



MEDICAL BOARD OF CALIFORNIA
Executive Office



LICENSING COMMITTEE

Embassy Suites – San Francisco Airport
Mendocino / Burlingame Room
150 Anza Blvd
Burlingame, CA 94010
650-342-4600

February 2, 2012

MINUTES

Agenda Item 1 Call to Order / Roll Call

Dr. Salomonson called the Licensing Committee meeting to order on February 2, 2012, at 3:04 p.m. Mr. Salgado called the roll and a quorum was present.

Members Present:

Janet Salomonson, M.D., Chair
Jorge Carreon, M.D.
Hedy Chang
Silvia Diego, M.D.
Shelton Duruisseau, Ph.D.

Members Absent:

Gerrie Schipske, R.N.P., J.D.

Staff Present:

Douglas Becker, Investigator
Susan Cady, Enforcement Manager
Janie Cordray, Research Program Specialist
Tim Einer, Administrative Assistant
Kurt Hepler, Legal Counsel
Teri Hunley, Business Services Manager
Kimberly Kirchmeyer, Deputy Director
Armando Melendez, Business Services Staff
Regina Rao, Business Services Staff
Anthony Salgado, Licensing Manager
Kevin Schunke, Education Outreach Manager
Anita Scuri, Department of Consumer Affairs, Supervising Legal Counsel
Jennifer Simoes, Chief of Legislation
Laura Sweet, Deputy Chief of Enforcement
Susan Thadani, Senior Investigator

Cheryl Thompson, International Medical School Analyst

Renee Threadgill, Chief of Enforcement
Linda Whitney, Executive Director
Dan Wood, Public Information Officer
Curtis J. Worden, Chief of Licensing

Members of the Audience:

Julie D'Angelo Fellmeth, Center for Public Interest Law (CPIL)
Jack French, Consumer Union Safe Patient Project (CUSPP)
Amanda Friedman, CPIL
Julia Haskins, Blue Shield of CA
Laurel Holmes, CPIL
Tina Minasian, CUSPP
Cheryl Simmons, Blue Shield of CA

Agenda Item 2 Public Comments on Items Not on the Agenda

No public comment was given.

Agenda Item 3 Approval of Minutes from the October 27, 2011 Meeting

It was M/S/C to approve the minutes from the October 27, 2011 meeting.

Agenda Item 4 Update on Licensing Staffing

Mr. Worden provided an update on the Licensing Program staffing. There are currently five vacancies in Licensing. The Licensing Program has approximately 25% of staff in various stages of training.

Agenda Item 5 Updates on the Business Process Reengineering (BPR) Primary Recommendations

Mr. Worden stated that staff is currently working on the following four remaining BPR recommendations:

A. Revision of Physician and Surgeon (P&S) Application and Streamlining Process

Mr. Salgado reported the P&S Application Revision Team continues to work on the revision of the P&S application and it has been submitted to the Licensing staff for review and comments. The complete draft of the application form will be provided to the Licensing Managers for review and edits, and then it will be provided to Executive Staff and Legal staff. Once the application is approved, the Application Revision Team will request feedback from local ACGME residents.

B. Medical Board of California Web Site Related to Applications

Mr. Salgado reported the Web site is concurrently being reviewed as the revision of the P&S application continues to proceed.

C. Study of Postgraduate Training Authorization Letter (PTAL) Process

Mr. Salgado reported the P&S Application Revision Team has been studying whether a separate PTAL application should be created. At this time, staff will continue with one application for both Licensure and the PTAL.

D. Revision of the Policy and Procedure Manual

Mr. Salgado reported there were no new updates to the Policy and Procedure Manual due to staff priorities. The Licensing managers have hired a new analyst who will start working on the Policy and Procedure Manual; however, some steps of the manual will not be modified until the new BreZE computer system is close to being implemented.

Agenda Item 6 Update on SB100 Implementation – Outpatient Surgery Center Requirements

Mr. Salgado reported that the Medical Board of California (MBC) estimates that there are approximately 700 Outpatient Surgery Centers in California. MBC is responsible for approving Outpatient Accreditation Agencies. MBC is not responsible for approval of the Outpatient Settings; however, MBC adopts the regulations for the approval criteria for the outpatient settings.

MBC currently has the following four approved Outpatient Accreditation Agencies:

1. American Association for Accreditation of Ambulatory Surgery Facilities, Inc., located in Illinois
2. Accreditation Association for Ambulatory Health Care, located in Illinois
3. The Joint Commission, located in Illinois
4. The Institute for Medical Quality, located in California

To become an approved accreditation agency in California, an application must be submitted by the accreditation agency and must be approved by MBC. Accreditation agencies must renew every three years. In the renewal process, the accreditation agency must reaffirm that it is in compliance with the standards set out in the Health and Safety Code.

With regards to SB 100 (Price) (Chapter 645 Statutes of 2011), this bill has requirements for the following three entities: MBC, Outpatient Settings, and Accreditation Agencies. Mr. Salgado outlined the requirements for all three of these entities and he reported that MBC has placed this information in the Winter 2011/2012 Medical Board of California's Newsletter. Mr. Salgado also provided a demonstration on the Web site of where to obtain the information.

Public Comment was provided by Tina Minasian and Jack French, with CUSPP regarding this agenda item. Ms. Minasian informed the Board that she and several others from CUSPP had concerns with the appropriate oversight and safety of outpatient surgery centers.

On behalf of CUSPP members, Ms. Minasian requested the following:

1. MBC to include on its Web site, historic information about outpatient setting violations that have been noted by accreditation agencies in the past.
2. MBC to work quickly to coordinate a clear process with the Department of Public Health regarding reporting of adverse events, including CDPH to notify MBC when such events are reported or fines are assessed. MBC to make this information available on its Web site.
3. MBC to investigate whether adverse events involved physician misconduct and communicate to California physicians that they must now report adverse events and inform them that if they don't report them in a timely manner, they can be fined.

Ms. Minasian asked the following two questions:

1. Are there any restrictions for a physician on the number of hours they can operate in an outpatient setting?
2. Can inspections be posted at outpatient surgery centers on a wall, in plain sight, so any patient can see an inspection report and review it?

Agenda Item 7

Agenda Items for May 3-4, 2012 Meeting in Los Angeles, CA

1. Update on SB 100 Implementation on Outpatient Surgery Center requirements
2. Report on what staff is doing to follow up with Section 2168 Special Faculty Permit holders to ensure they are practicing in compliance with the law.

Agenda Item 8

Adjournment

The meeting adjourned at 3:25 p.m.