



# MEDICAL BOARD OF CALIFORNIA

Protecting consumers by advancing high quality, safe medical care.

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Gavin Newsom, Governor, State of California | Business, Consumer Services and Housing Agency | Department of Consumer Affairs

## WebEx

### Quarterly Board Meeting February 9-10, 2023

### MEETING MINUTES

**Thursday February 9, 2023**

***Due to timing for invited guests to provide their presentations, the agenda items below are listed in the order they were presented.***

#### **Members Present:**

Kristina D. Lawson, President  
Michelle Anne Bholat, M.D.  
Randy W. Hawkins, M.D., Vice President  
Laurie Rose Lubiano, J.D., Secretary  
Asif Mahmood, M.D.  
David Ryu  
Richard E, Thorp, M.D.  
Veling Tsai, M.D.

#### **Members Absent:**

Ryan Brooks  
James M. Healzer, M.D.  
Nicole Jeong, J.D.  
Eserick "TJ" Watkins

#### **Staff Present**

Aaron Bone, Chief of Legislation and Public Affairs  
Sean Eichelkraut, Information Technology Manager  
Jenna Jones, Chief of Enforcement  
Jeannele Lopez, Executive Administrative Assistant  
Marina O'Connor, Chief of Licensing  
Letitia Robinson, Research Data Specialist  
Reji Varghese, Deputy Director  
Carlos Villatoro, Public Information Manager  
Kerrie Webb, Staff Counsel

## **Agenda Item 1      Call to Order/Roll Call/Establishment of a Quorum ([Link to video](#))**

Kristina D. Lawson called the meeting of the Medical Board of California (Board) to order on February 9, 2023 at 9:14 a.m. A quorum was present and due notice was provided to all interested parties.

## **Agenda Item 2:      Public Comments on Items not on the Agenda ([Link to video](#))**

[Public Comments on Agenda Item 2 Were Provided By:](#) Hanna Rhee, Susan Lauren, Marian Hollingsworth, Jen Kamel, David Gorcey, Tracy Dominguez, Monique Hines, Eric Andrist, Christina Hildebrand, Moises Espinoza, Monty Goddard, Rosie Arthursdotter, Michele Monserratt-Ramos, Kristen Ogden, Naomi Sweatt, and Xavier De Leon.

## **Agenda Item 3:      Approval of Minutes from the December 1-2, 2022, Quarterly Board Meeting ([Link to video](#))**

Ms. Lubiano requested the addition of Dr. Tsai's comment, in support of her request for a comparison between the Board's legislative proposals and Mr. Watkins' document, to the December 1-2 Meeting Minutes. The vote to approve the December 1-2, 2022 meeting minutes was postponed until the May 2023 Quarterly Board meeting.

[Public Comments on Agenda Item 3 Were Provided By:](#) Eric Andrist, Hanna Rhee, and Rosie Arthursdotter.

## **Agenda Item 4:      President's Report, including notable accomplishments and priorities ([Link to video](#))**

President Lawson mentioned 2023 is a Sunset Review year for the Board and the Sunset Report was published on the Board's website. The Board's Sunset hearing is scheduled for March 16, 2023, and she encouraged the public to visit the websites of the Senate and Assembly to review any details published so far regarding sunset.

President Lawson mentioned Board staff have been in contact with the Legislature and other stakeholders related to the Board's proposals in the Sunset Report and staff will increase those communications as the March 16, 2023 hearing approaches. She mentioned that she and Dr. Hawkins will be the points of contact for Sunset matters and are actively working with staff, as well.

President Lawson addressed a question regarding the Board's proposal related to a Complainant Liaison Unit and referred the public to page 187 of the Sunset Report for details of the proposal, adding that the Complainant Liaison Unit was discussed in the two previous Board meetings. She thanked Mr. Bone and staff for their work with the Sunset Report and Interim Executive Director Reji Varghese for his hard work since the departure of former Executive Director William Prasifka.

President Lawson concluded her report with some housekeeping items and mentioned that, due to a scheduling conflict, she will not be in attendance at May Quarterly Board meeting and Dr. Hawkins will lead that meeting in her absence.

[Public Comments on Agenda Item 4 Were Provided By:](#) Susan Lauren, Christina Hildebrand, Rosie Arthursdotter, and Hannah Rhee.

**Agenda Item 5: Board Member Communications with Interested Parties ([Link to video](#))**

Board members discussed their contacts with members of the public and stakeholders.

