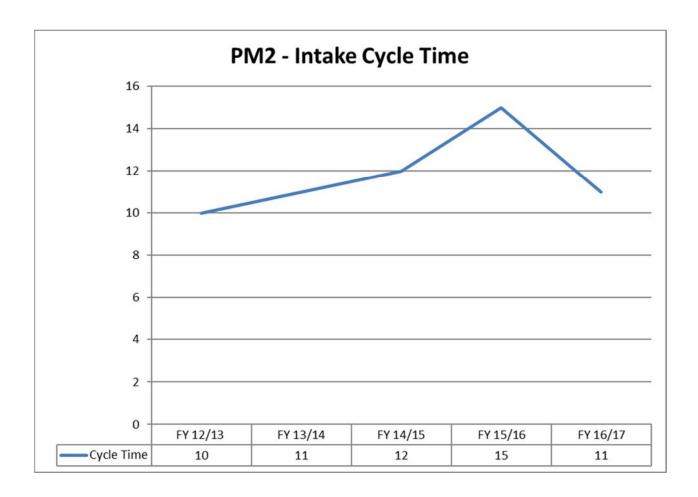
The vacant Inspector III position in the Sacramento field office was re-advertised and management anticipates interviews will occur in August 2017. Interviews were held in June to fill the vacant Inspector I position and management anticipates this candidate will begin employment in September pending hiring clearances.

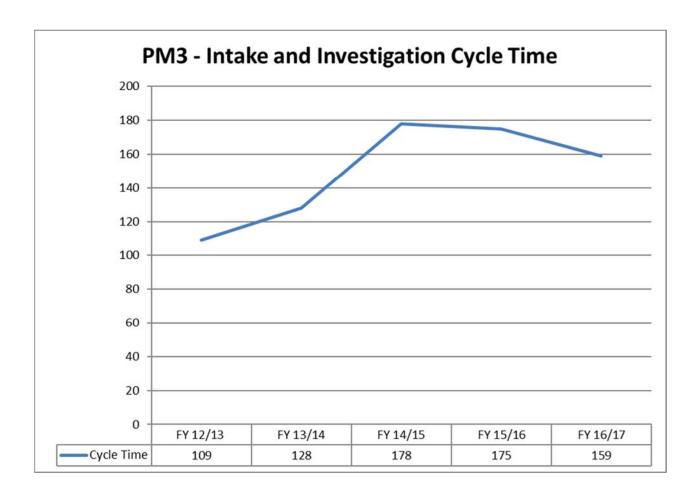
Enforcement Performance Measures

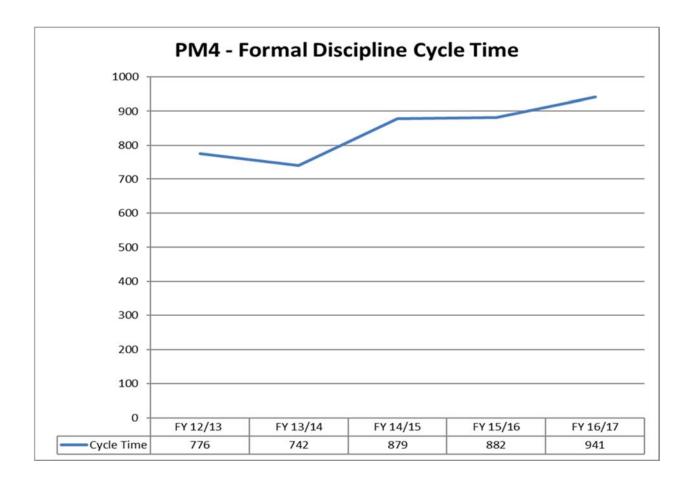
The charts below depict workload statistics regarding the number of complaints received (PM1, which includes complaints and arrest notifications), the average number of days to initiate a complaint and assign it to an analyst (PM2), the average number of days it takes to complete a case that has not been transmitted to the Attorney General for disciplinary action (PM3), and the average number of days it takes to complete

