#### MEDICAL BOARD STAFF REPORT

DATE REPORT ISSUED: October 12, 2016

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 1091 active experts in the Board's expert database. 228 experts were utilized to review 389 cases from January 1, 2016 through September 30, 2016. **Attachment A** provides the Expert Reviewer Program statistics. Additional experts are needed in the following specialties:

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

Since the July Board Meeting, the Expert Reviewer Program finalized details to conduct two Expert Reviewer training sessions. Training was held on October 8, 2016, at University of California San Francisco. Forty-three participants attended this training (33 physicians and surgeons, 2 osteopathic physicians, and 3 podiatrists). The agenda included speakers from the Board, the Health Quality Investigation Unit, the Health Quality Enforcement Section of the Attorney General's Office, defense counsel and a retired administrative law judge (ALJ). Training at the University of California Los Angeles will be held on November 5, 2016, and there are 65 individuals registered to attend this event.

Staff began recruitment efforts according to the plan that was presented to the Board at the July Meeting. Staff is on track to complete Phase I of the recruitment plan by the end of Fall and staff will present a formal update regarding its recruitment efforts at the next Enforcement Committee meeting.

#### Office of Administrative Hearing Training

At the July Board meeting, the Enforcement Committee heard a report that training with ALJs from the Office of Administrative Hearing (OAH) was going to resume in Fall. On September 30, 2016, the ALJs

Enforcement Program Summary October 12, 2016 Page 2

received emergency medicine training. According to OAH Presiding Judge Alvord, "the ALJs were unanimously pleased with the depth and breadth of material covered and loved the presentation." Two more training sessions are scheduled to take place on October 28 and November 18, 2016, and the training will focus on co-morbid conditions, physician impairment, and how fitness for duty evaluations can measure impaired physicians.

#### **Central Complaint Unit:**

Staff in the Central Complaint Unit (CCU) continues to focus all efforts on reducing initiation and complaint processing timeframes, and improving efficiency.

CCU intake staff reduced the complaint initiation timeframe to an average of 11 days for the first quarter of fiscal year 2016/2017. While still one day over the timeframe mandated by Business and Professions Code section 129(b), CCU management is confident this number will be within the statutory timeframe as soon as newly hired staff becomes more proficient in performing the job duties.

The average time to process a complaint is currently 154 days. In August and September all CCU managers conducted case reviews with their individual staff persons to review pending caseloads and provide guidance regarding any issues staff may have encountered that could be delaying timely completion of their work. Management has also instituted weekly statistical reporting to ensure all aspects of each analyst's caseload, i.e., new complaints, pending complaints, and the drafting of closing letters, is receiving adequate attention. Gathering these statistics will also enable the CCU managers to determine the number of complaints being received by case type in each geographical region to ensure even distribution of caseloads.

A new management services technician began work on July 18, 2016, and is currently being trained on complaint initiation and processing of medical malpractice reports. CCU elected not to move forward with a limited term staff services analyst (SSA) for the Medical Consultant Program as the previous incumbent returned to work on September 12, 2016. The employee has received refresher training on the process for referring complaints for medical consultant review and has been instructed on new policies and procedures implemented during her absence. Also, a new associate governmental program analyst (AGPA) will report to work on October 17, 2016. This employee will be responsible for the review and analysis of adverse event reports from accredited outpatient surgery settings, and other mandatory reporting involving patient transfers and patient deaths occurring in outpatient surgery settings. The CCU currently has one vacant office technician position. This vacancy has been advertised and recruitment efforts are underway. Interviews are expected to be scheduled by the end of October and the position filled by the first of December.

#### Discipline Coordination Unit:

Staff in the Discipline Coordination Unit (DCU) continues to focus their efforts on restoring public disciplinary documents to the Board's website to ensure compliance with Assembly Bill 1886. Since the enforcement summary provided at the July 2016 Board meeting, a retired annuitant and two student assistants continue to make progress on restoring the documents to the website.

The DCU has two vacant positions: an SSA and an AGPA. Both positions were advertised and interviews were held in September. Two job offers were made and are pending hire clearance.

#### Complaint Investigation Office:

The Complaint Investigation Office (CIO) non-sworn special investigators continue to monitor a case load of approximately 51 cases. Since the last enforcement summary provided at the July 2016 Board meeting, CIO has closed 78 cases and has transmitted 25 cases to the Attorney General's Office – 2 malpractice, 9 criminal/conviction cases, 2 petitions for reinstatement of licensure, and 12 petitions for early termination/modification of probation.

CIO's average case processing timeframe to process each case type is as follows: reinstatement is 291 days, sub-arrest convictions is 193-days, mandated settlement reports are 358-days, and petitions for early termination is 143 days. Management is evaluating case procedures with the goal of reducing overall processing timeframes.