[Public Comments on Agenda Item 5 Were Provided By:](#) Eric Andrist, Hanna Rhee, and Rosie Arthursdotter.

**Agenda Item 6: Executive Management Report ([Link to video](#))**

Mr. Varghese discussed the administrative update. The Board is currently at a 19 percent vacancy rate which equals 34 vacant positions and discussed putting in place various approaches to maximize hiring and to increase staff retention rates such as attending job fairs, recruitment, training, and allocating tasks that align with skill sets, team building activities, offering telework and flexible work schedules wherever applicable, and conducting exit interviews.

Mr. Varghese discussed budget updates mentioning minimal revenue growth and revenue projections with significant expenditure increases continue to deplete MBC funds. Mr. Varghese stated a large portion of the costs are outside of the Board's control including statewide general administrative expenses, FISCAL costs, supplemental pension payments, Health Quality Investigation Unit (HQIU) budgetary increases, Attorney General's Office (AGO) caseload and payments, defending against civil lawsuits and several other expenses. Mr. Varghese mentioned the Board is currently operating on a \$10 million loan from another fund and the Board may need another loan to maintain a positive fund balance. Mr. Varghese mentioned an additional fee increase must be in place this year to place MBC in a sustainable financial path.

Mr. Varghese discussed Media Relations and Public Relations updates mentioning the Public Information Department was very active during December 2022 and January 2023, including publishing the 2022 fourth quarter edition of the MBC newsletter.

Mr. Varghese briefly discussed the Workforce Data Survey and mentioned a newly redesigned survey went into effect July 1, 2022, and to date over 37, 000 licensees have completed the survey.

Mr. Varghese provided an update on the Complaint Tracking System. The Board is actively working to schedule the first of two meetings in the second half of February or the first half of March. More details will be shared with the Board as the plans are finalized.

Mr. Varghese discussed the electronic wallet card generator, which allows licensees to generate their own wallet cards online, thereby saving the Board time and money related to the printing and mailing of plastic cards to licensees. To date over 51,000 wallet cards have been generated online.

Mr. Varghese discussed the DOCS portal update and said it allows medical schools and postgraduate training schools to electronically submit primary source verification documents securely to MBC on behalf of the licensing applicant. Since early 2020, more than 46,000 documents have been uploaded for over 14,000 applicants.

Mr. Varghese provided an Enforcement Monitor update and indicated the review is progressing at a good pace, and the monitor continues to engage with the MBC Enforcement and Information Systems Branch staff, as well as HQUI and AGO staff. The preliminary report is expected to be released in the first part of March.

Mr. Varghese stated the Expert Reviewer Program remains a high priority focus. He is encouraged to see an increase in applicants for medical consultants and experts, attributable to various recruitment efforts.

He stated the average days to initiate a complaint within the Central Complaint Unit remains at five days. Mr. Varghese further indicated that the Discipline Coordination Unit and Probation Unit both have several staff vacancies that staff are working to fill with qualified individuals. Mr. Varghese stated he anticipates re-advertising the positions to find suitable candidates.

Mr. Varghese said the Board's Central Investigation Office is adequately staffed with a manageable caseload per investigator.

Mr. Varghese stated the AGO report is included in the Enforcement Summary Update and directed the Board members to Agenda Item 6b-14 to view the one-page report.

Mr. Varghese continued with Licensing updates. Licensing is experiencing high application volume. Last month, the primary focus was to license postgraduate training license (PTL) applicants who needed a license by January 1, 2023. This resulted in increased processing times for licensing applicants. Mr. Varghese stated as of this week only 20 applications are pending and as of this month the Board will no longer accept or process paper PTL applications nor Transition from PTL to Physician's and Surgeon's License forms as part of its transition to a paperless process to improve efficiencies.

Dr. Thorp requested clarification on the DOCS program and asked if it is a universally utilized program. Board members and staff briefly discussed the DOCS program. The Licensing Program's goal is to have all programs and medical schools submit their documents through DOCS on a mandatory basis in an ongoing effort for the program to become paperless.

[Public Comments on Agenda Item 6 Were Provided By:](#) Hanna Rhee, Marian Hollingsworth, Rosie Arthursdotter, Susan Lauren, and Kristen Ogden.