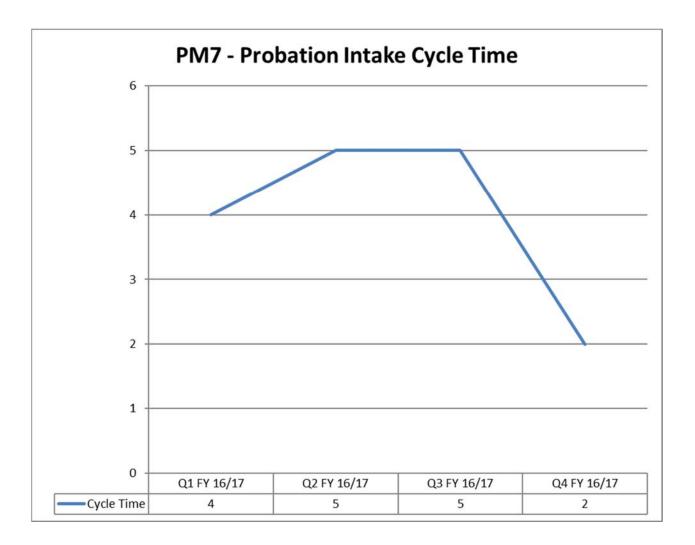
a case that has been transmitted to the Attorney General for disciplinary action (PM4). PM7 captures the average number of days from when a Probation Inspector is assigned a case to when the Inspector makes the initial telephone call to the probationer to set up the face-to-face intake interview. PM8 captures the average number of days from when a Probation Inspector confirms/supports with evidence that a violation of a term and condition of probation may have occurred to when management has provided approval for appropriate action to be taken for the violation of probation. Since PM7 and PM8 were implemented in July 2016, the charts only depict statistics for the fiscal year 2016/2017.

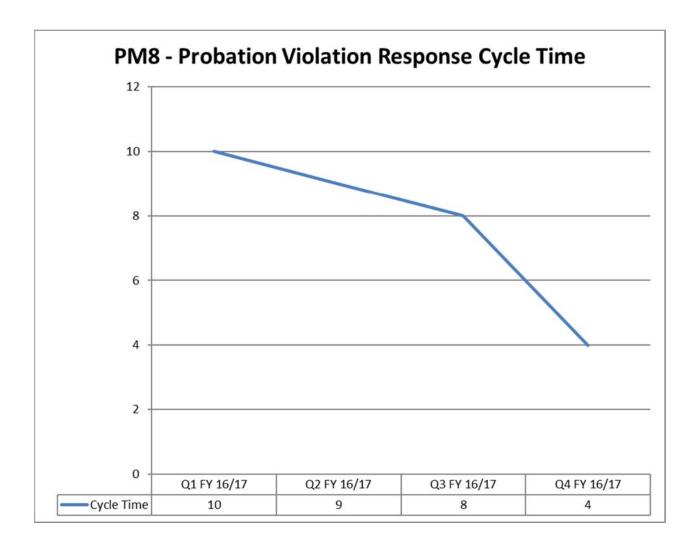












1 OFF LIST EXPERT REVIEWED 1 CASE

7 EXPERTS

3 LIST EXPERTS REVIEWED 1 CASE EACH

3 LIST EXPERTS REVIEWED 2 CASES EACH 1 LIST EXPERT REVIEWED 5 CASES

26 EXPERTS
10 LIST EXPERTS REVIEWED 1 CASE EACH

5 LIST EXPERTS REVIEWED 2 CASES EACH
7 LIST EXPERTS REVIEWED 3 CASES EACH
1 LIST EXPERT REVIEWED 4 CASES
1 LIST EXPERT REVIEWED 5 CASES*
1 LIST EXPERT REVIEWED 6 CASES*

1 LIST EXPERT REVIEWED 15 CASES*

22 EXPERTS
12 LIST EXPERTS REVIEWED 1 CASE EACH

7 LIST EXPERTS REVIEWED 2 CASES EACH 2 LIST EXPERTS REVIEWED 3 CASES EACH 1 LIST EXPERT REVIEWED 4 CASES

1 LIST EXPERT REVIEWED 1 CASE 2 LIST EXPERTS REVIEWED 2 CASES EACH

Attachment A

9

50 ↑

62

12

14

154 ↓

Medical Board of California Expert Reviewer Program Report

June 30, 2017

SPECIALTY	Number of cases reviewed by Experts January 1 through June 30, 2017	Number of Experts and how often utilized from January 1 through June 30, 2017	Active List Experts 1,131 ↑
ADDICTION	2	2 EXPERTS 2 LIST EXPERTS REVIEWED 1 CASE EACH	10↑
ALLERGY & IMMUNOLOGY (A&I)			3
ANESTHESIOLOGY (Anes)	7	6 EXPERTS 4 LIST EXPERTS REVIEWED 1 CASE EACH 2 LIST EXPERTS REVIEWED 2 CASES EACH	76↓
COLON & RECTAL SURGERY (CRS)			3
COMPLEMENTARY/ALTERNATIVE MEDICINE			17
DERMATOLOGY (D)	6	4 EXPERTS	

13

67

36

EMERGENCY (EM)

FAMILY (FM)

HAND SURGERY

*Flagged as unavailable to review new cases without

prior approval from the enforcement chief.