The petitions for modification and/or early termination of probation requests were redirected back to the Probation Unit effective June 1, 2016, now that the Probation Unit has filled its vacant analyst position. The CIO is fully staffed.

#### **Probation Unit:**

Effective July 1, 2016, the Probation Unit implemented two new performance measures (PM); PM07 and PM08. PMs are statistical measures that are reported to the Department of Consumer Affairs and are intended to capture how long it takes staff to complete workload activities. PM07 and PM08 are specific to probation. PM07 will capture the timeframe of 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.

PM08 will capture the timeframe 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.

During the first quarter of fiscal year 2016/2017, 13 Cease Practice Orders have been issued. This demonstrates the efforts of staff to take swift action to address violations of probation. Additionally, during this same reporting period, 10 petitions to revoke probation or accusations/petitions to revoke probation have been filed.

	Fiscal Year 14/15	Fiscal Year 15/16	Fiscal Year 16/17 (July 1-September 30)
Cease Practice Orders	9	14	13
PTR/Accusation and PTR	21	34	10

The Probation Unit filled one vacant inspector position in September. A tentative job offer was made to fill the vacant inspector position in the San Dimas Office however, the candidate unfortunately declined. The position has been re-advertised and the Enforcement Program anticipates hiring interviews will be conducted in November. In addition, two inspector supervisors have been out on extended leave since the beginning of the year and their anticipated return is unknown; for the time being, the probation managers have resumed the responsibilities carried out by the supervisors.

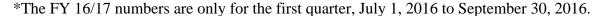
The petitions for modification and/or early termination of probation requests were redirected back to the Probation Unit effective June 1, 2016. Since June 1, 2016, three petitions for early termination were transmitted to the Attorney General's Office.

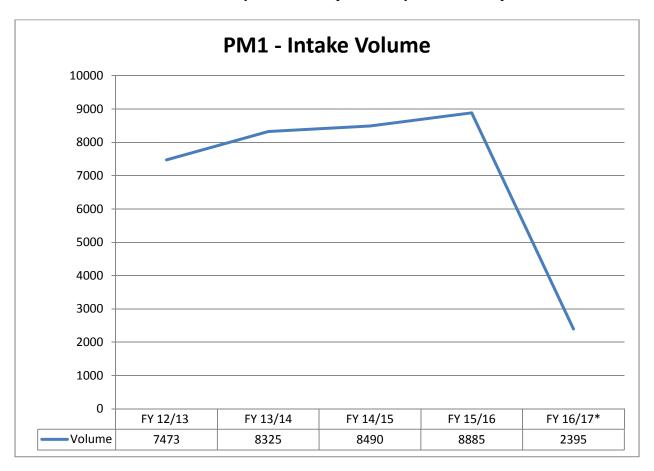
#### **Executive Office Analyst**

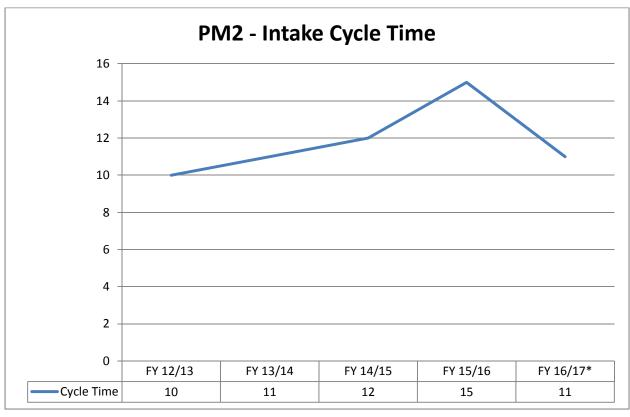
The Board received approval to reclassify the executive assistant position that reported to the chief of enforcement and to the chief of legislation to an SSA position. This position will assist the chiefs with performing research to identify and develop recommendations for process improvements and will be the Board's regulation coordinator. Interviews were conducted and a tentative offer was made pending background clearance.

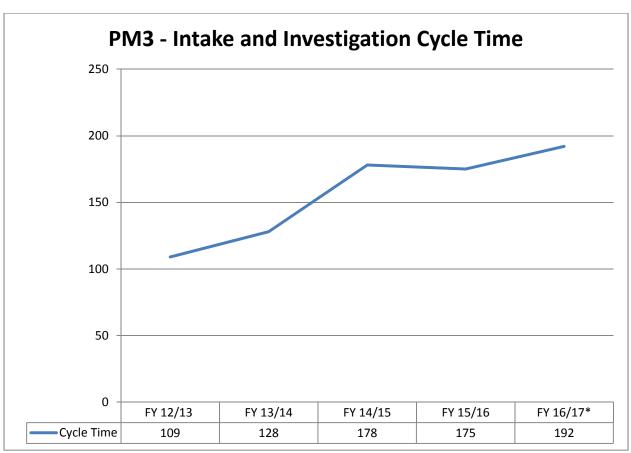
#### **Enforcement Performance Measures**