#### **Agenda Item 7: Updates from External Stakeholders ([Link to video](#))**

Ms. Kathleen Nicholls with DCA's Division of Investigation's (DOI) Health Quality Investigations Unit (HQUI) discussed HQUI vacancies of 20 open investigator positions. She indicated there are 15 candidates in background and seven are currently in final psychological and medical reviews with clearances expected soon. She stated there are hiring panels to identify additional candidates in order to fill remaining vacancies. Ms. Nicholls was happy to announce the minimum qualifications have been updated for the investigators by the State Personnel Board in December 2022 to include any degree instead of a requirement for criminal justice degree.

Ms. Nicholls mentioned the Deputy Chief position has been posted with a final filing date of today and interviews will be conducted once applications have been received. She continues to handle HQUI matters until the position has been filled. She said 14 new investigators recently attended a mini academy that highlighted the different types of cases they will be working on.

Ms. Nicholls stated the Department continues to make progress on pending cases over a year old as evidenced in Board Agenda Item 7b. Ms. Nicholls also stated they continue to work with the Boards Enforcement Monitor and had several meetings and consistently provides requested information and discussion on Enforcement matters. She also stated she continues to hold regular meetings with Board staff in addition to sending an automated monthly report with case status updates.

Ms. Melissa Gear Discussed the Diversity, Equity, and Inclusion (DEI) Steering Committee and provided updates regarding its second meeting on January 27, 2023. She advised that additional resources will be forthcoming that the Board can use and incorporate into its Strategic Planning and Communications. Ms. Gear advised that the DEI Steering Committee was working to implement the Governor's Executive Order issued September 2022, which directs state departments to embed DEI into their strategic plans.

Ms. Gear updated the Board on the Enforcement Monitor report stating the initial report has been completed and the Monitor has spent the last six months reviewing data and other documentation from the Board, DCA's Division of Investigations, AGO and conducting interviews with staff from all three agencies. The final report is expected in July 2023.

Ms. Gear gave the Board members a brief description of the Enlighten Enforcement Project, with the Dental Board chosen to pilot the project that's designed to improve efficiency and establish standardized procedures for all board and bureau enforcement programs.

Ms. Gear also provided a reminder to the Board regarding Board member training and provided an overview of the types of training and deadlines for the completion of the training for Board members to remain in compliance with DCA.

Dr. Bholat and Ms. Gear briefly discussed PTL licensing and how to get more information.

President Lawson inquired about AGO requests for additional experts in some cases, and was curious what can be done to ensure everyone across agencies have what they need to make sure the Enforcement program is strong. Ms. Nicholls stated with regard to a particular case, that she did not receive a request for a second expert. Further, she indicated that if there is a concern about a request for a second expert, it would be discussed in their weekly meetings. Mr. Varghese also stated that staff reviewed the matter and could not find any written communication that a request for a second expert was denied by HQUI in this particular case. He indicated that such requests will be handled on a case-by-case basis.

Dr. Thorp expressed concerns stating they could not function as Board while in financial crisis and asked if it would be of help to look at other Boards that are not in financial crisis. Dr. Thorp requested if DCA can provide some information on other boards to compare and find out why the

Medical Board is in financial crisis. Ms. Gear stated she could provide a budget presentation as well as have conversations with the other boards.

Dr. Hawkins asked if DCA plans on being involved with the Legislature and having discussions regarding financial status of various boards and commissions as they come up for some form of review and asked if DCA would be involved with the Legislature to help with boards in a way that is different from the past. Ms. Gear stated they have not done anything different than before.

Mr. Ryu expressed concerns with the decline in complaints for the Fiscal Year 2022-2023 compared to previous fiscal years. Mr. Varghese stated there are still six months left in this fiscal year; however, if the current trend continues, the volume of complaints will still be lower than previous years and the Board can look into it and provide that data. Mr. Ryu confirmed he would like that data to be presented at the next Board meeting.

[Public Comments on Agenda Item 7 Were Provided By:](#) Hanna Rhee, Eric Andrist, and Rosie Arthursdotter.

**Agenda Item 8: Discussion and Possible Action to Approve Regulations Pursuant to SB 1259 (Chapter 245, Statutes of 2022) [\(Link to video\)](#)**

Mr. Bone stated that a new law requires the Board of Pharmacy (BOP) and the Medical Board to update a regulation to allow a pharmacist to independently furnish any FDA approved antagonist which are used to reverse the effects of an opioid overdose.

Ms. Sodergren discussed BOP's engagement with stakeholders and did not receive negative comments on the proposed regulations. BOP approved the text to initiate a 45-day comment period. Should approval be granted by the Medical Board, BOP will initiate the formal rulemaking process and further public engagement.

