

## MEDICAL BOARD STAFF REPORT

DATE REPORT ISSUED: July 8, 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 1082 active experts in the Board's expert database. 171 experts were utilized to review 256 cases from January 1 through June 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
- Midwife Reviewer
- Neurological Surgery
- Neurology
- OB/Gyn
- Pathology
- Pain Medicine
- Pediatric Cardiac Surgery
- Pediatric Pulmonology
- Plastic Surgery
- Psychiatry (general and addiction)
- Surgery
- Urology
- Vascular Surgery

The Expert Reviewer Program analysts have begun to devote time to recruiting new experts into the program, to include but not limited to, recruiting individuals that work in the aforementioned specialty fields of medicine. A recruitment plan was developed, and the plan will be presented at the July Board Meeting during the Enforcement Committee Meeting.

The analysts have also begun efforts to finalize the details for the next two Expert Reviewer trainings. Training at the University of California, San Francisco (UCSF) will take place on Saturday, October 8, 2016. Training in Southern California is tentatively scheduled to take place on either October 15 or November 5, 2016. Staff has been working to secure a location to hold the training at either the University of California, Los Angeles (UCLA) or University of Southern California (USC). Staff will send "save the date" invites to all existing experts by August 1, 2016.

Central Complaint Unit (CCU):

The CCU has shown a steady improvement following the restructure and reorganization of the unit. In this last quarter of fiscal year 2015/2016, CCU management and staff were able to focus all efforts on reducing initiation and case processing timeframes.

CCU intake staff was able to maintain their average of 15-days to initiate a complaint. While still five days over the timeframe mandated by Business and Professions Code section 129(b), management expects this requirement will be met and maintained, by next quarter following the hiring of the additional MST that will be assigned to initiate complaints.

The average time to process a complaint is currently 146 days, down 16-days from the average of 162 days reported in the third quarter. Heading into the new fiscal year, management has already begun to identify ways to improve the overall processing timeframes. For example, an unnecessary system activity code was eliminated from the case initiation process and supervisors have been meeting with each staff person to monitor pending complaints to ensure timely completion of the workload.

The CCU has three vacant positions: a Management Services Technician (MST), a Limited Term Staff Services Analyst (SSA), and an Associate Governmental Program Analyst (AGPA). The MST recruitment has been completed and this individual is scheduled to report to work on July 18, 2016. The SSA and AGPA positions have been advertised and interviews for these positions will be conducted by the end of July.

Discipline Coordination Unit (DCU):

Staff in the Discipline Coordination Unit continues to focus their efforts on restoring public disclosure documents to the Board's website to ensure compliance with Assembly Bill 1886. Since the last Enforcement Summary provided at the May 2016 Board Meeting, a retired annuitant (RA) and two student assistants were hired to help finalize the project and are making good progress. With the RA and students on board, staff that was redirected to assist with this assignment has returned to their regular duties.

The Discipline Coordination Unit has two vacant positions: a SSA and an AGPA. Both positions have been advertised and management anticipates interviews will be conducted mid-August.

Complaint Investigation Office (CIO):

The CIO non-sworn Special Investigators continue to monitor a case load of approximately 55 cases. Since the last Enforcement Summary provided at the May 2016 Board meeting, CIO has closed 54 cases and has transmitted 16 cases to the Attorney General's Office – 8 criminal conviction cases, 4 Petitions for Reinstatement of licensure, 4 Petitions for Early Termination/Modification of probation. 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 Probation filled its vacant analyst position. The Complaint Investigation Office is fully staffed.

Probation Unit:

Effective July 1, 2016, the Probation Unit implemented two new Performance Measures (PM): PM07 and PM08. PMs are statistical data that is reported to the Department of Consumer Affairs (DCA) and is 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 of 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.

Management continues to review Probation Unit policies and procedures to ensure optimal efficiency of the unit. For fiscal year 15/16, the number of Cease Practice Orders (CPO), Petitions to Revoke Probation (PTR), and Accusations/Petitions to Revoke Probation have increased since fiscal year 14/15 and demonstrates the good efforts of staff to action when a violation of probation occurs.

	Fiscal Year 14/15	Fiscal Year 15/16
Cease Practice Orders Issued	9	14
PTR/Accusation and PTR - Transmitted	20	36
PTR/Accusation and PTR - Filed	21	29

The Probation Unit has two vacant Inspector positions. A tentative job offer was made to fill one Inspector position and this individual's employment date is pending the results of the candidate's fingerprint and health evaluation clearances. Management is reviewing the applications received for the other Inspector position and anticipates conducting interviews at the beginning of August. The Probation North Unit hired an AGPA in May 2016, and this analyst is assigned to monitor probationers that are ordered to submit biological fluid testing as a term of his or her probation, as well as monitor the requirements for specified training or education contained in a Public Letter of Reprimand or Public Reprimand. 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.

**Medical Board of California  
Expert Reviewer Program Report**

Agenda Item 7B  
**Attachment A**

**July 1, 2016**

<b>SPECIALTY</b>	<b>Number of Cases reviewed by Experts January 1 through June 30, 2016</b>	<b>Number of Experts and how often Utilized from January 1 through June 30, 2016</b>	<b>Active List Experts 1,082 ↑</b>
<i>ADDICTION</i>	4	3 EXPERTS 2 LIST EXPERTS REVIEWED 1 CASE EACH 1 LIST EXPERT REVIEWED 2 CASES	11 ↑
ALLERGY & IMMUNOLOGY (A&I)			3
ANESTHESIOLOGY (Anes)	1	2 EXPERTS 2 LIST EXPERTS REVIEWED 1 CASE EACH	79 ↓
COLON & RECTAL SURGERY (CRS)	5	2 EXPERTS 1 LIST EXPERT REVIEWED 2 CASES 1 LIST EXPERT REVIEWED 3 CASES	2
<i>COMPLEMENTARY/ALTERNATIVE MEDICINE</i> <i>*2 WERE COMPANION CASES (SAME SUBJECT)</i>	3	1 EXPERT 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	12
EMERGENCY (EM) 1 CASE REVIEWED BY 2 EXPERTS	5	5 EXPERTS 4 LIST EXPERTS REVIEWED 1 CASE EACH 1 LIST EXPERT REVIEWED 2 CASES	45 ↑
FAMILY (FM) * - 5 CASES, BUT 4 CASES WERE COMPANION CASES ** - 8 CASES REVIEWS & 3 PREPARATION FOR HEARING	50	22 EXPERTS 11 LIST EXPERTS REVIEWED 1 CASE EACH 4 LIST EXPERTS REVIEWED 2 CASES 4 LIST EXPERTS REVIEWED 3 CASES 1 LIST EXPERT REVIEWED 4 CASES 1 LIST EXPERT REVIEWED 5 CASES * 1 LIST EXPERT REVIEWED 11 CASES **	60 ↓
<i>HAND SURGERY</i>			12
<i>HOSPICE &amp; PALLIATIVE MEDICINE</i>			14
INTERNAL (General Internal Med) 1 CASE REVIEWED BY 2 EXPERTS	40	30 EXPERTS 21 LIST EXPERTS REVIEWED 1 CASE EACH 7 LIST EXPERTS REVIEWED 2 CASES EACH 2 LIST EXPERTS REVIEWED 3 CASES EACH	154 ↑
Cardiovascular Disease (Cv)	2	2 EXPERTS 2 LIST EXPERTS REVIEWED 1 CASE EACH	32
Endocrinology, Diabetes and Metabolism (EDM)	1	1 EXPERT 1 LIST EXPERT	6
Gastroenterology (Ge)	4	4 EXPERT 4 LIST EXPERT REVIEWED 1 CASE EACH	19
Infectious Disease (Inf)			8