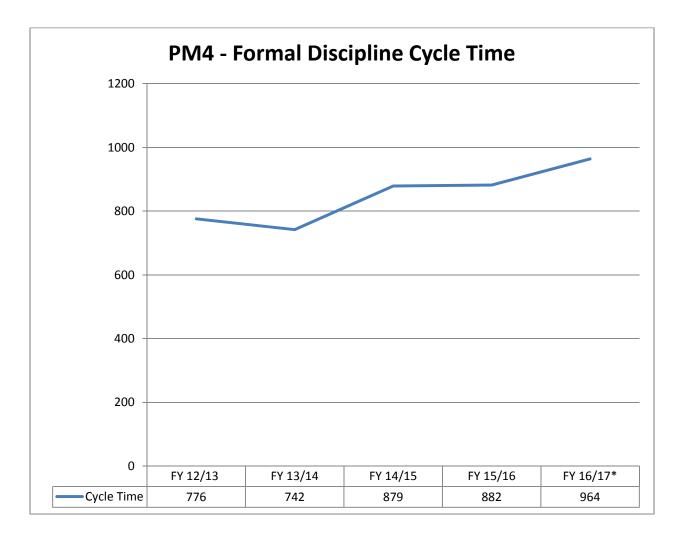
The charts below depict workload statistics regarding the number of complaints received (PM 1, which includes complaints and arrest notifications), processing times to initiate a complaint and assign to a desk analyst (PM 2), complete an investigation (PM 3), and the average number of days it takes to complete a case that has been transmitted to the Attorney General's Office for disciplinary action (PM 4).











#### **Attachment A**

SPECIALTY	Number of Cases reviewed by Experts	Number of Experts and how often Utilized from January 1 through September 30, 2016	Active List Experts
	January 1 through September 30, 2016		1,091 ↑
ADDICTION	8	3 EXPERTS  1 LIST EXPERT REVIEWED 1 CASE 1 LIST EXPERT REVIEWED 2 CASES 1 LIST EXPERT REVIEWED 5 CASES	11
ALLERGY & IMMUNOLOGY (A&I)			3
ANESTHESIOLOGY (Anes)	7	5 EXPERTS 3 LIST EXPERTS REVIEWED 1 CASE EACH 1 LIST EXPERT REVIEWED 2 CASES 1 LIST EXPERT REVIEWED 3 CASES	76↓
COLON & RECTAL SURGERY (CRS)	5	2 EXPERTS  1 LIST EXPERT REVIEWED 2 CASES 1 LIST EXPERT REVIEWED 3 CASES	2
COMPLEMENTARY/ALTERNATIVE MEDICINE	5	3 EXPERTS 2 LIST EXPERTS REVIEWED 1 CASE EACH 1 LIST EXPERT REVIEWED 3 CASES	17
DERMATOLOGY (D)	3	2 EXPERTS 1 LIST EXPERT REVIEWED 1 CASE EACH 1 LIST EXPERT REVIEWED 2 CASES	11 ↓
EMERGENCY (EM)	6	6 EXPERTS 4 LIST EXPERTS REVIEWED 1 CASE EACH 2 LIST EXPERTS REVIEWED 2 CASES EACH	44 ↓
FAMILY (FM)	75	27 EXPERTS  11 LIST EXPERTS REVIEWED 1 CASE EACH 6 LIST EXPERTS REVIEWED 2 CASES EACH 4 LIST EXPERTS REVIEWED 3 CASES EACH 1 LIST EXPERT REVIEWED 4 CASES 2 LIST EXPERTS REVIEWED 5 CASES EACH 2 LIST EXPERTS REVIEWED 6 CASES EACH 1 LIST EXPERT REVIEWED 15 CASES	59↓
HAND SURGERY			11
HOSPICE & PALLIATIVE MEDICINE			14
INTERNAL (General Internal Med)	62	42 EXPERTS 29 LIST EXPERTS REVIEWED 1 CASE EACH 6 LIST EXPERTS REVIEWED 2 CASES EACH 6 LIST EXPERTS REVIEWED 3 CASES EACH 1 LIST EXPERT REVIEWED 4 CASES	154
Cardiovascular Disease (Cv)	5	5 EXPERTS 5 LIST EXPERTS REVIEWED 1 CASE EACH	31 ↓
Endocrinology, Diabetes and Metabolism (EDM)	1	1 EXPERT 1 LIST EXPERT	6
Gastroenterology (Ge)		4 EXPERTS	