Board members and staff discussed this bill at length especially with regard to the issue of notification of primary care providers and the issue of patient privacy.

[Public Comments on Agenda Item 8 Were Provided By:](#) Lucas Evenson and Rosie Arthursdotter.

**Dr. Tsai moved to support the proposed regulations /S: Dr. Bholat; Motion carried 8-0**

**Agenda Item 9 : Discussion and Possible Action on the Medical Board of California Strategic Plan [\(Link to Video\)](#)**

Ms. Robinson discussed the highlights of the Strategic Plan in five goal areas.

In Licensing, the Board set objectives to reduce the timeline for licensing, streamline the requirements the verification process, allow applicants to better track their application progress, and increase online application and renewal efficiency.

The Enforcement section includes several objectives geared toward increasing the efficiency of investigatory, disciplinary and probationary activity, as well as decreasing timeframes for case

processing and adjudication. The Board plans to achieve these goals by increasing of the number of medical expert reviewers and improving their effectiveness, assessing the effectiveness of medical consultants' referrals for investigation, considering updates to the disciplinary guidelines, and reviewing the probation violation criteria to improve its effectiveness.

Legislation and regulation objectives include possible statutory changes to improve enforcement process transparency and opportunity for patient communication in the process, restoring sunset review to a 4-year interval, and evaluating licensing statutes for areas of improvement.

Outreach objectives include public stakeholder meetings that promote effective communication with interested parties, an online video on how to write a complaint and easy access to outreach material. Board Administration objectives include timely access to meeting materials, panel voting process improvement, effective and timely communication between executive staff and Board members, implement DEI programs, advocate for appropriate funding, and reduce the Board's AGO and other agency costs.

The Board's next steps for the Strategic Plan is to work with the SOLID Team to develop activities to achieve the goals and objectives.

Ms. Lubiano and Ms. Robinson discussed how staff keeps track of Strategic Plan goals.

[Public Comments on Agenda Item 9 Were Provided By:](#) Hanna Rhee and Rosie Arthursdotter

**Dr. Hawkins moved to adopt the strategic plan /S: Dr. Mahmood; Motion carried 8-0**

## **RECESS**

**Agenda Item 10: Discussion on Business and Professions Code Section 2220.05 (Prioritization of Allegations) and Business and Professions Code 2220.08 (Requirements for Referring Complaints for Further Investigation) ([Link to video](#))**

Ms. Webb presented her discussion on Business and Professions Code (BPC) section 2220.05 and 2220.08.

Ms. Webb discussed Category One cases, which are described as urgent, within DCA's Complaint Prioritization and Referral Guidelines. Complaints in Category One are referred to the Division of Investigation and include, but are not limited, to acts of serious patient/consumer harm, great bodily injury, or death; mental or physical impairment of licensee with potential for public harm, repeated allegations of drug/alcohol abuse; sexual misconduct; overprescribing; gross negligence, or importance resulting in serious harm of injury.

The Board's priorities are set forth in the Business and Professions Code, and the top priority as established by the state Legislature is for cases involving gross negligence, incompetence or repeated negligent acts that resulted in death or serious bodily injury to one or more patients. The Board's other priorities include licensees practicing under the influence, excessive prescribing, and sexual misconduct. She pointed out that these priorities are in line with DCA's priorities.

When it comes to quality-of-care cases, the Board is obligated pursuant to BPC section 2220.08 to send the complaints, relevant medical records, the explanation from the physician, and other evidence to a medical consultant for review to determine if the complaint should be closed or if there is enough reason to believe that further investigation is warranted. This is an additional process that quality-of-care cases must go through before they are sent to the field. This section ensures that reviews are conducted by medical consultants with the relevant education, training, and experience before a referral to the field, which preserves and focuses resources on cases where further investigation is warranted.

If this did not occur, there would be a flood of additional cases that would go to the field for investigation, and Ms. Webb noted that this is an important process for focusing resources on cases where there is enough information there to support the expenditure of additional resources.

Dr. Bholat and Ms. Webb discussed the Board's processes regarding complaints and coordinated efforts across other agencies to investigate complaints. Dr. Mahmood expressed his concerns and asked if there is a way the Medical Board can be informed when there is an unexpected death in a hospital as well as the Department of Public Health.

Dr. Hawkins stated listening to the comments that the Board has an obligation to dig deeper and get closer to what the Board is being asked to do than where it is now, realizing the Board has limitations in certain areas.