Medical Board of California  
Expert Reviewer Program Report

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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)	3	3 EXPERTS 3 LIST EXPERTS	10
NEUROLOGY (N)	6	6 EXPERTS 6 LIST EXPERTS REVIEWED 1 CASE EACH	20
NEUROLOGY with Special Qualifications in Child Neurology (N/ChiN)			3
NUCLEAR MEDICINE (NuM)			4
OBSTETRICS & GYNECOLOGY (ObG)  1 CASE REVIEWED BY 2 EXPERTS	16	12 EXPERTS 9 LIST EXPERTS REVIEWED 1 CASE EACH 2 LIST EXPERTS REVIEWED 2 CASES EACH 1 LIST EXPERT REVIEWED 4 CASES	68 ↑
OCCUPATIONAL MEDICINE			8
OPHTHALMOLOGY (Oph)	1	1 EXPERT 1 LIST EXPERT	27
ORTHOPAEDIC SURGERY (OrS)	6	5 EXPERTS 4 LIST EXPERTS REVIEWED 1 CASE EA 1 LIST EXPERT REVIEWED 2 CASES	30
OTOLARYNGOLOGY (Oto)			18
PAIN MEDICINE (PM)	20	12 EXPERTS 7 LIST EXPERTS REVIEWED 1 CASE EACH 2 LIST EXPERTS REVIEWED 2 CASES EACH 3 LIST EXPERTS REVIEWED 3 CASES EACH	26 ↓
PATHOLOGY (Path)	2	2 EXPERTS 2 LIST EXPERTS	11↓

Medical Board of California  
Expert Reviewer Program Report

July 1, 2016

SPECIALTY	Number of Cases reviewed by Experts January 1 through June 30, 2016	Number of Experts and how often Utilized from January 1 through June 30, 2016	Active List Experts 1,082 ↑
PEDIATRICS (Ped)	4	4 EXPERTS 4 LIST EXPERTS REVIEWED 1 CASE EACH	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)  <i>2 CASE REVIEWED BY 2 EXPERTS</i>	16	10 EXPERTS 5 LIST EXPERTS REVIEWED 1 CASE EACH 2 LIST EXPERTS REVIEWED 2 CASES EACH 3 LIST EXPERTS REVIEWED 3 CASES EACH	43 ↑
PSYCHIATRY (Psyc) <i>4 CASES REVIEWED BY 2 EXPERTS</i> <i>6 cases = * Expert '1' is 4 mental exams, 1 case review and 1 supplemental work. Expert '2' is 3 mental exams, 3 case reviews and 1 testimony work</i> <i>7 cases = **Expert performed 4 mental exams, 2 case reviews and 1 supplemental work.</i> <i>8 cases = *** Expert performed 6 mental exams and 2 case reviews</i>	62	33 EXPERTS 21 LIST EXPERTS REVIEWED 1 CASE EACH 4 LIST EXPERTS REVIEWED 2 CASES EACH 3 LIST EXPERTS REVIEWED 3 CASES EACH 1 LIST EXPERT REVIEWED 4 CASES 2 LIST EXPERTS REVIEWED 6 CASES EACH* 1 LIST EXPERT REVIEWED 7 CASES** 1 LIST EXPERT REVIEWED 8 CASES***	70 ↑
RADIOLOGY (Rad)	4	3 EXPERT 2 LIST EXPERTS REVIEWED 2 CASES EACH 1 LIST EXPERT REVIEWED 2 CASES	29
Radiation Oncology (Rad RO)			5
SLEEP MEDICINE (S)			7
SURGERY (S)	10	6 EXPERTS 2 LIST EXPERTS REVIEWED 1 CASE EACH 4 LIST EXPERTS REVIEWED 2 CASES EACH	27