#### **Attachment A**

SPECIALTY	Number of Cases reviewed by Experts	Number of Experts and how often Utilized from January 1 through September 30, 2016	Active List Experts
	January 1 through September 30, 2016		1,091 ↑
	5	3 LIST EXPERTS REVIEWED 1 CASE EACH 1 LIST EXPERT REVIEWED 2 CASES	19
Infectious Disease (Inf)			8
Medical Oncology (Onc)	2	2 EXPERTS 2 LIST EXPERTS REVIEWED 1 CASE EACH	11
Nephrology (Nep)	2	2 EXPERTS 2 LIST EXPERT	11
Pulmonary Disease (Pul)			16
Rheumatology (Rhu)			6
MIDWIFE REVIEWER	2	1 EXPERT 1 LIST EXPERT REVIEWED 2 CASES	4
NEUROLOGICAL SURGERY (NS)	4	3 EXPERTS 2 LIST EXPERTS REVIEWED 1 CASE EACH 1 LIST EXPERT REVIEWED 2 CASES	10
NEUROLOGY (N)	9	9 EXPERTS 9 LIST EXPERTS REVIEWED 1 CASE EACH	19 ↓
NEUROLOGY with Special Qualifications in Child Neurology (N/ChiN)			2
NUCLEAR MEDICINE (NuM)			4
OBSTETRICS & GYNECOLOGY (ObG)	23	14 EXPERTS  8 LIST EXPERTS REVIEWED 1 CASE EACH 3 LIST EXPERTS REVIEWED 2 CASES EACH 2 LIST EXPERTS REVIEWED 3 CASES EACH 1 LIST EXPERT REVIEWED 4 CASES	70 ↑
OCCUPATIONAL MEDICINE	1	1 EXPERT 1 LIST EXPERT	8
OPHTHALMOLOGY (Oph)	4	2 EXPERTS 2 LIST EXPERTS REVIEWED 2 CASES EACH	26 ↓
ORTHOPAEDIC SURGERY (OrS)	12	9 EXPERTS 8 LIST EXPERTS REVIEWED 1 CASE EACH 1 LIST EXPERT REVIEWED 4 CASES	29↓
OTOLARYNGOLOGY (Oto)	1	1 EXPERT 1 LIST EXPERT	18

#### **Attachment A**

SPECIALTY	Number of Cases reviewed by Experts	Number of Experts and how often Utilized from January 1 through September 30, 2016	Active List Experts
	January 1 through September 30, 2016		1,091 ↑
PAIN MEDICINE (PM)	35	14 EXPERTS 7 LIST EXPERTS REVIEWED 1 CASE EACH 3 LIST EXPERTS REVIEWED 3 CASES EACH 2 LIST EXPERTS REVIEWED 4 CASES EACH 1 LIST EXPERT REVIEWED 5 CASES 1 LIST EXPERT REVIEWED 6 CASES	23 ↓
PATHOLOGY (Path)	2	2 EXPERTS 2 LIST EXPERTS REVIEWED 1 CASE EACH	11
PEDIATRICS (Ped)	5	5 EXPERTS 4 LIST EXPERTS REVIEWED 1 CASE EACH 1 LIST EXPERT REVIEWED 2 CASES	47
Pediatric Cardiology (Cd)	1	1 EXPERT 1 list expert	5
Pediatric Emergency Medicine (PEM)			3
Pediatric Endocrinology (En)			1
Pediatric Gastroenterology (Ge)			5
Pediatric Hematology-Oncology (HO)			3
Pediatric Infectious Diseases (Inf)			4
Pediatric Nephrology (Ne)			2
Pediatric Pulmonology (Pul)			0
Pediatric Rheumatology (Rhu)			0
PHYSICAL MEDICINE & REHABILITATION (PMR)			11
PLASTIC SURGERY (PIS)	18	12 EXPERTS 6 LIST EXPERTS REVIEWED 1 CASE EACH 3 LIST EXPERTS REVIEWED 2 CASES EACH 3 LIST EXPERTS REVIEWED 3 CASES EACH	45 ↑
PSYCHIATRY (Psyc)	95	42 EXPERTS 23 LIST EXPERTS REVIEWED 1 CASE EACH 6 LIST EXPERTS REVIEWED 2 CASES EACH 5 LIST EXPERTS REVIEWED 3 CASES EACH 4 LIST EXPERTS REVIEWED 4 CASES EACH 2 LIST EXPERTS REVIEWED 8 CASES EACH 1 LIST EXPERT REVIEWED 10 CASES 1 LIST EXPERT REVIEWED 12 CASES	70 ↑