HOSPICE & PALLIATIVE MEDICINE

INTERNAL (General Internal Med)

Medical Board of California Expert Reviewer Program Report

SPECIALTY	Number of cases reviewed by Experts	Number of Experts and how often utilized from January 1 through June 30, 2017	Active List Experts
	January 1 through June 30, 2017		1,131 ↑

		4 EVDEDTS	
Cardiovascular Disease (Cv)	4	4 EXPERTS 4 LIST EXPERTS REVIEWED 1 CASE EACH	33 ↑
Endocrinology, Diabetes and Metabolism (EDM)			4 ↓
Gastroenterology (Ge) *Flagged as unavailable to review new cases without prior approval from the enforcement chief.	9	3 EXPERTS 1 LIST EXPERT REVIEWED 1 CASE 1 LIST EXPERT REVIEWED 3 CASES 1 LIST EXPERT REVIEWED 5 CASES*	19↑
Infectious Disease (Inf)			9↑
Medical Oncology (Onc)			11
Nephrology (Nep)	1	1 EXPERT 1 LIST EXPERT	12
Pulmonary Disease (Pul)			13 ↓
Rheumatology (Rhu)	1	1 EXPERT	7 ↑
MIDWIFE REVIEWER			7
NEUROLOGICAL SURGERY (NS)	6	3 EXPERTS 2 LIST EXPERTS REVIEWED 1 CASE EACH 1 LIST EXPERT REVIEWED 4 CASES	10
NEUROLOGY (N)	13	7 EXPERTS 3 LIST EXPERTS REVIEWED 1 CASE 3 LIST EXPERTS REVIEWED 2 CASES EA CH 1 LIST EXPERT REVIEWED 4 CASES	26↑
NEUROLOGY with Special Qualifications in Child Neurology (N/ChiN)			2
NUCLEAR MEDICINE (NuM)			3
Flagged as unavailable to review new cases without prior approval from the enforcement chief.	36	18 EXPERTS 8 LIST EXPERTS REVIEWED 1 CASE EACH 7 LIST EXPERTS REVIEWED 2 CASES EACH 2 LIST EXPERTS REVIEWED 4 CASES EACH 1 LIST EXPERT REVIEWED 7 CASES	83 ↑
OCCUPATIONAL MEDICINE	1	1 EXPERT	9↑

Medical Board of California Expert Reviewer Program Report

SPECIALTY	Number of cases reviewed by Experts January 1 through June 30, 2017	Number of Experts and how often utilized from January 1 through June 30, 2017	Active List Experts 1,131 ↑
OPHTHALMOLOGY (Oph)	3	3 EXPERTS 3 LIST EXPERTS REVIEWED 1 CASE EACH	25 ↓
ORTHOPAEDIC SURGERY (OrS)	17	12 EXPERTS 1 OFF LIST EXPERT REVIEWED 1 CASE 6 LIST EXPERTS REVIEWED 1 CASE EACH 4 LIST EXPERTS REVIEWED 2 CASES EACH 1 LIST EXPERT REVIEWED 4 CASES	32↑
OTOLARYNGOLOGY (Oto)	1	1 EXPERT	21 ↑
PAIN MEDICINE (PM)	15	10 EXPERTS 6 LIST EXPERTS REVIEWED 1 CASE EACH 2 LIST EXPERTS REVIEWED 2 CASES EACH 2 LIST EXPERTS REVIEWED 3 CASES EACH	25 ↑
PATHOLOGY (Path)	1	1 EXPERT 1 LIST EXPERT	12
PEDIATRICS (Ped)	3	1 EXPERT 1 LIST EXPERT	51 ↑
PHYSICAL MEDICINE & REHABILITATION (PMR)	1	1 EXPERT	9 ↓
PLASTIC SURGERY (PIS) *Flagged as unavailable to review new cases without prior approval from the enforcement chief.	22	10 EXPERTS 5 LIST EXPERTS REVIEWED 1 CASE EACH 1 LIST EXPERT REVIEWED 2 CASES 3 LIST EXPERTS REVIEWED 3 CASES EACH 1 LIST EXPERT REVIEWED 6 CASES*	50↑

Medical Board of California Expert Reviewer Program Report

SPECIALTY	Number of cases reviewed by Experts	Number of Experts and how often utilized from January 1 through June 30, 2017	Active List Experts
	January 1 through June 30, 2017	30, 2017	1,131 ↑