**Medical Board of California  
Expert Reviewer Program Report**

Agenda Item 7B  
**Attachment A**

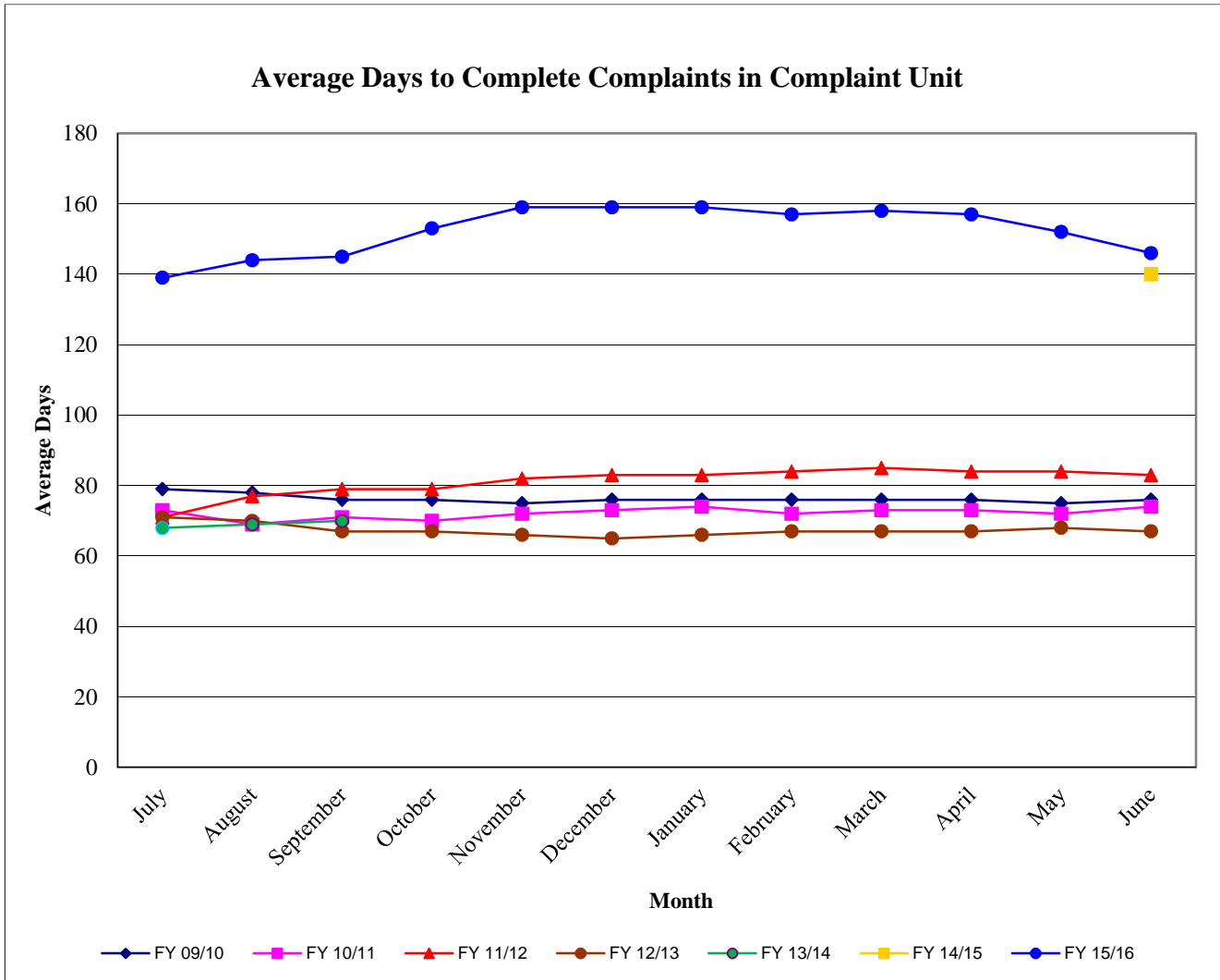
**July 1, 2016**

<b>SPECIALTY</b>	<b>Number of Cases reviewed by Experts</b> January 1 through June 30, 2016	<b>Number of Experts and how often Utilized</b> from January 1 through June 30, 2016	<b>Active List Experts</b>  1,082 ↑
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)			9
<i>Pediatric Cardiothoracic Surgery</i>	1	1 EXPERT 1 OFF-LIST EXPERT	0
<i>(MEDICAL) TOXICOLOGY</i>			7
UROLOGY (U)	5	4 EXPERT 3 LIST EXPERTS REVIEWED 1 CASE EACH 1 LIST EXPERTS REVIEWED 2 CASES	12 ↓
TOTAL CASES REVIEWED (Jan. - June 2016)			<b>256</b>
TOTAL EXPERTS UTILIZED (Jan. - June 2016)			<b>171</b>
TOTAL ACTIVE LIST EXPERTS (7/1/2016)			<b>1082</b>

↓↑ 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**

Month	FY 09/10	FY 10/11	FY 11/12	FY 12/13	FY 13/14	FY 14/15	FY 15/16
July	79	73	71	71	68		139
August	78	69	77	70	69		144
September	76	71	79	67	70		145
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	76	74	83	67		140	146