#### **Attachment A**

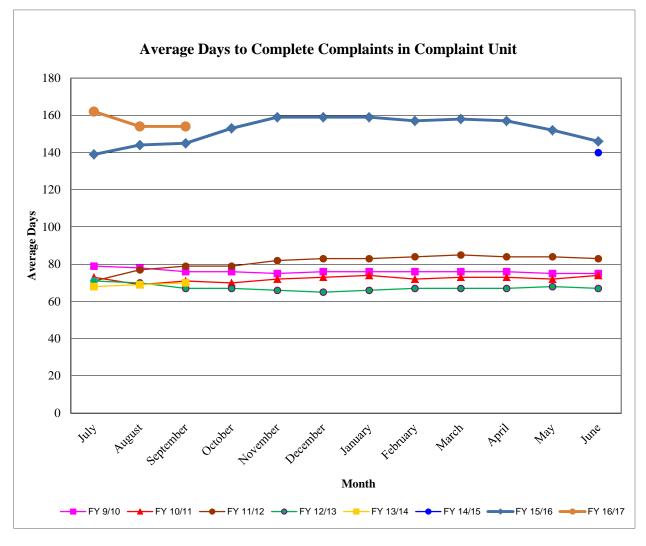
SPECIALTY	Number of Cases reviewed by Experts January 1 through	Number of Experts and how often Utilized from January 1 through September 30, 2016	Active List Experts
	September 30, 2016		1,091 ↑
	1		
RADIOLOGY (Rad)	4	3 EXPERT 2 LIST EXPERTS REVIEWED 2 CASES EACH 1 LIST EXPERT REVIEWED 2 CASES	31 ↑
Radiation Oncology (Rad RO)			5
SLEEP MEDICINE (S)			8
SURGERY (S)	17	10 EXPERTS 5 LIST EXPERTS REVIEWED 1 CASE EACH 4 LIST EXPERTS REVIEWED 2 CASES EACH 1 LIST EXPERT REVIEWED 4 CASES	28↑
Pediatric Surgery (PdS)	1	1 EXPERT 1 LIST EXPERT	2
Vascular Surgery (VascS)	3	2 EXPERTS  1 LIST EXPERT REVIEWED 1 CASE 1 LIST EXPERT REVIEWED 2 CASES	6
THORACIC SURGERY (TS)	1	1 EXPERT 1 OFF-LIST EXPERT	10 ↑
Pediatric Cardiothoracic Surgery	1	1 EXPERT 1 OFF-LIST EXPERT	0
(MEDICAL) TOXICOLOGY	1	1 EXPERT 1 OFF-LIST EXPERT	7
UROLOGY (U)	7	5 EXPERTS 3 LIST EXPERTS REVIEWED 1 CASE EACH 2 LIST EXPERTS REVIEWED 2 CASES EACH	13 ↑

TOTAL CASES REVIEWED (Jan. – Sept. 2016	389
TOTAL EXPERTS UTILIZED (Jan. – Sept. 2016	) 228
TOTAL ACTIVE LIST EXPERTS (10/1/2016	1091

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

Fiscal	Year

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	
November	75	72	82	66			159	
December	76	73	83	65			159	
January	76	74	83	66			159	
February	76	72	84	67			157	
March	76	73	85	67			158	
April	76	73	84	67			157	
May	75	72	84	68			152	
June	75	74	83	67		140	146	

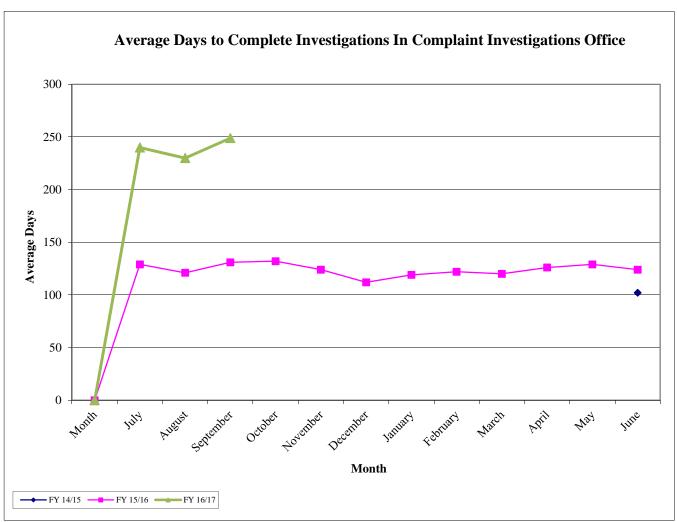


Average Days to Complete Complaints in Complaint Unit includes complaints resolved by Complaint Unit and Complaint Unit processing days for cases completed at field investigation.