President Lawson acknowledged other board's processes are different from the Medical Board's process and agreed with Dr. Hawkins this is something that needs to be discussed further. President Lawson stated specific action could not be taken at this meeting; however, she and several other Board members want this discussed at an upcoming Board meeting.

[Public Comments on Agenda Item 10 Were Provided By:](#) Denise Johnson, Hanna Rhee, Rosie Arthursdotter, Maria Ibarra-Navarrette, Xavier DeLeon, Tracy Dominguez, Naomi Sweatt, Selah O'Connor, Alka Airy, Susan Lauren, Tracey Mueller Gibbs, Patricia Plascencia, Marian Hollingsworth, Christina Hildebrand, Michele Monserratt-Ramos, Kimberly Turbin, and Judith Gorcey.

#### **Agenda Item 11: Discussion on Mandatory Reporting Requirements [\(Link to video\)](#)**

Ms. Jones provided a presentation on Mandatory Reporting for Physicians and Surgeons. Her presentation covered various reports including 805, 805.01, and 805.8 reports. BPC section 2027 governs what information relating to mandatory reports are posted on the website.

Most mandated reports are confidential as complaints. Ms. Jones' presentation covered the reporting of criminal actions; malpractice settlements; judgements and arbitration awards; transfer to hospital or death of a patient in outpatient surgery settings; notification of name change; address of record; and email address.



Ms. Jones also covered other groups that must report to the Board, including insurers; self-insured employers of physicians; state or local government agencies that self-insure physicians; peer review health facility reporting; coroners; court clerks; prosecuting agencies; accredited outpatient surgery settings; and hospitals relating to transfer of planned out-of-hospital births relating to care by a licensed midwife.

Dr. Tsai and Ms. Jones discussed mandatory reporting for sexual misconduct complaints and what 805 report would be appropriate. The Board members engaged in an in-depth discussion regarding 805 reports. President Lawson and Ms. Webb discussed whether the actual 805 report can be posted on the physician's profile; Ms. Webb clarified that certain information regarding qualifying 805 reports must be posted on a physician's profile pursuant to BPC section 2027(b)(7), but the law does not permit the Board to post the actual 805 reports.

[Public Comments on Agenda Item 11 Were Provided By:](#) Naomi Sweatt, Denise Johnson, Rosie Arthursdotter, Susan Lauren, Hanna Rhee, Xavier DeLeon, Alka Airy, Tracy Dominguez, Patricia Plascencia, Michele Monserratt-Ramos, Maria Ibarra-Navarrette, Marian Hollingsworth.

**Agenda Item 12: Discussion and Possible Action on New Legislative Proposals for Technical Changes to Business and Professions Code Section 2224 (Delegation of Authority) and Health and Safety Code Section 123110 (Health Records) ([Link to video](#))**

Mr. Bone discussed staff seeking Board approval of two minor technical legislative proposals, if approved, he will forward them to Legislative Policy Committee managing the Board's sunset review process and seek their inclusion with that legislation later this year.

Mr. Bone stated the first proposal would update the authority of the Executive Director to approve a disciplinary decision without the actions of a Board panel. Currently, the Executive Director may do so in actions that result from a default or from a stipulated settlement to surrender. The proposed amendment to BPC Section 2224 would add cases in which the licensee was subject to automatic revocation. In those circumstances, the Board panel is not required to act to revoke the license as the revocation is required by statute. This change in law supports the timely processing of those actions. The second proposal merely corrects an inaccurate cross reference within Health and Safety Code 123110 related to a provider's authority to charge certain fees to make copies of patient records. Mr. Bone requested Board's approval for these proposals.

Dr. Hawkins requested clarification from Mr. Bone about the changes in the proposal related to the charges to make copies of a patient's medical records.

[Public Comments on Agenda Item 12 Was Provided By:](#) Hanna Rhee.

**Dr. Thorp moved to support seeking the two requested statutory changes S: Dr. Hawkins; Motion carried 8-0**

**Agenda Item 14: Discussion and Possible Action on Recommendations from the Specialty Faculty Review Committee ([Link to video](#))**

Ms. O'Connor presented Agenda Item 14 on behalf of Dr. Healzer and said that on December 14, 2022, the Specialty Faculty Permit Review Committee held a WebEx meeting where the committee discussed one application for Dr. Teodor Pantchev Grantcharov with the Stanford University School of Medicine. Ms. O'Connor referred to materials in Agenda Item 14 that highlighted Dr. Grantcharov's accomplishments, education and background. Ms. O'Connor discussed Dr. Grantcharov's education and training in detail with the Board.