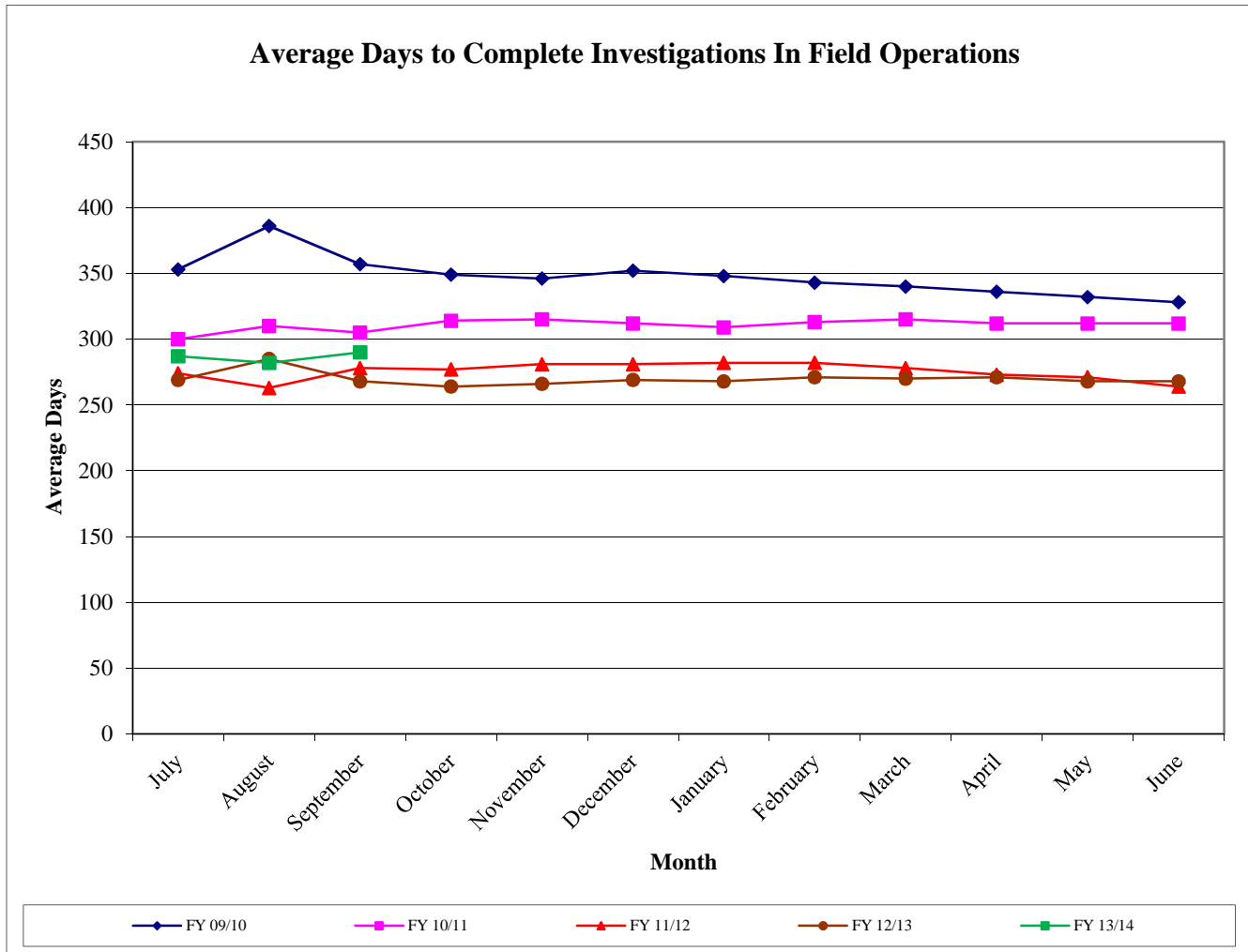


Average Days to Complete Complaints in Complaint Unit includes complaints resolved by Complaint Unit and Complaint Unit processing days for cases completed at field investigation.



## Medical Board of California Enforcement Program Average Days to Complete Investigations in Field Operations

Month	Fiscal Year				
	FY 09/10	FY 10/11	FY 11/12	FY 12/13	FY 13/14
July	353	300	274	269	287
August	386	310	263	285	282
September	357	305	278	268	290
October	349	314	277	264	
November	346	315	281	266	
December	352	312	281	269	
January	348	309	282	268	
February	343	313	282	271	
March	340	315	278	270	
April	336	312	273	271	
May	332	312	271	268	
June	328	312	264	268	

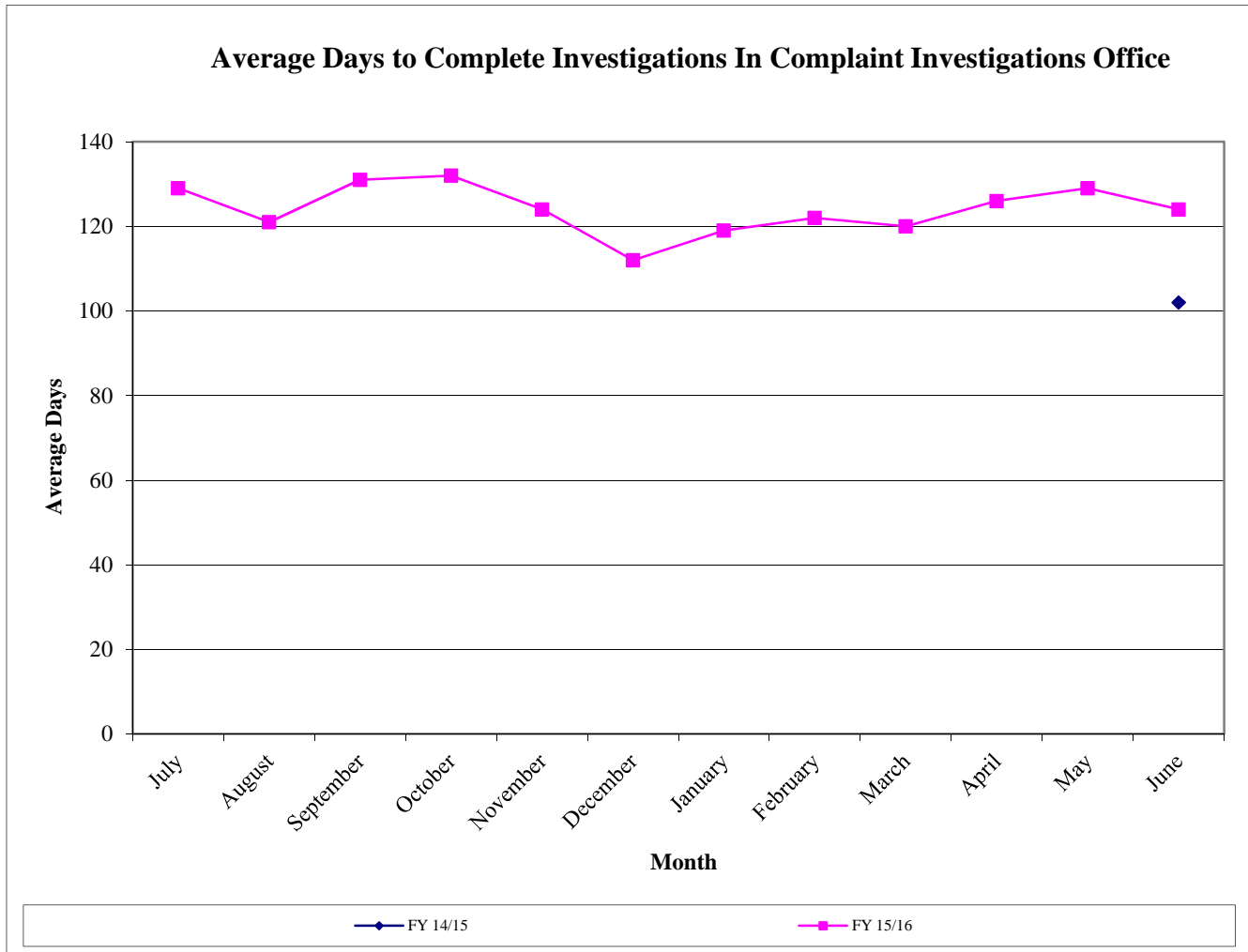


Investigation processing days are from the date case was sent to field investigation by Complaint Unit until closure or referral (does not include Complaint Unit processing days for complaints completed at field investigation).

