

State of California

Department of Consumer Affairs  
Medical Board of California

**MEMORANDUM**

To: Medical Board of California  
Diversion Committee

Date: July 16, 2007

From: Frank L. Valine   
Diversion Program Administrator

Subject: Quality Review Report – 4th Quarter of FY 2006/2007

Attached are the quarterly reports of Quality Review issues requested by the Diversion Committee. They include a review of Intakes, Relapses and Releases during the period of April 1, 2007 through June 30, 2007.

**INTAKES**

A total of 17 physicians contacted the Program during the 4th Quarter. The following charts reflect the outcomes of contact with these physicians as of June 30, 2007, as well as, other categories of information.

Status at Intake	1 <sup>st</sup> Qtr	2 <sup>nd</sup> Qtr	3rd Qtr	4th Qtr	Totals
Active: Approved by DEC & Signed Agreement	0	1	0	0	1
Accepted; Waiting for Signature:	2	1	1	2	6
Intake Complete; Awaiting DEC:	11	4	14	3	32
Contacted Program/Telephone Intake:	8	5	3	9	25
Ineligible:	1	3	0	0	4
Not interested in Program:	5	4	1	2	12
Terminated	0	0	1	1	2
Out-of-State:	1	0	0	0	1
Total Contacts	28	18	20	17	83

Other information	1 <sup>st</sup> Qtr	2 <sup>nd</sup> Qtr	3rd Qtr	4th Qtr	Totals
In Treatment; At intake:	11	5	3	2	21
Currently:	5	4	8	2	19
Referral Type; Board Action:	12	6	7	8	33
Self-Referral:	16	12	13	9	50
Impairment <sup>1</sup> ; Chemical:	17	12	14	14	57
Dual Disorder:	5	6	6	3	20
Mental Only:	6	0	0	0	6
Practicing; Yes:	8	12	9	7	36
No:	20	6	11	10	47

<sup>1</sup> The determination of a participant's status as Chemically Dependent, Dual Disorder, or Mentally Ill frequently changes as additional information is gathered. Initially, the Program receives self-reported information during the intake process. Additional information, resulting in a change of status, may be received during either the evaluative or formal participation periods from evaluation reports and treatment records.

**Table 1: Program Response Times**

Table #1 shows the average response times for intakes (excluding physicians in treatment and those delayed in entry into the Program) during this period, as well as the Program’s target timeframes, from the date the physician initially contacted the Program to the completion of the major steps of the evaluation process. These steps include the first face-to-face contact with Program staff; the intake interview; the initial urine test; and attendance at the first DEC meeting.

	<b>Process</b>	<b>Physicians</b>	<b>Average # of Days</b>	<b>Program Target</b>	<b>Time Periods</b>	<b>Physicians</b>	<b>Percentage</b>
<b>A</b>	<u>From initial contact to Intake Interview</u> (6 of the 17 intakes did not have an intake interview during this reporting period; 1 was being terminated; 2 were not interested; 1 was entered into treatment; 1 have not been performed.	<b>11</b>	<b>16</b>	<b>ASAP</b>	0-7 DAYS 8-14 DAYS 15-21 DAYS 22+ DAYS	4 3 2 2	37% 27% 18% 18%
<b>B</b>	<u>From initial contact to 1<sup>st</sup> urine test</u> [2 of the 17 intakes did not have an initial UA during this reporting period; 1 entered into treatment; 1 not interested in program.	<b>15</b>	<b>11</b>	<b>ASAP</b>	0-7 DAYS 8-14 DAYS 15-21 DAYS 22+ DAYS	10 2 2 1	67% 13% 13% 7%
<b>C</b>	<u>From initial contact to attendance at 1<sup>st</sup> DEC Meeting</u> <i>(No Enforcement Activity)</i> 1 intakes completed and awaiting DEC	<b>1</b>	<b>39</b>	<b>90</b>	0-60 DAYS 61-90 DAYS 91+ DAYS	0 1 0	100%
<b>D</b>	<u>From initial contact to attendance at 1<sup>st</sup> DEC Meeting</u> <i>(With Enforcement Activity)</i> 3 intakes completed and awaiting DEC	<b>2</b>	<b>52</b>	<b>N/A</b>	0-60 DAYS 61-90 DAYS 91+ DAYS	0 2 0	100%

The data in A & B total intakes often misses program target because the process is delayed when the physician is in treatment and unavailable for an intake interview or UDS's.

