

Medical Board of California
 Strategic Planning Session
 Creating Objectives

INSTRUCTIONS

Using the attached worksheets, determine potential Objectives for each goal area for the 2017 Strategic plan based on:

- a. Review of the 2017 Environmental Summary
- b. Items outlined in Sunset Review (if applicable)
- c. Experience and previously identified needs

GUIDELINES TO DEVELOPING OBJECTIVES

When developing objectives you should consider the SMART objectives method:

Specific	Details what needs to be done
Measurable	Success that can be measured
Action Oriented	Uses action words
Realistic	Possible to attain
Time based	Timeframe is clear

Use the following formula to develop objectives:

Action Verb	+	Issue/Goal	+	Benefit/Why
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- **Action** – action words give the objective movement. Avoid using words like maintain, or continue as effective statements should imply a beginning and an end. *See next page “Action Words” chart.*
- **Objective/issue** – It should be descriptive and written in plain language, avoiding jargon.
- **Benefit/Why** – Objective should be clear on the intent behind the action; why is the program spending resources on this? How will this propel the program forward? How does this support the program’s mission?

Below are examples of how to use the formula to develop objectives.

Action Verb	+	Issue or Goal	+	Benefit or Why
Create	+	an onboarding program	+	to ensure their successful transition to the Board.
Recruit and train	+	3 additional Subject Matter Experts	+	to reduce investigative cycle times.

SMART OBJECTIVE ACTION WORDS

All-Purpose		Investigative <i>Checking it out</i>		Consultative <i>Doing the research</i>	Communication <i>Sharing knowledge</i>
Adapt	Lead	Analyze	Interview	Address	Communicate
Administer	Perform	Anticipate	Investigate	Advise	Discuss
Adopt	Plan	Appraise	Locate	Benchmark	Disseminate
Combine	Promote	Assess	Measure	Coach	Introduce
Compare	Provide	Calculate	Monitor	Consult	Re-write
Decide	Raise	Conduct	Prioritize	Counsel	Write
Decrease	Recommend	Confirm	Quantify	Demonstrate	
Define	Revise	Determine	Re-	Guide	
Discontinue	Select	Divide	evaluate	Inform	
Enhance	Serve	Evaluate	Research	Mentor	
Expand	Simplify	Explore	Seek	Model	
Gather	Streamline	Find	Survey	Negotiate	
Help	Strengthen	Hypothesize	Validate	Resolve	
Increase	Supervise	Identify	Verify	Review	
Initiate	Use			Suggest	
	Utilize			Teach	
Generative <i>Making things happen</i>		Coordinative <i>Organize it</i>		Collaborative <i>Working with others</i>	
Acquire	Generate	Accelerate		Accommodate	Offer
Activate	Innovate	Arrange		Assist	Participation
Advance	Invent	Assimilate		Co-create	Partner with
Allocate	Launch	Clarify		Collaborate	Persuade
Assemble	Make	Condense		Compile	Recognize
Apply	Maximize	Connect		Contribute	Resolve
Automate	Modify	Coordinate		Educate	Share
Build	Organize	Decide		Encourage	Steer
Consolidate	Outline	Direct		Facilitate	Support
Construct	Prepare	Establish		Guide	Synthesize
Contract	Preserve	Facilitate		Help	Synchronize
Create	Produce	Fund		Leverage	Unite
Deliver	Propose	Harmonize		Mitigate	
Design	Publish	Implement			
Develop	Redesign	Include			
Devise	Re-engineer	Intervene			
Document	Require	Itemize			
Draft	Restructure	Lead			
Establish	Revise	Manage			
Execute	Simplify	Merge			
Extend	Start	Organize			
Formalize	Update	Pursue			
Formulate		Rank			
		Systematize			

Licensing		
<i>Protect consumers by setting requirements for licensure, including education, experience, and demonstrated competence, and efficiently issue licenses to individuals meeting those requirements.</i>		
Action	Issue or Goal	Benefit or Why

Outreach		
<i>Promote consumer protection through increasing public, licensee, and community partner awareness of the Board, its mission, activities, and services.</i>		
Action	Issue or Goal	Benefit or Why

<i>Legislation/Regulations</i>		
<i>Advocate for and sponsor legislation and adopt regulations, policies, and procedures that strengthen and support the Board’s mandate, mission, vision, and goals.</i>		
Action	Issue or Goal	Benefit or Why