PSYCHIATRY (Psyc)		35 EXPERTS	77 ↑
		19 LIST EXPERTS REVIEWED/EVALUATED 1 CASE EACH	,, ,
	87	2 LIST EXPERTS EVALUATED 2 CASES EACH	
		7 LIST EXPERTS REVIEWED 3 CASES EACH	
		4 LIST EXPERTS REVIEWED/EVALUATED 4 CASES EACH	
		1 LIST EXPERT EVALUATED 7 CASES	
		1 LIST EXPERT REVIEWED/EVALUATED 9	
*Flagged as unavailable to review new cases without		CASES (2 CASE REVIEWS, 3 PREP AND TESTIMONIES, AND 4 EVALUATIONS)	
prior approval from the enforcement chief.		1 LIST EXPERT REVIEWED/EVALUATED 14	
		CASES (5 CASE REVIEWS* AND 9	
		EVALUATIONS)	
RADIOLOGY (Rad)		5 EXPERTS	33
TOTOLOGT (Rad)	6	4 LIST EXPERTS REVIEWED 1 CASE EACH	33
	-	1 LIST EXPERT REVIEWED 2 CASES	
SLEEP MEDICINE (S)			0
· /		9 EXPERTS	8
SURGERY (S)			39 ↑
	11	7 LIST EXPERTS REVIEWED 1 CASE EACH 1 LIST EXPERT REVIEWED 2 CASES	
1 CASE REVIEWED BY 2 EXPERTS		1 LIST EXPERT REVIEWED 2 CASES 1 LIST EXPERT REVIEWED 3 CASES	
		I LIST EAFERT REVIEWED 5 CASES	
Pediatric Surgery (PdS)			2
, , , , , , , , , , , , , , , , , , ,			2
THORACIC SURGERY (TS)		1 EXPERT	12
THORACIC SURGERT (13)	2	1 LIST EXPERT REVIEWED 2 CASES	12
Pediatric Cardiothoracic Surgery			0
rediatile Cardiothoracie Surgery			U
(MEDICAL) TOXICOLOGY			6
UROLOGY (U)		5 EXPERTS	17 ↑
	10	3 LIST EXPERTS REVIEWED 1 CASE EACH	· I
		1 LIST EXPERT REVIEWED 3 CASES	
		1 LIST EXPERT REVIEWED 4 CASES	
VASCULAR SURGERY (VascS)	4	3 EXPERTS	7
(rases)		2 LIST EXPERTS REVIEWED 1 CASE EACH	
		1 LIST EXPERT REVIEWED 2 CASES	

Medical Board of California Expert Reviewer Program Report

SPECIALTY	Number of cases reviewed by Experts	Number of Experts and how often utilized from January 1 through June 30, 2017	Active List Experts
	January 1 through June 30, 2017		1,131 ↑

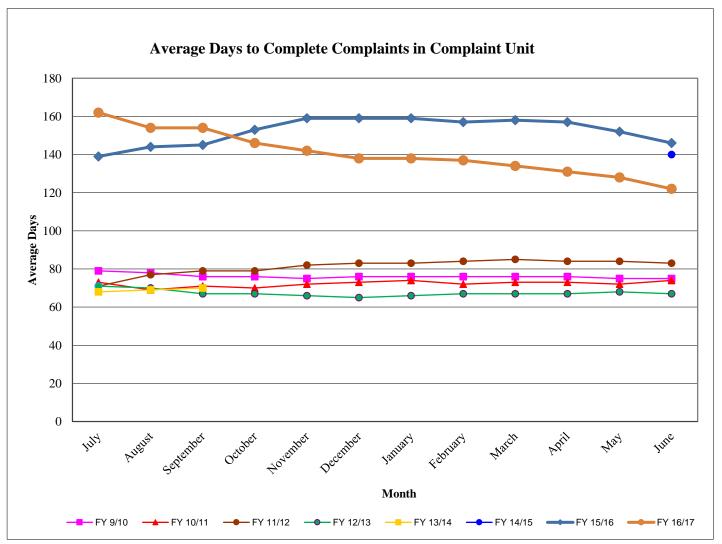
TOTAL CASES REVIEWED (January 1 through June 30, 2017)	368
TOTAL EXPERTS UTILIZED (January 1 through June 30, 2017)	196
TOTAL LIST EXPERTS	1,131

^{↓↑} Numbers fluctuate based on availability of experts, new experts added and experts removed from active status.

Medical Board of California Enforcement Program Average Days to Complete Complaint in Complaint Unit

Fiscal	Vear
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Month	FY 9/10	FY 10/11	FY 11/12	FY 12/13	FY 13/14	FY 14/15	FY 15/16	FY 16/17
July	79	73	71	71	68		139	162
August	78	69	77	70	69		144	154
September	76	71	79	67	70		145	154
October	76	70	79	67			153	146
November	75	72	82	66			159	142
December	76	73	83	65			159	138
January	76	74	83	66			159	138
February	76	72	84	67			157	137
March	76	73	85	67			158	134
April	76	73	84	67			157	131
May	75	72	84	68			152	128
June	75	74	83	67		140	146	122