The number of total intakes shown in C & D does not match the actual number of intakes during the reporting quarter because it takes 60-90 days to schedule the DEC meetings and this report does not include updates from the previous quarter.

Physician Diversion Program – Table 2 - Intake Case (17)

4<sup>th</sup> Qtr FY 2006/2007 April - June 2007

CASE	Status as of June 30, 2007	Enforcement Action	Contacted Program/ Telephone Intake	Intake Interview	1 <sup>st</sup> UDS	DEC Meeting (Scheduled)	COMMENTS
2446	Intake Complete; Initial DEC was 6/15/07	SOU dated 4/3/07	4/3/07	5/7/07	4/10/07	6/15/07	In treatment.
2447	Intake Complete; Initial DEC was 5/30/07	SOU dated 3/27/07	4/5/07	4/12/07	4/10/07	5/30/07	Cannot practice medicine until a work-site monitor has been approved.
2448	Intake Complete; Awaiting DEC	None; Self Referral	4/13/07	5/22/07	4/19/07	None	Full-time work week.
2449	Intake Complete; In treatment	None; Self Referral	4/19/07	5/3/07	4/23/07	None	In treatment on 7/2/07.
2450	In the process of being terminated	Probation Date Of Action 11/29/06	4/18/07	None	4/24/07	None	Restricted from practice.
2451	Intake Complete; Awaiting DEC	Probation Date Of Action 5/7/07	5/7/07	5/14/07	5/14/07	None	Out of practice; Was terminated from Diversion Program on 2/05 and 6/06.
2452	Intake Complete; Awaiting DEC	Probation Date Of Action 5/9/07	5/9/07	5/22/07	5/30/07	None	Full-time work week. On vacation from 5/9/07 – 5/30/07, went on vacation for 3 weeks after contacting program. Had a negative-dilute urine sample on 7/9/07 (No file note. Scheduled for 7/18/07 DEC.
2453	Intake Complete; In treatment	None; Self Referral	5/15/07	6/1/07	6/7/07	None	In treatment at In-take.
2454	Intake Complete; In treatment	Self; Investigating Pending re: assault with firearm	5/16/07	6/7/07	6/7/07	None	In treatment at In-take.
2455	Currently working part-time.	Investigation Pending re: multiple DUIs	5/17/07	5/29/07	5/30/07	None	Restricted work hours up to 20 hours per week. Missed collection on 5/23/07. Per evaluation from BFC. no further in-patient treatment further input treatment recommended. OK to work - Will benefit from Diversion.
2456	Not interested in Program	None; Self Referral	5/23/07	Scheduled for 6/6/06 but was cancelled	5/31/07	None	Out of practice.

CASE	Status as of June 30, 2007	Enforcement Action	Contacted Program/ Telephone Intake	Intake Interview	1 <sup>st</sup> UDS	DEC Meeting (Scheduled)	COMMENTS
2457	In Treatment on 6/21/07 at Betty Ford Center	None	6/18/07	6/20/07	None	None	Self Referral.
2458	Intake Completed	SOU dated 6/13/07	6/18/07	6/25/07	6/24/07	None	Arrested for DUI.
2459	In Out-patient treatment as of 7/5/07	None	6/21/07	None	6/26/07	None	Out-patient treatment.
2460	As of 7/11/07, not sure if wants to be in the program	Arrested for Falsifying prescriptions	6/26/07	None	6/29/07	None	Court date for his arrest is 7/25/07 after being arrested on 6/22/07.
2461	Not interested in Program	None	6/28/07	None	None	None	Not interested in the program after all. Awaiting CM file note to see if he is a threat to the public. Left Betty Ford Center on his own on 7/5/07.
2462	Out of Practice, possibly looking into entering treatment center.	None	6/29/07	None	7/2/07	None	Participant tested positive via an EtG for alcohol on 7/2/07. On 7/5/07, participant relocated to the Bay Area. Participant will be tested in SF and assigned to Jim O'Donnell's SF Group. He will be assessed for the development and consideration of a treatment plan. Formal intake interview to be scheduled. Participant has not at this writing signed an interim agreement.