Enforcement		
<i>Protect the health and safety of consumers by effectively investigating complaints, by enforcing the laws and regulations of the Medical Practice Act when violations occur, and by educating consumers on the laws and regulations governing safe practices in California.</i>		
Action	Issue or Goal	Benefit or Why

Administration		
<i>Protect the consumers of California by promoting organizational success through proper Board governance, effective leadership, and responsible management.</i>		
Action	Issue or Goal	Benefit or Why

2017 Environmental Scan Medical Board of California

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Introduction

One of the first steps in developing a strategic plan is to conduct a scan and analysis of the environment in which an organization operates. This analysis allows an organization to take a look at the factors that can impact its success. This is a summary of the results of the environmental scan recently conducted by SOLID for the Medical Board of California (Board) in October 2017.

The purpose of this environmental scan is to provide a better understanding of stakeholders, Board Members and Board staff thoughts about the Board's performance within the following categories:

- ◆ Enforcement
- ◆ Licensing
- ◆ Legislation and Regulation
- ◆ Outreach
- ◆ Board Administration

This document outlines areas where Board Members, staff and stakeholders are in agreement and disagreement while providing additional insight to assist the Board in developing goals and objectives for the upcoming strategic plan.

Please review this information carefully in preparation for the upcoming strategic planning session. At this planning session the information will be discussed as a group to help the Board identify new strategic objectives to focus on during the 2018 – 2021 strategic plan period.

Any questions about this report, should be directed to Lusine Sarkisyan with SOLID at (916) 574-8207 or Lusine.Sarkisyan@dca.ca.gov.

Strengths, Weaknesses, Opportunities, and Threats

The purpose of the environmental scan is to capture key points, concerns, issues, and suggestions related to major goal areas, and compile the results into trends and themes for the Board. This information is captured from all of the Board's stakeholders including: staff, management, Executive Director, Board and Midwifery Advisory Council Members, consumers, licensees, schools, and professional associations. This is achieved through various collection methods, including interviews, focus groups, and online surveys. While the collection method utilized for each group may vary, the information being sought is identical: an evaluation of Strengths, Weaknesses, Opportunities, and Threats.

The following is a summary of strengths, weaknesses, opportunities, and threats for each of the Board's goal areas as provided through comments and quantitative ratings. Comments are summarized for an aggregated perspective of how external stakeholders, Board Members, the Executive Director, management, and Board staff perceive the effectiveness of each goal area.

Enforcement

Protect the health and safety of consumers by effectively investigating complaints, by enforcing the laws and regulations of the Medical Practice Act when violations occur, and by educating consumers on the laws and regulations governing safe practices in California.

Enforcement Effectiveness				
<u>Rating</u>	<u>External Stakeholders</u>	<u>Board Members</u>	<u>Board Staff, ED, Management</u>	<u>Midwifery Council</u>
Very effective	18%	12%	10%	
Effective	57%	38%	69%	50%
Poor	19%	50%	19%	50%
Very poor	6%		2%	
Total	100%	100%	100%	100%

Enforcement Strengths

1. Staff was identified as being hardworking, experienced, and dedicated to the Board’s mission. It was identified that the staff processes 10,000 complaints annually.
2. Board and Midwifery Advisory Council Members identified the efficiency of the Board in collaborating with staff, investigators, and the Office of the Attorney General in pursuing disciplinary actions.
3. Stakeholders recognize that the Board does a good job enforcing the Medical Practice Act and disciplining physicians.
4. Stakeholders recognize the ease of accessing the online website to file complaints.
5. Stakeholders appreciate the newsletters with the notifications of physicians who have had disciplinary action.
6. Stakeholders identified investigators as being effective in conducting thorough investigations of allegations.

Enforcement Weaknesses

1. Internal and external stakeholders identified the disciplinary process from complaint intake to rendering a decision as being lengthy and placing consumers at risk.
2. Staff identified a need for consistent communication regarding policies and procedures received from management. Also, staff identified difficulties in collaborating with third parties, such as the Department of Justice.
3. Staff identified shortage of staffing resources due to turnover, demands to meet the processing timeframes and low staff morale.
4. Stakeholders identified that there is a delay in the processing time in the complaint intake, investigation, and adjudication stages of the enforcement processes.
5. Stakeholders identified that there are physicians who need remediation, which can be done by placing them in a drug rehabilitation program or retraining program, instead of revoking or suspending a license.
6. Stakeholders identified leniency in disciplinary actions for some groups of people and offenses.
7. Stakeholders identified that even though investigators are conducting research and background searches there may be inadequacies in the reports.
8. Internal and external stakeholders identified issues relating to vertical enforcement.