## Medical Board of California Enforcement Program

### Average Days to Complete Investigations in Complaint Investigations Office

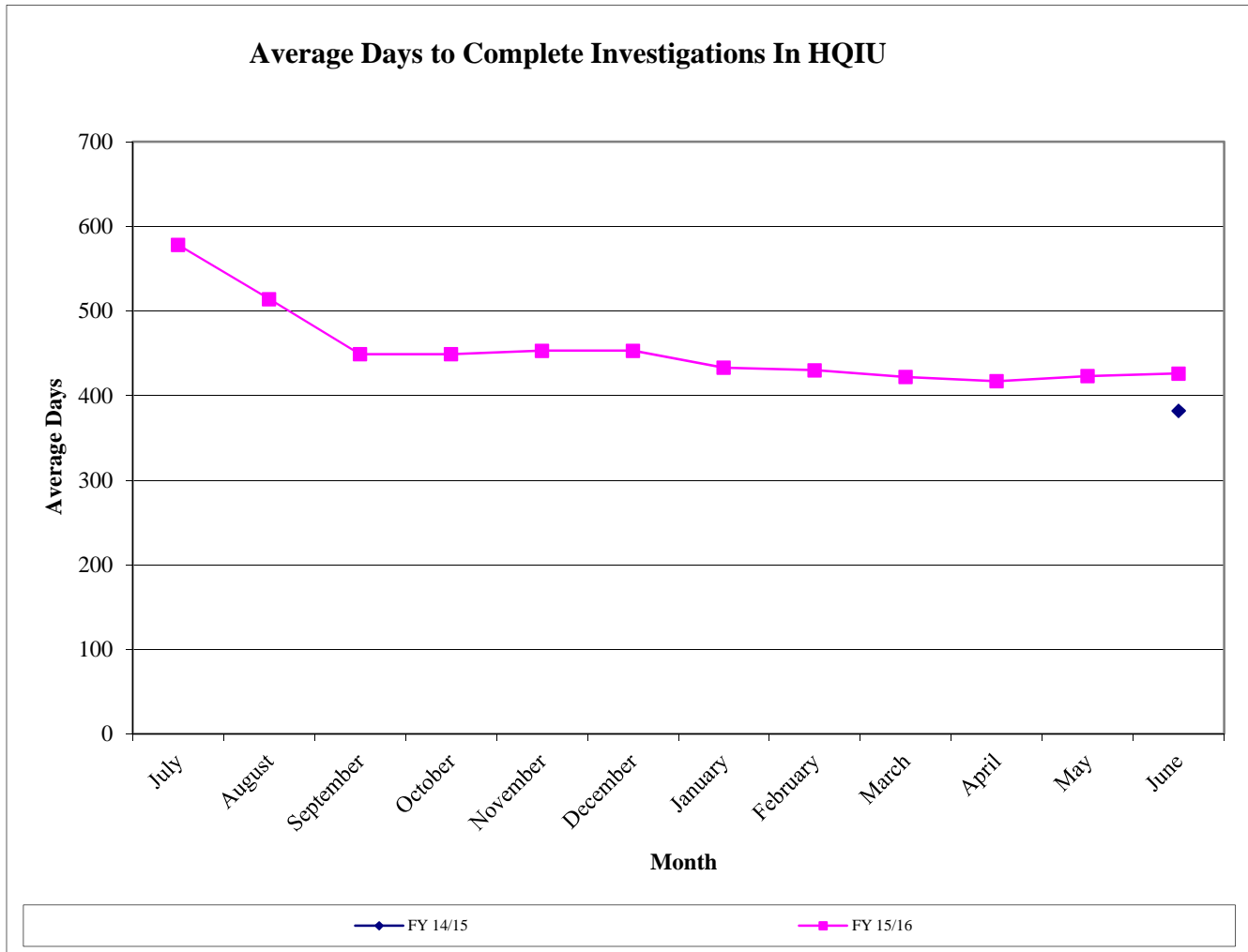
Month	Fiscal Year	
	FY 14/15	FY 15/16
July		129
August		121
September		131
October		132
November		124
December		112
January		119
February		122
March		120
April		126
May		129
June	102	124



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).

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

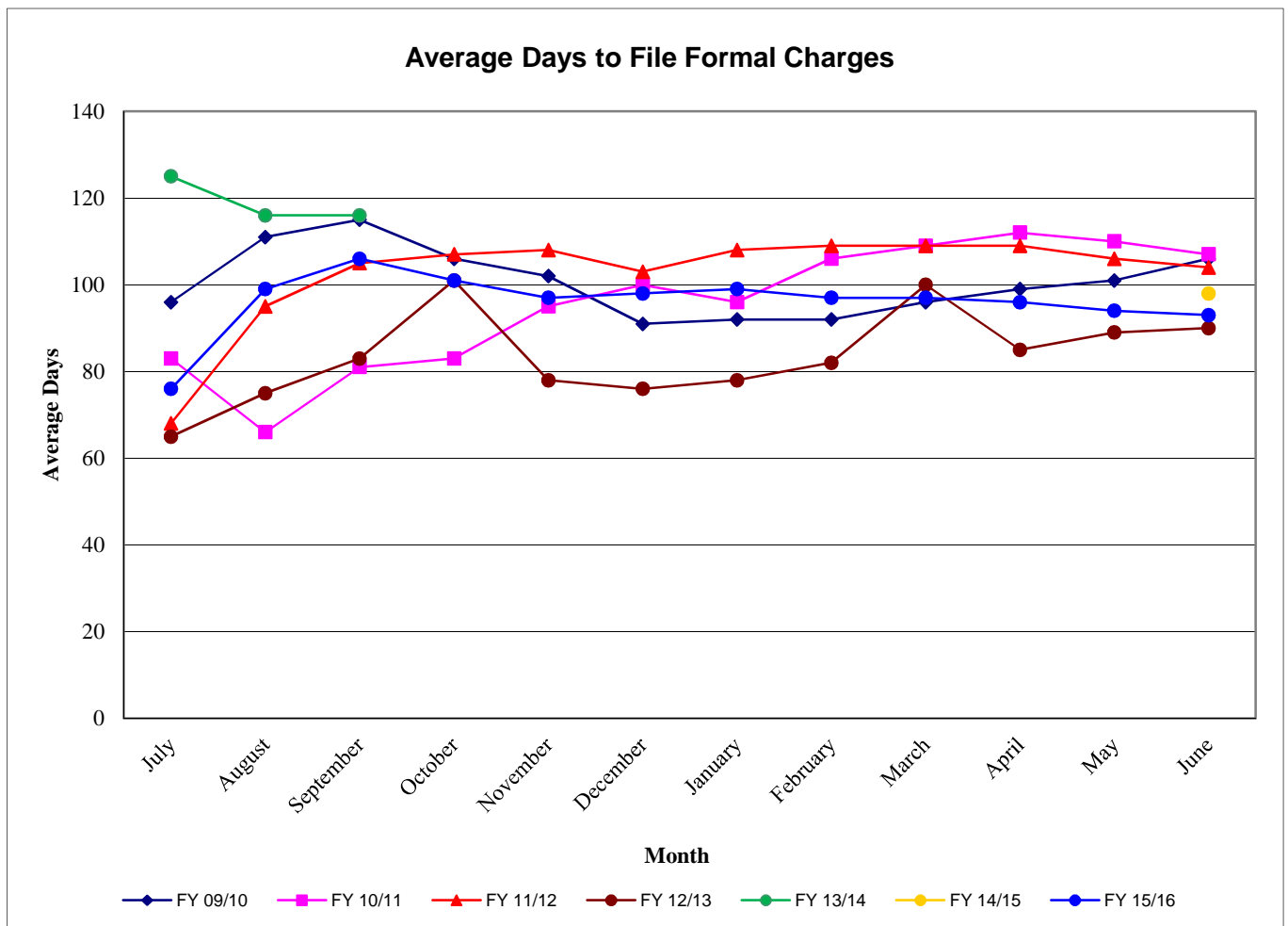
Month	Fiscal Year	
	FY 14/15	FY 15/16
July		578
August		514
September		449
October		449
November		453
December		453
January		433
February		430
March		422
April		417
May		423
June	382	426