**EVALUATION PERIOD:** The period between the Participant signing the Interim Agreement and his or her appearance before the DEC is an evaluation period. During this initial assessment period, information from a variety of sources is gathered and reviewed as follows:

- Case Manager's Intake Interview
- Participation at Diversion Group meeting
- Evaluation by an addictionologist and/or a psychiatrist
- Treatment program records
- Lab testing results
- Worksite Monitor reports

KEY TO CASE REVIEW TERMS	
DEC	Diversion Evaluation Committee
GF	Group Facilitator
CM	Diversion Program Case Manager
CC	DEC Case Consultant
PM	Diversion Program Manager
UDS	Urine Drug Screen
PCP	Primary Care Physician
Etg*	Ethyl Glucuronide Lab Screen

\* (Special lab screen for Alcohol; detects Alcohol in the urine for up to 80 hours prior to the date a specimen is collected.)

**RELAPSES (7)**

The table below shows the case details for total participant relapses during the time period reported. There were **7 relapses** during the time frame from **April 2007 – June 2007, the 4<sup>th</sup> Quarter.**

Quarters		1 <sup>st</sup>	2 <sup>nd</sup>	3rd	4th	Totals
Type of Referral:	Board Action:	6	3	2	2	13
	Self- Referral:	2	1	2	5	10
Participant Impairment:	Chemical Dependency:	5	3	2	5	15
	Dual Disorder:	3	1	2	2	8
Length of Time in Program at Relapse:	0-1 year	3			3	6
	1-2 years	2			1	3
	2-3 years		2	2		4
	3-4 years		2	1		3
	4-5 years	2		1	3	6
	7-8 years	1				1
Total with Prior Relapses:		4	3	3	1	11
Method of Detection:	Random UDS:	7	4	3	7	21
	Collector Detection:					
	DUI:					
	Self Report:	1		1		2
	Fellow employee reported:					
Practice Restrictions in Response to Relapse:	Stop Practice Initiated:	5	4	1	5	17
	Stop Practice Continued:	1		3	2	6
Clinical Response to Relapse:	Inpatient treatment:			2	3	5
	Increase group/urine tests:	2				2
	Retesting:				2	2
	Outpatient Treatment:	3			1	4
	DEC further review:	4				4
	Termination:	1		2		3
	Death:				1	1
Withdrew from Program:		1				1

Physician Diversion Program – Relapses (7)

4th Qtr FY 2006/2007 April - June 2007

Case	Current Status	Prior Relapses	Referral	Enforcement Activity	Primary Drug(s)	Mental Health Disorder	Date of Relapse	How Detected
2287	Died of Overdose	No	Self	No	Alcohol.Opiates	No	2/22/07	Random UDS Test
<b>Drugs) of Relapse</b>		<b>Time in Program at Relapse</b>		<b>Program Response to Relapse:</b>				
Fentanyl		2 years, 1 Month		Died of overdose the following morning that the CM notified him of his positive and to immediately stop working.				

Case	Current Status	Prior Relapses	Referral	Enforcement Activity	Primary Drug(s)	Mental Health Disorder	Date of Relapse	How Detected
2102	In treatment	No	Self	No	Meth.	No	4/9/07	Random UDS Test
<b>Drugs) of Relapse</b>		<b>Time in Program at Relapse</b>		<b>Program Response to Relapse:</b>				
Amphetamines		1 year, 1 week		Sent to treatment.				

Case	Current Status	Prior Relapses	Referral	Enforcement Activity	Primary Drug(s)	Mental Health Disorder	Date of Relapse	How Detected
2138	Seeking work	No	Board	SOU	Alcohol, Cocaine	No	4/12/07	Random UDS Test
<b>Drugs) of Relapse</b>		<b>Time in Program at Relapse</b>		<b>Program Response to Relapse:</b>				
Alcohol		3 years, 8 months		Sent to treatment.				

Case	Current Status	Prior Relapses	Referral	Enforcement Activity	Primary Drug(s)	Mental Health Disorder	Date of Relapse	How Detected
2415	Heading to treatment	No	Board	Pending invest.	Oxycontin	Yes	4/27/07	Random UDS Test
<b>Drugs) of Relapse</b>		<b>Time in Program at Relapse</b>		<b>Program Response to Relapse:</b>				
Alcohol		6 months (not officially in program)		Heading to treatment on 8/2/07.				