DCA Performance Measures Summary

Performance measures are linked directly to an agency's mission, vision, strategic objectives and strategic initiatives. The chart below shows the number of days between the stages of investigating a consumer complaint for the Board. The column labeled "target" is the goal the Board or the Department of Consumer Affairs (DCA) has established. The remaining columns show the actual number of days to move a complaint from one step of the investigation process to the next.

The Board is exceeding its targets in the intake and investigation and formal discipline measures for the third quarter of 2017.

Glossary of Performance Measure Terms

Volume - Number of complaints and convictions received.

Intake - Average cycle time from complaint receipt to the date the complaint was assigned to an investigator.

Intake & Investigation - Average cycle time from complaint receipt to closure of the investigation process. Does not include cases sent to the Attorney General or other forms of formal discipline.

Formal Discipline - Average number of days to complete the entire enforcement process for cases resulting in formal discipline. (Includes intake and investigation by the Board/DCA and prosecution by the Attorney General.)

Probation Intake - Average number of days from monitor assignment to the date the monitor makes first contact with the probationer.

Probation Violation Response - Average number of days from the date a violation of probation is reported, to the date the assigned monitor initiates appropriate action.

Performance Measure	Target	Q3 January -	Q2 October -
		March 2017	December 2016
		Actual	Actual
Volume (number of complaints)	---	2501	2251
Intake (days)	9	9	11
Intake & investigation (days)	125	168	155
Formal discipline (days)	540	922	964
Probation intake (days)	25	4	5
Probation violation response (days)	10	7	8

Licensing

Protect consumers by setting requirements for licensure, including education, experience, and demonstrated competence, and efficiently issue licenses to individuals meeting those requirements.

Licensing Effectiveness				
<u>Rating</u>	<u>External Stakeholders</u>	<u>Board Members</u>	<u>Board Staff, ED, Management</u>	<u>Midwifery Council</u>
Very effective	27%	75%	29%	100%
Effective	66%	25%	65%	
Poor	6%	0%	4%	
Very poor	1%	0%	2%	
Total	100%	100%	100%	100%

Licensing Strengths

1. Stakeholders identified their ease of use in accessing the web portal for license renewal and the efficiency in time in obtaining a renewal license.
2. Stakeholders identified that there are licensure requirements and necessary safeguards that all applicants comply with in order to obtain licensure, which in turn protects consumers.
3. Stakeholders identified the importance and effectiveness of the feature of verifying a physician's license online via BreEZe for employment and patient safety.
4. Stakeholders and staff identified that applicant's backgrounds are thoroughly reviewed to ensure compliance with Board requirements for licensure and to promote consumer protection
5. Stakeholders and staff identified that the application processing has significantly improved from prior years. Specifically, Board staff has decreased application processing time to 28 days well under the 45-day goal set by the Board and the 60-day requirement in regulation.
6. Stakeholders, staff, and Board Members, identified staff as being hardworking, experienced, and determined to comply with the Board's mandate.

Licensing Weaknesses

1. Stakeholders identified the speed of processing initial licensure application as lengthy as compared to other states. It was further identified that there are delays in license renewals and initial licensure. Staff identified that some delays are due to waiting on verification of credentials or missing documentation from the applicant.
2. Internal and external stakeholders identified that at times due to the high volume of paper applications and documents, applicant-submitted documents are lost or missing as a result of mishandling by staff.
3. Internal and external stakeholders identified that there is a need to improve efficiency in processing of licensure applications.
4. Stakeholders identified that there is a delay in communication, inaccessibility of reaching staff, and limited notification as to timely renewal.
5. Stakeholders identified that the licensing fees are relatively expensive for slow processing and turnaround time in comparison to other professions in the state and out of state.
6. Stakeholders suggested that staff improve the evaluation of physicians applying for licensure and better streamline their licensure process to identify inefficiencies.
7. Stakeholders identified that the Board's website is in need of updating and the BreZE system contains weaknesses that need to be addressed.
8. Stakeholders and staff identified that out-of-state applicants are experiencing greater time delays in obtaining their license.
9. Staff identified the need for cross training staff and updating procedures. Staff and Board Members also identified that there are vacancies and high staff turnover as a result of workload and low morale.

Outreach

Promote consumer protection through increasing public, licensee, and community partner awareness of the Board, its mission, activities, and services.