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).

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

Month	FY 09/10	FY 10/11	FY 11/12	FY 12/13	FY 13/14	FY 14/15	FY 15/16
July	96	83	68	65	125		76
August	111	66	95	75	116		99
September	115	81	105	83	116		106
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

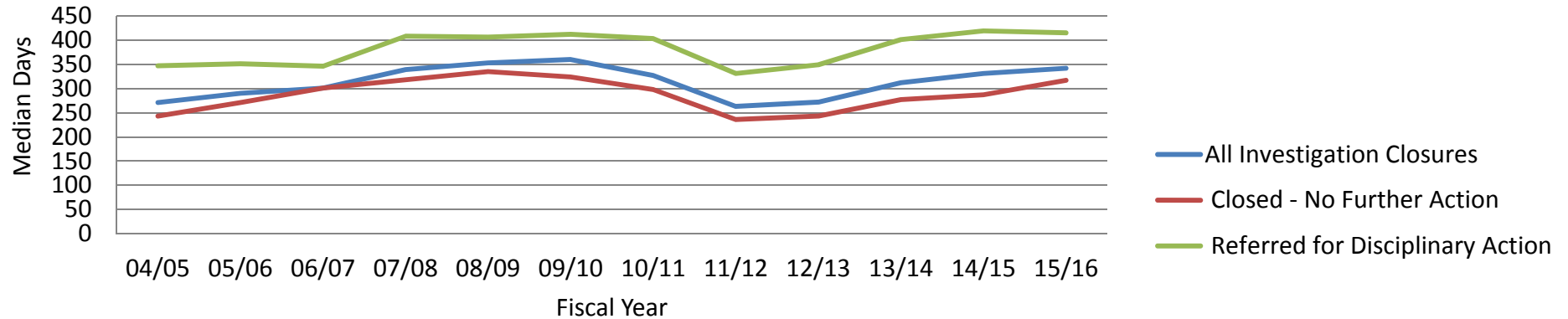
Agenda Item 7B

FISCAL YEARS	2007 - 2008		2008 - 2009		2009 - 2010		2010 - 2011		2011 - 2012		2012 - 2013		2013 - 2014		2014 - 2015 <sup>1</sup>		2015 - 2016 <sup>1</sup>	
	AVERAGE	MEDIAN	AVERAGE	MEDIAN	AVERAGE	MEDIAN	AVERAGE	MEDIAN	AVERAGE	MEDIAN	AVERAGE	MEDIAN	AVERAGE	MEDIAN	AVERAGE	MEDIAN	AVERAGE	MEDIAN
COMPLAINT PROCESSING	61	49	75	63	76	63	74	77	83	64	67	54	67	43	140	113	146	119
INVESTIGATION PROCESSING - MBC-CIO															102	57	124	52
INVESTIGATION PROCESSING - HQIU															382	352	426	367
INVESTIGATION PROCESSING - ALL	324	272	349	309	328	292	312	283	264	225	268	245	245	205				
TOTAL MBC & HQIU																		
DAYS	385	321	424	372	404	355	386	360	347	289	335	299	312	248	228	150	230	155
YEARS	1.05	0.88	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
AG PREP FOR ACC/PTR/ACC&PTR/SOI	121	58	103	63	106	66	107	72	104	78	90	75	110	86	98	68	93	67
POST ACCUSATION/PTR/SOI	471	324	381	311	368	312	417	324	396	350	435	366	443	402	459	392	453	378
ACCUSATION DECLINED BY AG															44	23	56	31
TOTAL AG																		
DAYS	592	382	484	374	474	378	524	396	500	428	525	441	553	488	473	413	479	393
YEARS	1.62	1.05	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
TOTAL MBC & AG																		
DAYS	977	703	908	746	878	733	910	756	847	717	860	740	865	736	956	927	967	919
YEARS	2.68	1.93	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

Years calculated using 365 days per year

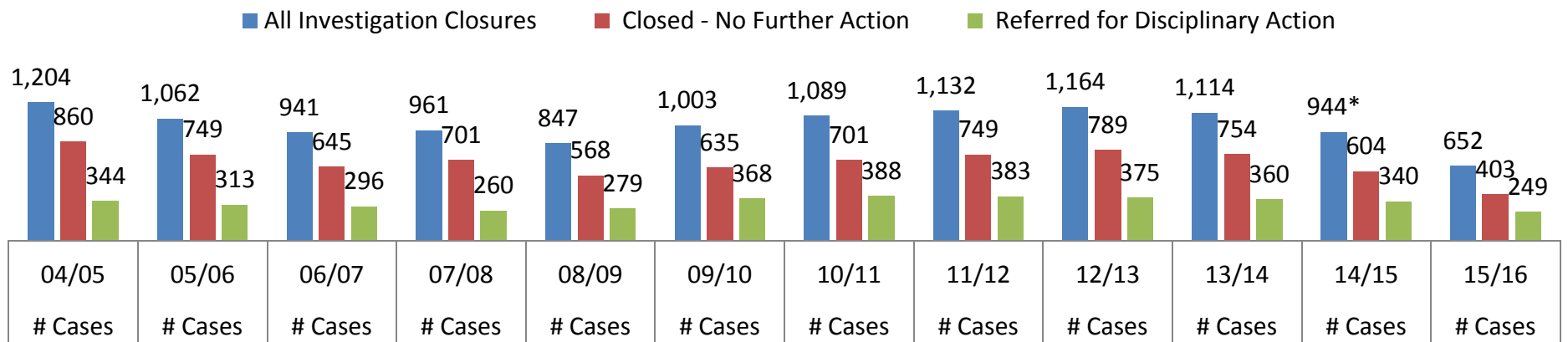
<sup>1</sup> "Total" Days prior to FY 14-15 were the averages per unit added together. Beginning in FY 14-15, reports were run that show true averages for the Total timeframes.