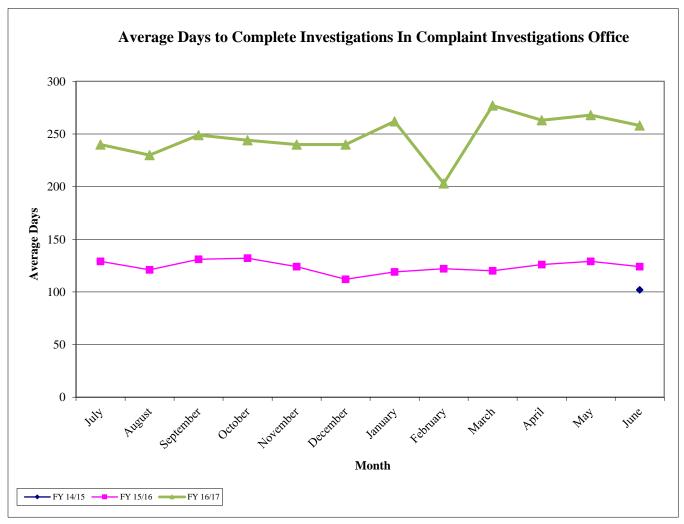


Average Days to Complete Complaints in Complaint Unit includes complaints resolved by Complaint Unit and Complaint Unit processing days for cases completed at field investigation.

Medical Board of California Enforcement Program Average Days to Complete Investigations in Complaint Investigations Office

Fiscal Year

FY 14/15	FY 15/16	FY 16/17
	129	240
	121	230
	131	249
	132	244
	124	240
	112	240
	119	262
	122	203
	120	277
	126	263
	129	268
102	124	258
		121 131 132 124 112 119 122 120 126 129

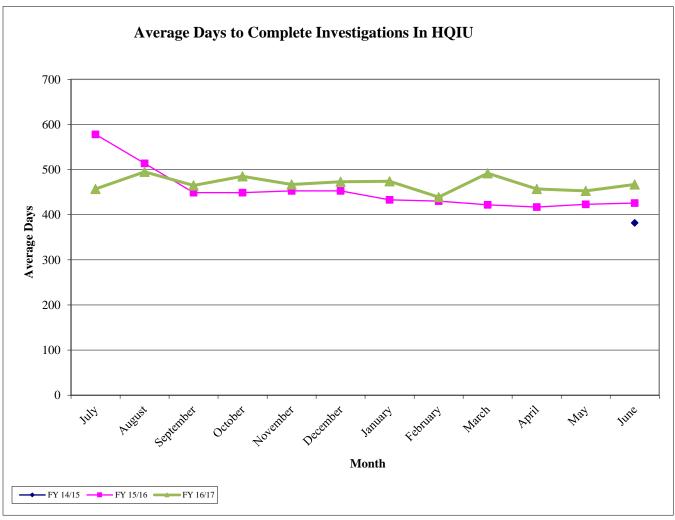


Investigation processing days are from the date case was assigned to Complaint Investigation Office (CIO) Investigator by Complaint Unit until closure or referral (does not include Complaint Unit processing days for complaints completed at CIO).

Medical Board of California Enforcement Program Average Days to Complete Investigations in HQIU

Fiscal Year

Month	FY 14/15	FY 15/16	FY 16/17
July	_	578	457
August		514	495
September		449	465
October		449	485
November		453	467
December		453	473
January		433	474
February		430	439
March		422	492
April		417	457
May		423	453
June	382	426	467

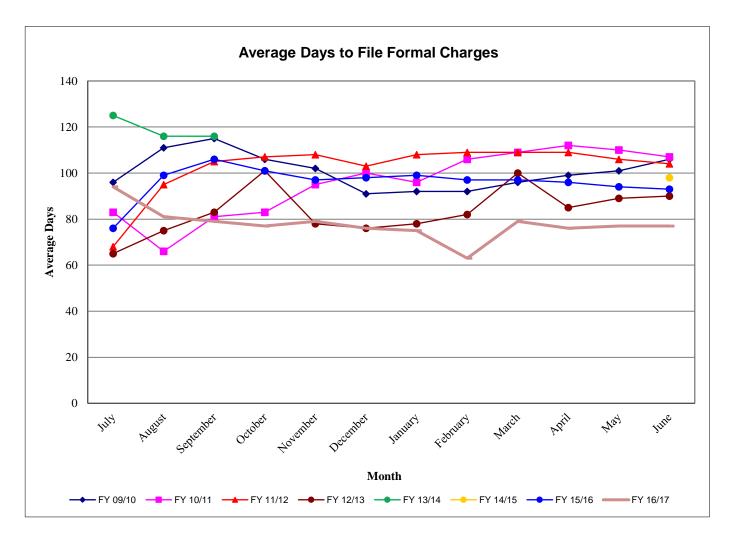


Investigation processing days are from the date case was assigned to HQIU investigator by Complaint Unit until closure or referral (does not include Complaint Unit processing days for complaints completed at HQIU).