Outreach Effectiveness				
<u>Rating</u>	<u>External Stakeholders</u>	<u>Board Members</u>	<u>Board Staff, ED, Management</u>	<u>Midwifery Council</u>
Very effective	15%	25%	10%	
Effective	57%	63%	73%	
Poor	24%	12%	17%	100%
Very poor	4%	%		
Total	100%	100%	100%	100%

Outreach Strengths

1. Internal and external stakeholders identified the newsletter and the posting of disciplinary actions against licensees as a strength.
2. Stakeholders identified the email notifications as being proactive and accessible to important information. Staff identified that there are many opportunities that the Board creates and participates in to get the word out about important information relating to the Board.
3. Internal and external stakeholders identified the website as being a strength in providing Board information to the public and stakeholders.
4. Staff and stakeholders identified various methods of conducting outreach as a strength, even though there is a travel limitation placed.

Outreach Weaknesses

1. Stakeholders identified that they are unaware of any outreach the Board has conducted. There is a perception amongst stakeholders that they only hear from the Board when an issue regarding licensure and conduct have taken place.
2. Internal and external stakeholders suggested the Board reach out to more entities in the medical community. All understand that in order to be able to do more outreach there is a need for additional staff and the ability to travel.
3. Stakeholders identified that even though email notifications are a strength, there are too many email notifications sent out by the Board.
4. Staff identified that there is a need in staff development of outreach technologies and resources.

Legislation/Regulations

Advocate for and sponsor legislation and adopt regulations, policies, and procedures that strengthen and support the Board’s mandate, mission, vision, and goals.

Legislation/Regulation Effectiveness				
Rating	External Stakeholders	Board Members	Board Staff, ED, Management	Midwifery Council
Very effective	16%	37%	8%	
Effective	64%	63%	92%	100%
Poor	15%	%		
Very poor	5%	%		
Total	100%	100%	100%	100%

Legislation/Regulation Strengths

1. Stakeholders identified that the Board keeps up-to-date with important laws and exercises its network to leverage relationships with the legislature and stakeholders.
2. Staff and Board Members identified the chief of legislation as the biggest strength in legislation and meeting the Board’s needs.
3. Staff and Board Members identified that laws and regulations are regularly reviewed to be in line with the Board’s mandates.
4. Staff and Board Members identified that there is a good working relationship between the Board and the legislature.

Legislation/Regulation Weaknesses

1. Stakeholders identified that there is a lack in consumer advocacy stating that there is more focus on physicians than there is on consumers.
2. Stakeholders identified that the Board relies on the California Medical Association frequently, however the Board should expand its collaboration and network with other professional organizations.
3. Stakeholders suggested potential ideas for the Board to pursue.
4. Stakeholders identified there is too much involvement of the Board in the governance of medicine.
5. Internal and external stakeholders identified that the opioid epidemic is becoming an issue that is affecting licensees.
6. Stakeholders suggest the Board evaluate avenues to assist physician health and wellbeing in regards to addressing substance abuse.
7. Stakeholders identified poor communication to stakeholders regarding current and pending legislation and regulations.

Administration

Protect the consumers of California by promoting organizational success through proper Board governance, effective leadership, and responsible management.

Administration Effectiveness				
<u>Rating</u>	<u>External Stakeholders</u>	<u>Board Members</u>	<u>Board Staff, ED, Management</u>	<u>Midwifery Council</u>
Very effective	15%	100%	15%	
Effective	71%		67.5%	100%
Poor	11%		17.5%	
Very poor	3%			
Total	100%	100%	100%	100%

Administration Strengths

1. Internal and external stakeholders identified the staff as being responsive, hardworking and helpful.
2. Staff and Board Members identified that there are staff development opportunities within the Board as well as development opportunities for Board Members.
3. Internal and external stakeholders identified the executive team as being effective, hardworking, and supportive. Board and Midwifery Advisory Council Members identified the executive director as very strong, efficient, smart, responsive, passionate, and highly regarded in the medical community. Board and Midwifery Advisory Council Members identified the attorney for the Board as being helpful, graceful and calm in addressing issues and concerns.
4. Board Members were identified as being committed, optimistic, and extraordinary.