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

#### **Fiscal Year**

Month	FY 14/15	FY 15/16	FY 16/17
July		129	240
August		121	230
September		131	249
October		132	
November		124	
December		112	
January		119	
February		122	
March		120	
April		126	
May		129	
June	102	124	



Investigation processing days are from the date case was assigned to Complaint Investigation Office (CIO)

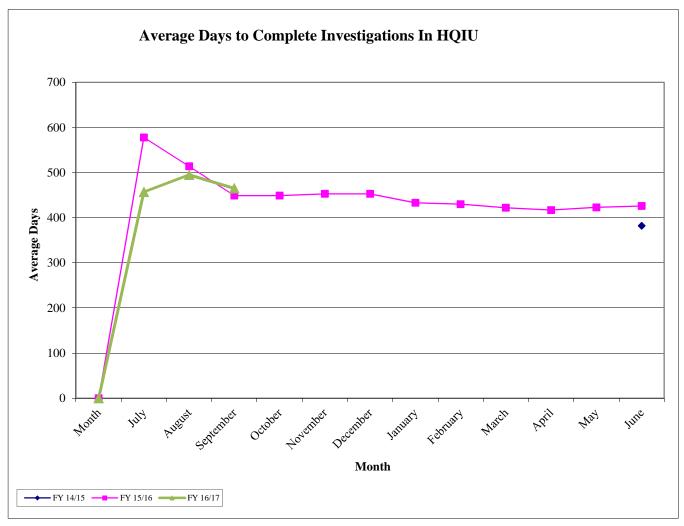
Investigator by Complaint Unit until closure or referral (does not include Complaint Unit processing days for complaints completed at CIO).

BRD 7B - 12

# 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	
November		453	
December		453	
January		433	
February		430	
March		422	
April		417	
May		423	
June	382	426	



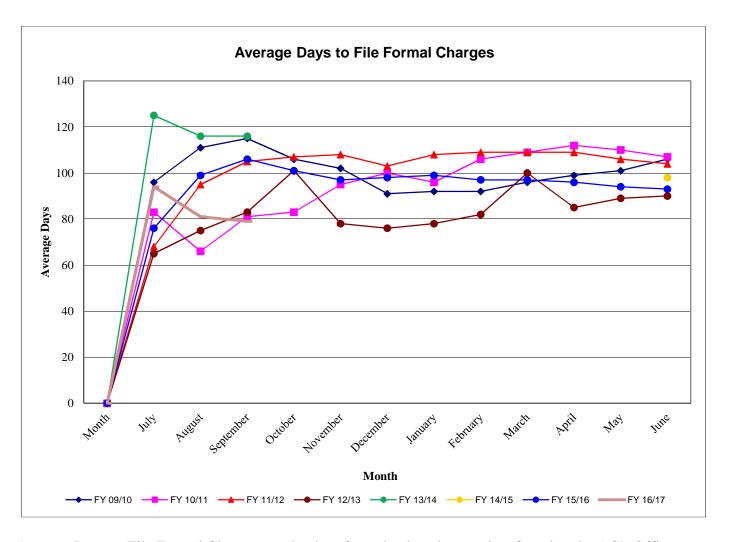
Investigation processing days are from the date case was assigned to HQIU investigator by Complaint Unit until closure or referral (does not include Complaint Unit processing days for complaints completed at HQIU).

BRD 7B - 13

# 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 l	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	
November	102	95	108	78			97	
December	91	100	103	76			98	
January	92	96	108	78			99	
February	92	106	109	82			97	
March	96	109	109	100			97	
April	99	112	109	85			96	
May	101	110	106	89			94	
June	106	107	104	90		98	93	



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.