## All Investigation Closures - Median Days



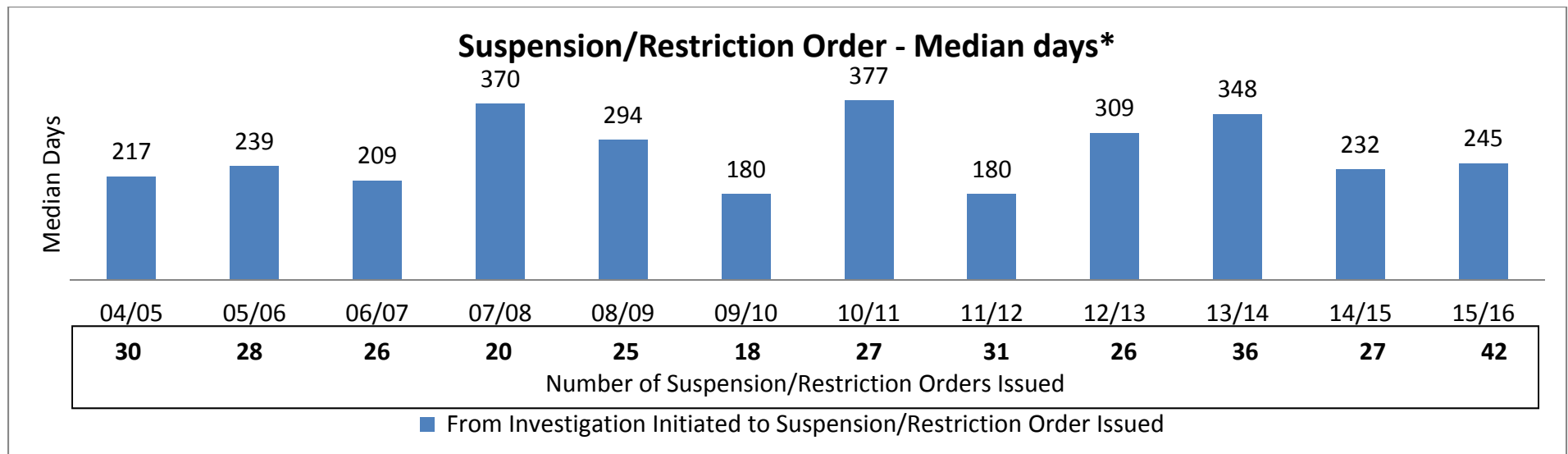
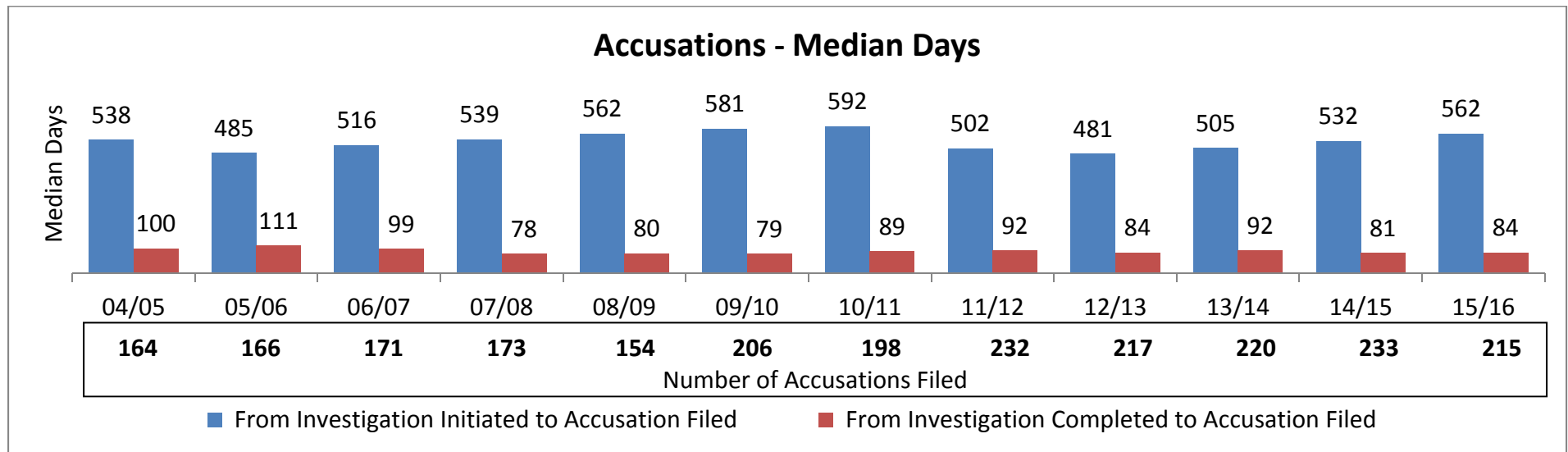
Median days - From the date the case was assigned to the Investigator/Deputy Attorney General to closure or referral to the Attorney General's Office for prosecution.

## All Investigation Closures - Number of Cases



\* 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 HQU.