Medical Board of California Enforcement Program Average Days to File Administrative Charges Prepared by the Office of the Attorney General

Fiscal Year

Month	FY 09/10	FY 10/11	FY 11/12	FY 12/13	FY 13/14	FY 14/15	FY 15/16	FY 16/17
July	96	83	68	65	125		76	94
August	111	66	95	75	116		99	81
September	115	81	105	83	116		106	79
October	106	83	107	101			101	77
November	102	95	108	78			97	79
December	91	100	103	76			98	76
January	92	96	108	78			99	75
February	92	106	109	82			97	63
March	96	109	109	100			97	79
April	99	112	109	85			96	76
May	101	110	106	89			94	77
June	106	107	104	90		98	93	77

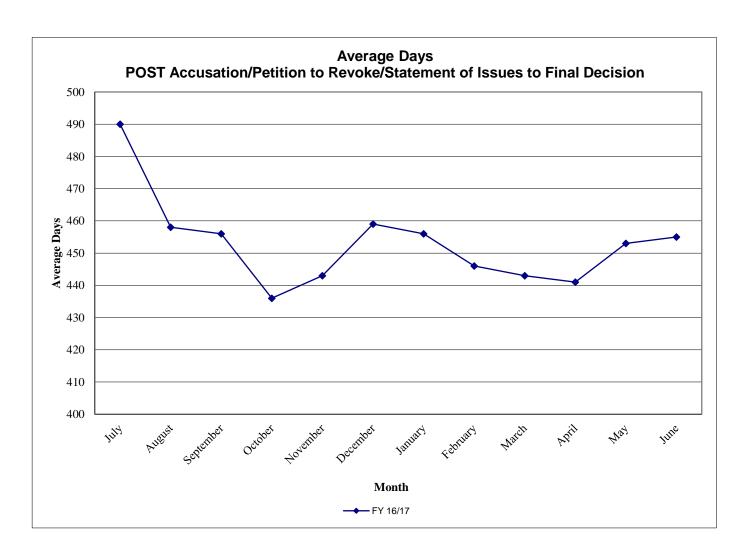


Average Days to File Formal Charges are the days from the date the case is referred to the AG's Office until formal charges are filed.

Medical Board of California Enforcement Program Agenda Item 20B Average Days POST Accusation/Petition to Revoke/Statement of Issues to Final Decision

Fiscal Year

Month	FY 16/17
July	490
August	458
September	456
October	436
November	443
December	459
January	456
February	446
March	443
April	441
May	453
June	455



Average Days from Accusation, Petition to Revoke or Statement of Issues filed to final decision.