Physician Diversion Program – Relapses (7)

4th Qtr FY 2006/2007 April - June 2007

Case	Current Status	Prior Relapses	Referral	Enforcement Activity	Primary Drug(s)	Mental Health Disorder	Date of Relapse	How Detected
2444	In treatment	Yes	Self	No	Alcohol	No	5/28/07	Random UDS Test
<b>Drugs) of Relapse</b>		<b>Time in Program at Relapse</b>		<b>Program Response to Relapse:</b>				
Alcohol		2 months (not officially in program)		Sent to treatment.				

Case	Current Status	Prior Relapses	Referral	Enforcement Activity	Primary Drug(s)	Mental Health Disorder	Date of Relapse	How Detected
2448	Working	Yes	Self	No	Alcohol and Darvocet.	No	5/15/07	Random UDS Test
<b>Drugs) of Relapse</b>		<b>Time in Program at Relapse</b>		<b>Program Response to Relapse:</b>				
Propoxyphene		1 month (not officially in program)		Working full-time.				

Case	Current Status	Prior Relapses	Referral	Enforcement Activity	Primary Drug(s)	Mental Health Disorder	Date of Relapse	How Detected
2159	Working	Yes	Self	No	Cocaine, Meth, and Ritalin	Yes	6/25/07	Random UDS Test
<b>Drugs) of Relapse</b>		<b>Time in Program at Relapse</b>		<b>Program Response to Relapse:</b>				
Oxazepam, Temazepam		3 years, 10 months		Off work pending DEC discussion.				



**Physician Diversion Program –  
Releases (14 participants for the time period of April 2007 – June 2007, the 4<sup>th</sup> Quarter)**

<i>Case</i>	<i>Release Status</i>	<i>Type of Referral</i>	<i>Enforcement Activity</i>	<i>Drug (s) of Abuse</i>	<i>Mental Health Disorder</i>	<i>Time in Program at Release</i>	<i>Treatment prior to Diversion</i>	<i>Relapses(s)</i>	<i>Treatment during Diversion</i>	<i>Practice Status at Release</i>
2047	Completed	Self	No	Cocaine	No	5 years	Yes	No	No	Practicing
2063	Completed	Board	Probation	Ambien	Yes	5 years	Yes	No	No	Practicing
2058	Completed	Self	No	Fioricet	No	5 years	Yes	No	No	Practicing
2044	Completed	Self	No	Meth., Cocaine	Yes	5 years	Yes	No	No	Practicing
1993	Completed	Self	No	Alcohol, Valium, Meth.	Yes	5 years, 1 month	Yes	No	No	Practicing
2037	Completed	Board	SOU	Codeine, Ativan	Yes	5 years	Yes	No	No	Practicing
2043	Completed	Self	No	Xanax	Yes	5 years	Yes	No	No	Practicing
1915	Completed	Self	No	Benzos, Opiates	Yes	7 years	Yes	No	No	Practicing
2065	Completed	Self	No	Marijuana, Ecstasy	No	5 years	Yes	No	No	Practicing
2056	Completed	Self	No	Alcohol	No	5 years	Yes	No	No	Practicing
2068	Completed	Self	No	Alcohol	No	5 years	Yes	No	No	Practicing

**Physician Diversion Program –  
Releases (14 participants for the time period of April 2007 – June 2007, the 4<sup>th</sup> Quarter)**

<i>Case</i>	<i>Release Status</i>	<i>Type of Referral</i>	<i>Enforcement Activity</i>	<i>Drug (s) of Abuse</i>	<i>Mental Health Disorder</i>	<i>Time in Program at Release</i>	<i>Treatment prior to Diversion</i>	<i>Relapses(s)</i>	<i>Treatment during Diversion</i>	<i>Practice Status at Release</i>
2050	Completed	Self	No	Sufenta	No	5 years	Yes	No	No	Practicing
1268	Terminated -Unsuccess	Self	No	Alcohol, Meth, Benzos, Soma, Phentermine	Yes	13 Years	Yes	No	No	Referred to Enforcement
2046	Completed	Self	No	Alcohol	Yes	5 years	No	No	No	Practicing