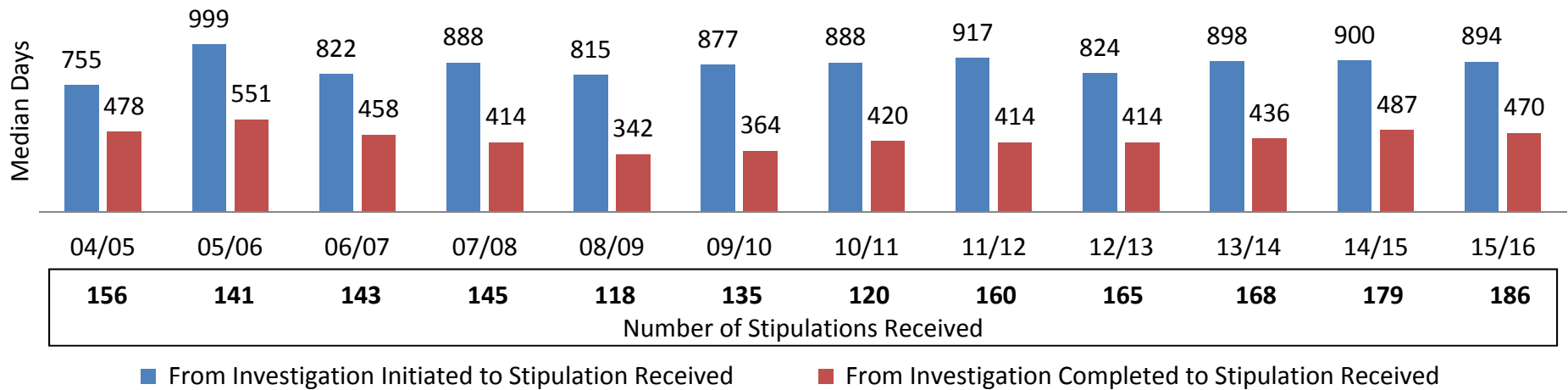
The graphs above exclude the following case types: out-of-state, headquarters, Operation Safe Medicine, probation violations, petitions for modification/termination of probation terms, and petitions for reinstatement. They also exclude all cases that were referred solely to the District/City Attorney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



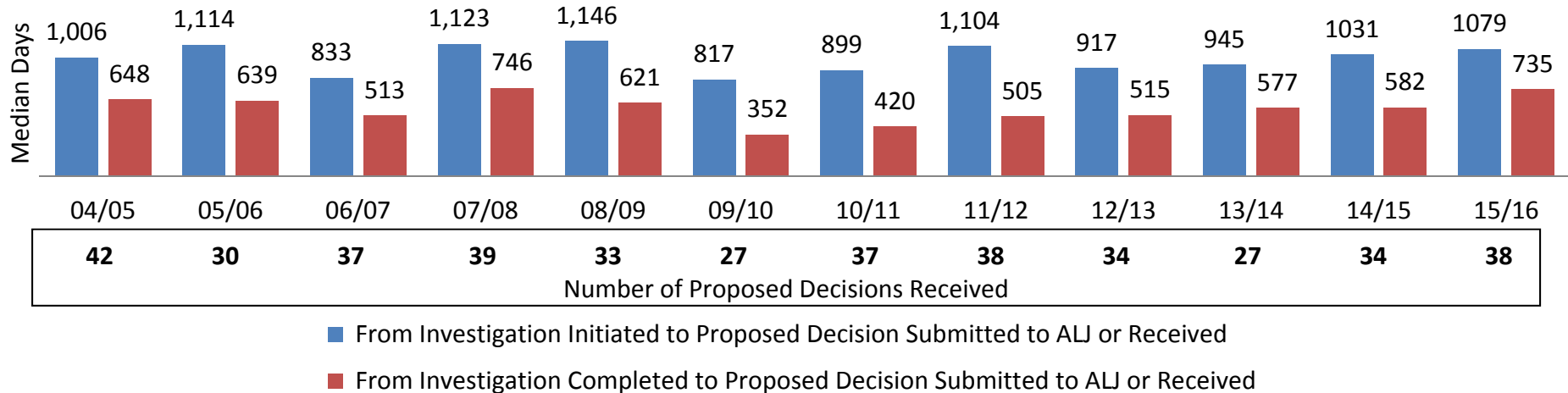
\* This data includes: interim suspension orders, Penal Code section 23 restrictions, stipulated agreements to restrictions/suspension, and temporary restraining orders. It does not include out-of-state suspension orders, automatic suspension orders, or orders to cease practice while on probation.

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.

## Stipulated Agreement - Median Days

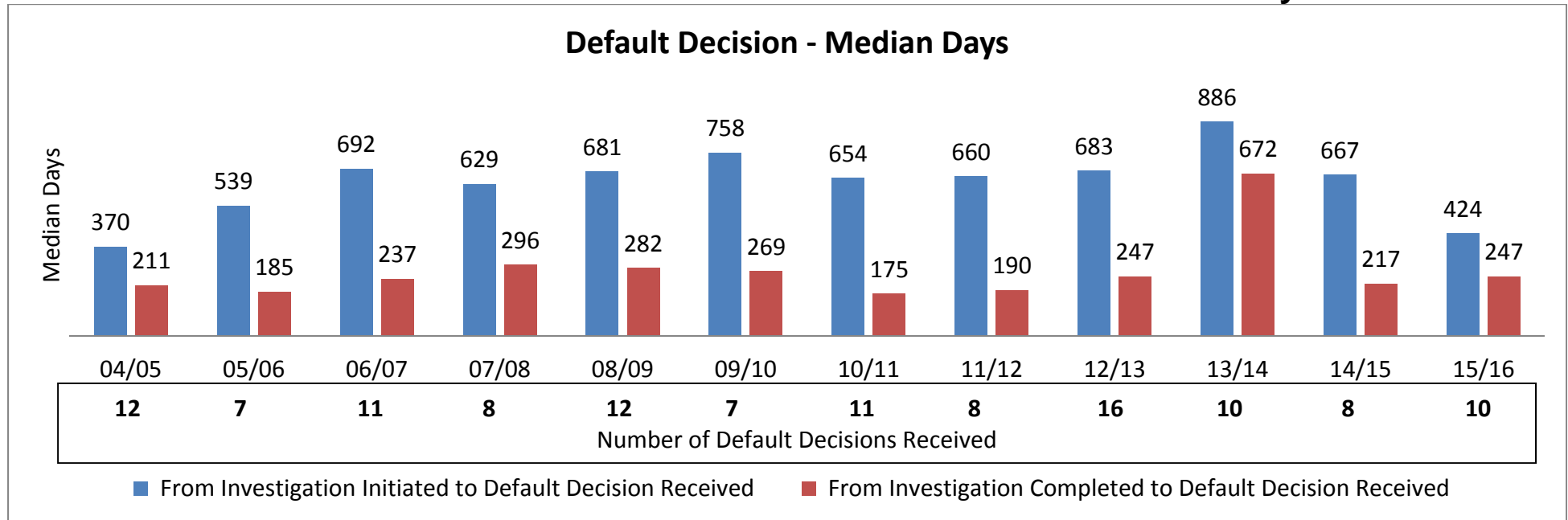


## Proposed Decision - Median Days



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.





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.