Administration Weaknesses

1. Stakeholders identified that the Board succumbs to political pressure.
2. Stakeholders identified concerns relating to the licensing and enforcement timeframes and communication difficulties in reaching staff or receiving feedback.
3. Stakeholders identified that there are ineffective processes that need to be improved within the Board relating to investigation, licensure, customer service, and complaints.
4. Stakeholders and staff identified that there are areas for staff improvement, specifically within units and third-party collaborations. All stakeholders identified that there are staffing shortages that need to be addressed. Staff identified that some staff need to be held accountable for their tasks and functions and that there are needs for staff training in specific responsibilities.
5. Stakeholders identified concerns relating to technology, specifically the website.
6. Staff identified that employee morale is in need of improvement, specifically relating to workload, micromanagement of supervisors, inconsistent information, and unavailability.
7. Board Members identified that there is need for training on Board functions in order to have efficient and effective case reviews and discussion during meetings.
8. Stakeholder suggested that 805 report information be included in the license verification database.

Summary of Opportunities and Threats

There are many factors that may impact the future direction of the medical profession. These could be opportunities or threats. Opportunities refer to trends, stakeholders, and relationships that are external, outside the Board's purview that the Board should seek active involvement, because there is a benefit to the Board and its furtherance of consumer protection. Threats refer to trends, stakeholders, and relationships that are also external, however the Board should mitigate, because there is a negative impact to the Board and its ability to further consumer protection.

Below are the opportunities and threats identified by external stakeholders, Board Members and staff that are external to the Board that they felt could impact the industry and Board's regulatory role. The following are commonly made responses that Board might reference when considering its strategic plan.

Trends

Opportunities Summary

Opportunities include changes in the medical profession relating to licensure portability, electronic medical records, opioid epidemic, political climate, and participation in initiatives relating to the profession, vertical enforcement, and technological improvements to reach the communities.

Threats Summary

Threats include political and social trends, scope of practice and unlicensed activity, national licensure trend, healthcare trends, wellbeing of physicians, economic trends, profession profitability, telehealth, and licensure portability.

Stakeholders

Opportunities Summary

Opportunities include regulation of outpatient facilities, patient and physician advocacy, partnership with health care and insurance providers, collaboration with legislature, and greater stakeholder input.

Threats Summary

Threats relating to the furtherance of consumer protection were identified to include pressure from physician groups, unions, healthcare providers, and insurance providers, while threats relating to the furtherance of the medical profession were identified to include pressure from consumers and consumer groups.

Relationships

Opportunities Summary

Opportunities include building relationships with all stakeholders by participating in health related programs, conferences, collaborating on initiatives, and furthering outreach and stakeholder relationships.

Threats Summary

Threats include the Board's relationship with stakeholders and relationship with those in politics, professional associations, media, attorneys, and the Division of Investigation (specifically relating to length and time of investigations).

Appendix A - Data Collection Method

Information for this survey was gathered by surveying external stakeholders, Board members and Board staff using the following methods:

- ◆ Interviews conducted with eight Members of the Board, including the Executive Director, completed during the month of September 2017 to assess the challenges and opportunities the Board is currently facing or will face in the upcoming years.
- ◆ One focus group with Board executive managers in August 2017 to identify the strengths and weaknesses of the Board from an internal perspective. Eight managers and supervisors participated.
- ◆ An online survey sent to staff members to identify the strengths and weaknesses of the Board from an internal perspective. 52 Board staff participated, which included rank and file staff, supervisors, managers, and subject matter experts.
- ◆ An online survey sent to the Midwifery Advisory Council to identify the strengths and weaknesses of the Board from an internal perspective. 2 Council members participated.
- ◆ An online survey sent to 10,000 randomly selected external Board stakeholders in August 2017 to identify the strengths and weaknesses of the Board from an external perspective. 479 stakeholders completed the survey. The below table shows how stakeholders identified themselves in the online survey.

Stakeholders Breakdown	Number	% of Total
Professional licensee	266	56%
Professional association	71	15%
Consumer/member of the public	7	1%
Consumer organization	5	1%
School or college representation	10	2%
Other	120	25%
TOTAL:	479	100

Appendix B - Survey Data Reliability

Based on 479 external stakeholders who responded to the electronic survey, we can be 95% confident their opinions represent all California licensees plus or minus four percent. For example, 93% of stakeholders rated the Board’s overall licensing effectiveness as effective or very effective. Based on our response rate, we can be 95% confident between 89% and 97% of stakeholders would rate the Board’s effectiveness the same way.¹

To help improve data integrity, the online survey did not provide a neutral option when asking about overall effectiveness. Instead, stakeholders completing the survey chose between a positive choice (excellent or good) and a negative choice (poor or very poor). This allows the Board to better understand whether stakeholders have a positive or negative view of the Board in various areas.

Notes

¹ Source: <http://www.surveysystem.com/sscalc.htm>



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