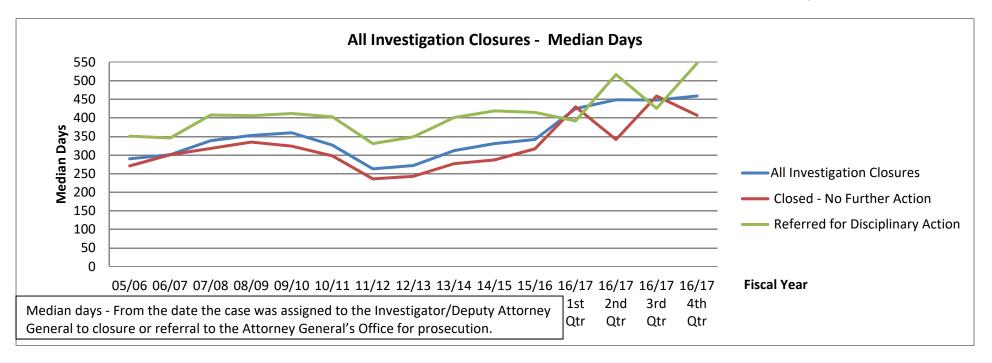
ENFORCEMENT TIMEFRAMES

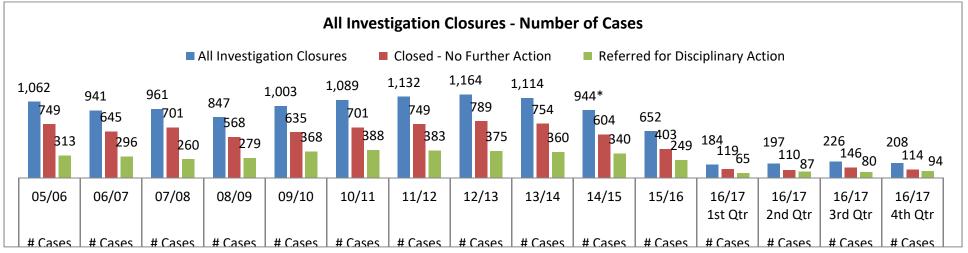
FISCAL YEARS	2008	- 2009	2009	- 2010	2010 -	2011	2011 -	2012	2012	- 2013	2013	- 2014	2014 -	2015 ¹	2015 - 2	2016 ¹	2016	- 2017
	AVERAGE	MEDIAN	AVERAGE	MEDIAN	AVERAGE	MEDIAN												
COMPLAINT PROCESSING	75	63	76	63	74	77	83	64	67	54	67	43	140	113	146	119	122	88
INVESTIGATION PROCESSING -																		
MBC-CIO													102	57	124	52	258	203
INVESTIGATION PROCESSING -																		
HQIU INVESTIGATION PROCESSING -													382	352	426	367	467	431
	240	200	220	202	242	202	264	225	260	245	245	205						
ALL	349	309	328	292	312	283	264	225	268	245	245	205						
TOTAL \$400 0 HOW																		
TOTAL MBC & HQIU																		
DAYS	424	372	404	355	386	360	347	289	335	299	312	248	228	150	230	155	141	104
YEARS	1.16	1.02	1.11	0.97	1.06	0.99	0.95	0.79	0.92	0.82	0.85	0.68	0.62	0.41	0.63	0.42	0.39	0.28
AG PREP FOR																		
ACC/PTR/ACC&PTR/SOI	103	63	106	66	107	72	104	78	90	75	110	86	98	68	93	67	77	62
POST ACCUSATION/PTR/SOI	381	311	368	312	417	324	396	350	435	366	443	402	459	392	453	378	455	368
ACCUSATION DECLINED BY AG													44	23	56	31	28	19
Accession becomes bring															30	31	20	
TOTAL AG																		
DAYS	484	374	474	378	524	396	500	428	525	441	553	488	473	413	479	393	473	328
		_	1.30	1.04			1.37	1.17				1.34				1.08	1.30	0.90
YEARS	1.33	1.02	1.30	1.04	1.44	1.08	1.37	1.17	1.44	1.21	1.52	1.34	1.30	1.13	1.31	1.08	1.30	0.90
TOTAL MBC & AG																		
DAYS	908	746	878	733	910	756	847	717	860	740	865	736	956	927	967	919	1034	1040
YEARS	2.49	2.04	2.41	2.01	2.49	2.07	2.32	1.96	2.36	2.03	2.37	2.02	2.62	2.54	2.65	2.52	2.83	2.85
· - · · · · -																		

Years calculated using 365 days per year

¹ "Total" Days prior to FY 14-15 were the averages per unit added together. Beginning in FY 14-15, reports were run that show true averages for the Total timeframes.

Vertical Enforcement/Prosecution Cases - Median Days



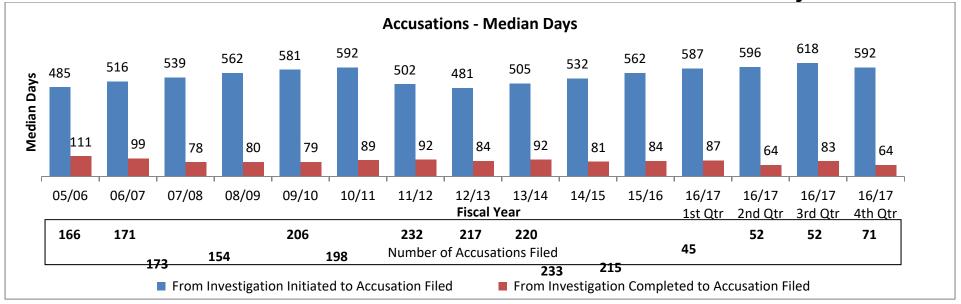


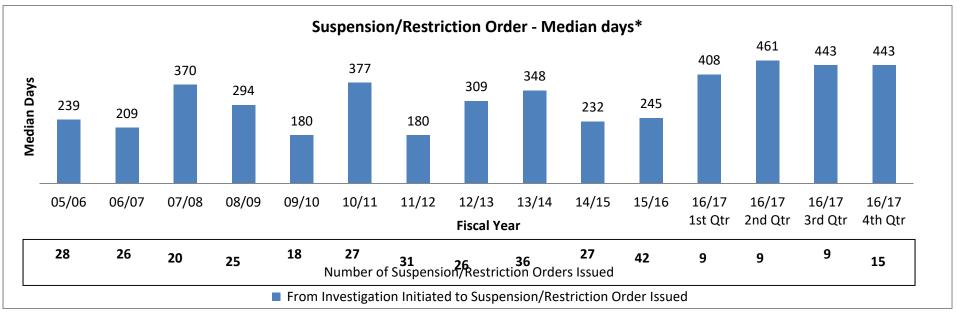
^{*} This decrease is due to the Board initiating, in July 2014, a complaint investigation office of non-sworn special investigators who began investigating cases that would have been sent to HQIU.