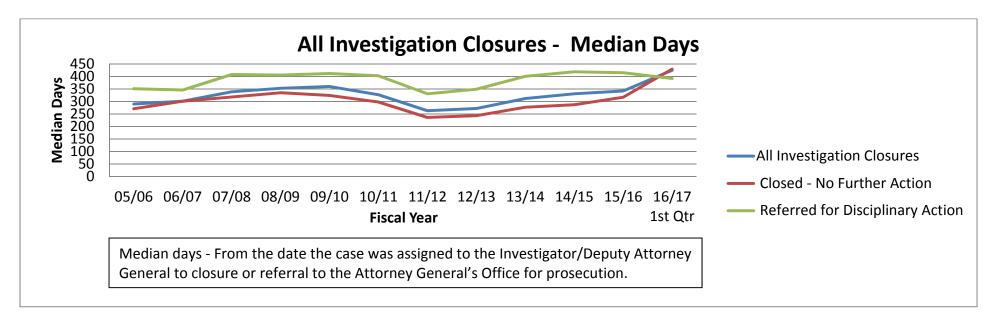
#### **ENFORCEMENT TIMEFRAMES**

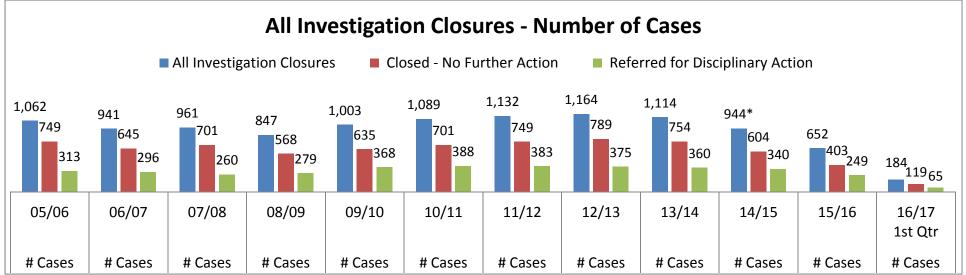
FISCAL YEARS	2008	- 2009	2009	- 2010	2010 -	2011	2011 -	2012	2012	- 2013	2013	- 2014	2014 -	2015 <sup>1</sup>	2015 -	2016 <sup>1</sup>	2016 -	2017 <sup>2</sup>
	AVERAGE	MEDIAN	AVERAGE	MEDIAN	AVERAGE	MEDIAN	AVERAGE	MEDIAN	AVERAGE	MEDIAN	AVERAGE	MEDIAN	AVERAGE	MEDIAN	AVERAGE	MEDIAN	AVERAGE	MEDIAN
COMPLAINT PROCESSING	75	63	76	63	74	77	83	64	67	54	67	43	140	113	146	119	154	125
INVESTIGATION PROCESSING -					<u> </u>					7.								
MBC-CIO													102	57	124	52	249	199
INVESTIGATION PROCESSING -																		
HQIU													382	352	426	367	465	430
INVESTIGATION PROCESSING -																		
ALL	349	309	328	292	312	283	264	225	268	245	245	205						
TOTAL MBC & HQIU																		
DAYS	424	372	404	355	386	360	347	289	335	299	312	248	228	150	230	155	174	140
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	0.48	0.38
. 20	2.20	1.02		0.57	2.00	0.55	0.55	0.75	0.52	0.02	0.05	0.00	0.02	0	0.05	0	1 0	0.50
AG PREP FOR																		
ACC/PTR/ACC&PTR/SOI	103	63	106	66	107	72	104	78	90	75	110	86	98	68	93	67	79	63
DOCT ACCUSATION (DTD (CO)	381	311	368	312	417	324	396	350	435	366	443	402	459	392	453	378	456	410
POST ACCUSATION/PTR/SOI	301	311	308	312	417	324	390	350	433	300	443	402	459	392	453	3/8	450	418
ACCUSATION DECLINED BY AG													44	23	56	31	19	19
															- 50			
TOTAL AG																		
DAYS	484	374	474	378	524	396	500	428	525	441	553	488	473	413	479	393	456	418
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	1.25	1.15
						1		1				ĺ						
TOTAL MBC & AG																		
DAYS	908	746	878	733	910	756	847	717	860	740	865	736	956	927	967	919	965	955
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	2.64	2.62
																	•	

Years calculated using 365 days per year

<sup>&</sup>lt;sup>1</sup> "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.

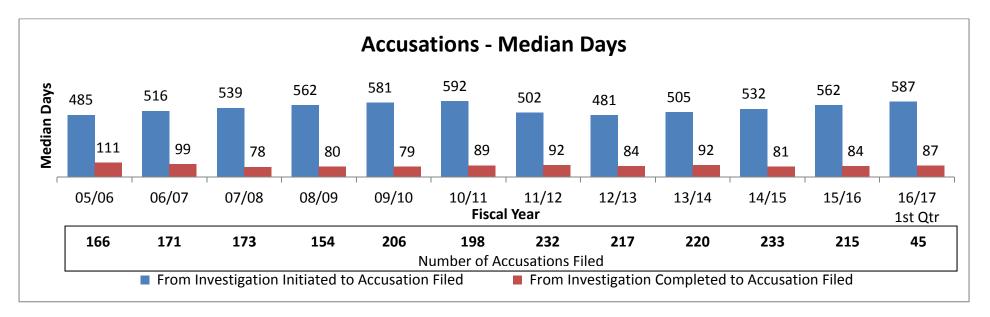
<sup>&</sup>lt;sup>2</sup> Data through 9/30/16