[Public Comments on Agenda Item 14 Was Provided By:](#) No public comments.

**Dr. Thorp moved to approve the recommendation to grant Dr. Grantcharov a special faculty permit /S: Dr. Bholat; Motion carried 8-0**

**Agenda Item 15: Update and Possible Action Related to the Midwifery Advisory Council (MAC) ([Link to video](#))**

Ms. Breglia presented an update on the MAC and requested a motion to appoint a new MAC member and to approve agenda items for the next MAC meeting. The last MAC meeting was on January 5, 2023. Ms. Breglia discussed actions taken and referred to Agenda Item materials provided in 15 a and b. Ms. Breglia discussed two applications for licensed Midwife positions. Both applicants were present at the January 5, 2023 MAC meeting and addressed the MAC regarding their interest in becoming members of the MAC. The MAC voted to recommend Board appointment of Madeline Wisner, to the Licensed Midwife position effective March 1, 2023. Ms. Breglia advised the Board of Ms. Wisner's background, education, and experience.

Additionally, the MAC is requesting approval of the agenda items for the next MAC meeting. Ms. Breglia requested a motion to approve appointment of Ms. Wisner to the MAC and approve the requested agenda items for the next MAC meeting.

[Public Comments on Agenda Item 15 Was Provided By:](#) No public comments.

**Dr. Hawkins moved to support approve Ms. Wisner's appointment to the MAC and to approve the requested agenda items /S: Dr. Mahmood; Motion carried 8-0**

**RECESS**

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**Friday, February 10, 2023**

**Members Present:**

Kristina D. Lawson, President  
Michelle Anne Bholat, M.D.  
Randy W. Hawkins, M.D., Vice President  
Laurie Rose Lubiano, J.D., Secretary  
Asif Mahmood, M.D.  
David Ryu  
Richard E. Thorp, M.D.  
Veling Tsai, M.D.

**Members Absent:**

Ryan Brooks  
James M. Healzer, M.D.  
Nicole Jeong, J.D.  
Eserick "TJ" Watkins

**Staff Present**

Aaron Bone, Chief of Legislation and Public Affairs  
Sean Eichelkraut, Information Technology Manager  
Jenna Jones, Chief of Enforcement  
Jeannele Lopez, Administrative Assistant  
Marina O'Connor, Chief of Licensing  
Letitia Robinson, Research Data Specialist  
Reji Varghese, Deputy Director  
Carlos Villatoro, Public Information Manager  
Kerrie Webb, Staff Counsel

***Due to timing for invited guests to provide their presentations, the agenda items below are listed in the order they were presented.***

**Agenda Item 13: Call to Order/Roll/Establishment of a Quorum ([Link to video](#))**

President Lawson called the meeting of the Medical Board of California (Board) to order on February 10, 2023, at 9:05 a.m. A quorum was present and due notice was provided to all interested parties.

**Agenda Item 16: Executive Director Recruitment and Selection Process ([Link to video](#))**

Ms. Thuanhai Vo, Assistant HR Chief of Classification and Recruitment and Ms. Olivia Trejo, HR Chief, from DCA provided an overview of the Executive Director recruitment and selection process, duty statement and recruitment announcement for the Board.

Dr. Hawkins requested clarification on the recruitment and appointment process.

Dr. Bholat requested information regarding changes to the Duty Statement since the last Executive Director appointment.

President Lawson requested confirmation on the next steps in the recruitment process; Ms. Trejo confirmed the next step would be to form a search committee. President Lawson appointed herself and Dr. Hawkins to the search committee. Board members and DCA staff reviewed and discussed the Duty Statement and requirements for the announcement and statement of qualifications.

[Public Comments on Agenda Item 16 Was Provided By:](#) Virginia Farr and Rosie Arthursdotter.

**Dr. Thorp moved to accept the duty statement as-is, and require three pages for the statement of qualifications and three letters of professional reference as recommended/S: Dr. Hawkins; Dr. Mahmood (abstained) Motion carried 7-0-1**

**Agenda Item 17: Closed Session** ([Link to video](#))

**Agenda Item 18: Adjournment** ([Link to video](#))

President Lawson adjourned the meeting at 9:48 a.m.

Signature on File	May 18, 2023
Kristina D. Lawson, J.D., President	Date
Signature on File	May 18, 2023
Laurie Rose Lubiano, J.D., Secretary	Date
Signature on File	May 18, 2023
Reji Varghese, Interim Executive Director	Date