The graphs above exclude the following case types: out-of-state, headquarters, Operation Safe Medicine, probation violations, petitions for modification/termination of probation terms, and petitions for reinstatement. They also exclude all cases that were referred solely to the District/City Attorney for criminal action as they are not in VE/P.

Medical Board of California

Vertical Enforcement/Prosecution Cases - Median Days

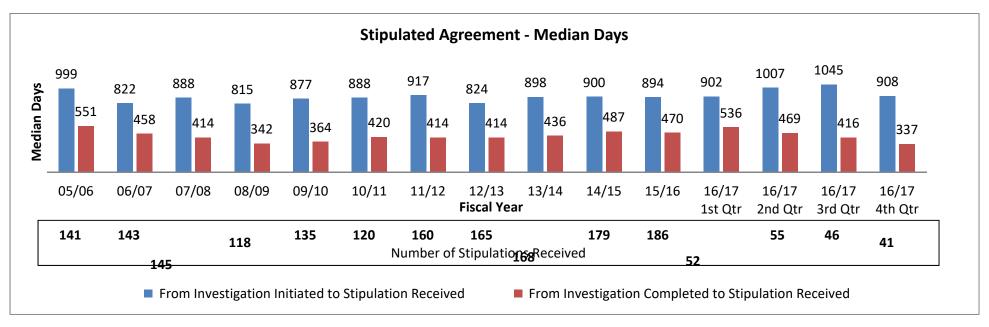


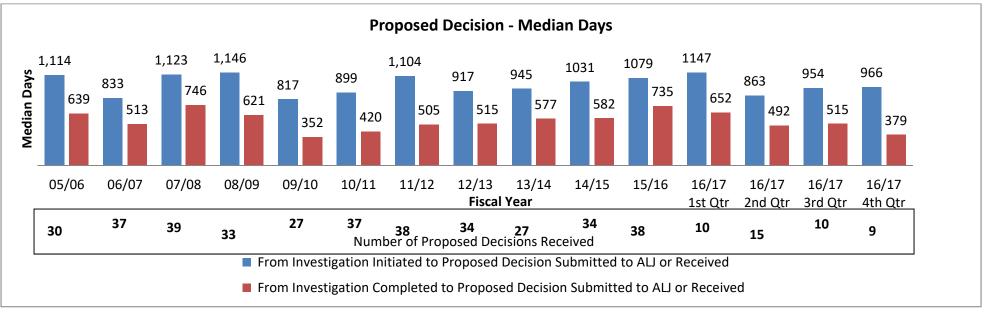


^{*} This data includes: interim suspension orders, Penal Code section 23 restrictions, stipulated agreements to restrictions/suspension, and temporary restraining orders. It does not include out-of-state suspension orders, automatic suspension orders, or orders to cease practice while on probation.

The graphs above exclude the following case types: out-of-state, headquarters, Operation Safe Medicine, probation violations, petitions for modification/termination of probation terms, and petitions for reinstatement. They also exclude all cases that were referred solely to the District/City Attorney for criminal action as they are not in VE/P.

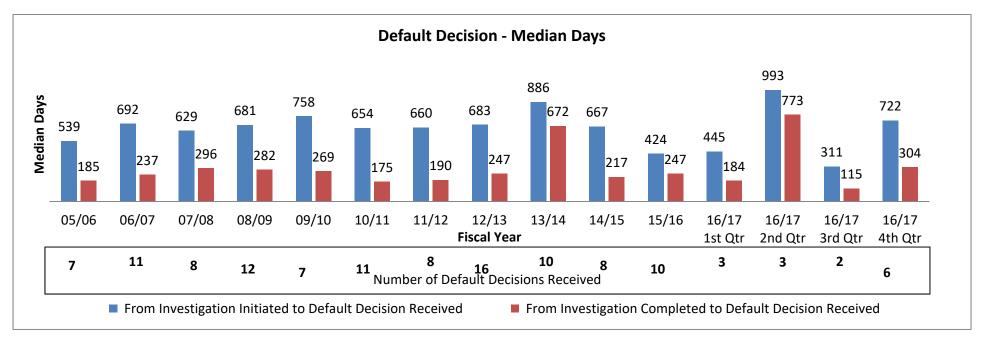
Vertical Enforcement/Prosecution Cases - Median Days





The graphs above exclude the following case types: out-of-state, headquarters, Operation Safe Medicine, probation violations, petitions for modification/termination of probation terms, and petitions for reinstatement. They also exclude all cases that were referred solely to the District/City Attorney for criminal action as they are not in VE/P.

Vertical Enforcement/Prosecution Cases - Median Days



The graph above exclude the following case types: out-of-state, headquarters, Operation Safe Medicine, probation violations, petitions for modification/termination of probation terms, and petitions for reinstatement. They also exclude all cases that were referred solely to the District/City Attorney for criminal action as they are not in VE/P.