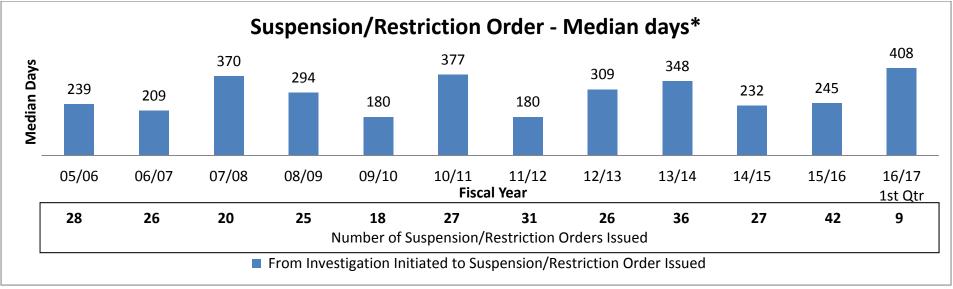




<sup>\*</sup> This decrease is due to the Board initiating, in July 2014, a complaint investigation office of non-sworn special investigators who began investigating cases that would have been sent to HQIU.

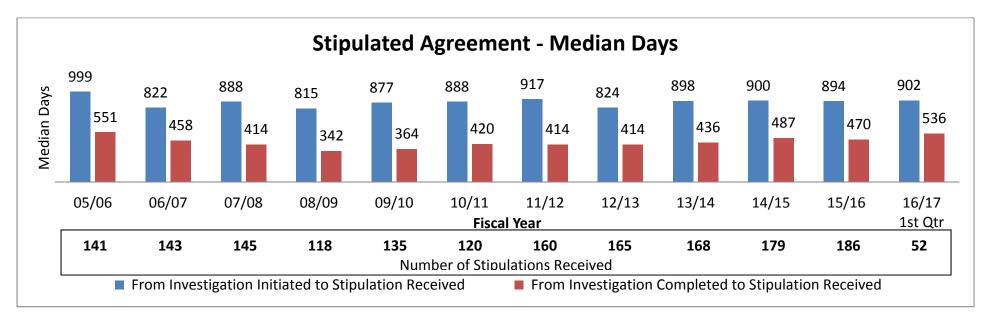
The graphs above exclude the following case types: out-of-state, headquarters, Operation Safe Medicine, probation violations, petitions for modification/termination of probation terms, and petitions for reinstatement. They also exclude all cases that were referred solely to the District/City Attorney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

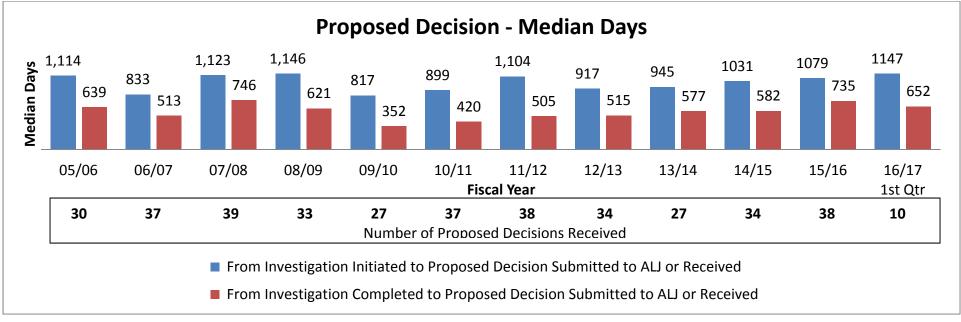




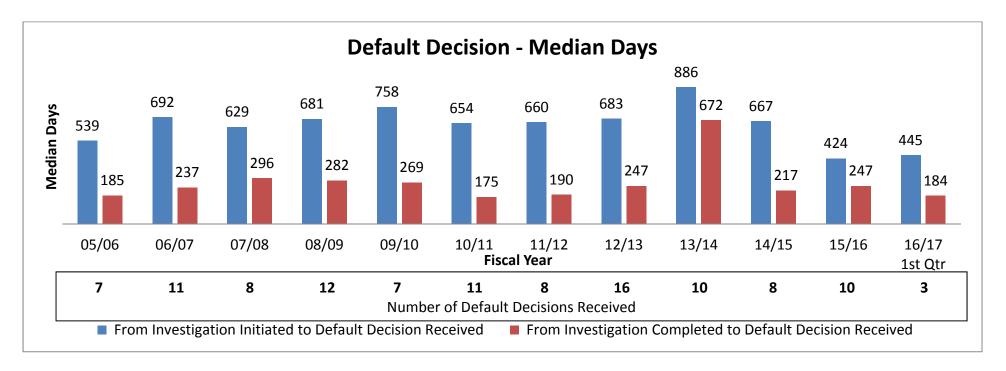
This data includes: interim suspension orders, Penal Code section 23 restrictions, stipulated agreements to restrictions/suspension, and temporary restraining orders. It does not include out-of-state suspension orders, automatic suspension orders, or orders to cease practice while on probation.

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.





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.



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.