



**MEETING MINUTES
VETERINARY MEDICAL BOARD**

April 19-20, 2017

Waterfront Hotel
10 Washington Street, Oakland, CA 94607

10:00 a.m. Wednesday, April 19, 2017

1. Call to Order/Roll Call/Establishment of a Quorum

Dr. Cheryl Waterhouse called the Veterinary Medical Board (Board) meeting to order at 10:08 a.m. Executive Officer, Annemarie Del Mugnaio, called roll; eight members of the Board were present and thus a quorum was established.

2. Introductions

Board Members Present

Cheryl Waterhouse, DVM, President
Richard Sullivan, DVM, Vice President
Kathy Bowler, Public Member
Lee Heller, Public Member
Jennifer Loreda, RVT
Judie Mancuso, Public Member
Jaymie Noland, DVM
Mark Nunez, DVM

Staff Present

Elizabeth Bynum, Associate Enforcement Analyst
Annemarie Del Mugnaio, Executive Officer, Veterinary Medical Board
Kurt Heppler, Legal Counsel
Ethan Mathes, Administrative Program Manager
Candace Raney, Enforcement Manager
Louis Galiano, DCA Webcast
Tara Welch, Legal Counsel

Guests Present

Susan Abel
Karen Atlas, California Association of Animal Physical Therapists
Shelah Barr
Karen Buchinger, DVM
Jonathan Burke, Department of Consumer Affairs
Stephen Cital, National Association of Veterinary Technicians in America
Po-Yen Chou, DVM, University of California, Davis
Elisa Dowd, DVM, Contra Costa Veterinary Medical Association
Judy Duff

Nancy Ehrlich, RVT, California Registered Veterinary Technicians Association
Valerie Fenstermaker, California Veterinary Medical Association
William A. Grant II, DVM, Multidisciplinary Advisory Committee
Sandy Gregory, RVT, California Registered Veterinary Technicians Association
Kristin Hagler, RVT, Academy of Physical Rehabilitation Veterinary Technicians
Tameka Island, California Physical Therapy Association
Jay Kerr
Jon Klingborg, DVM, Multidisciplinary Advisory Committee
Amy Kramer
Bonnie Lutz, Esq., Klinedinst PC
Grant Miller, DVM, California Veterinary Medical Association
Allyne Moon, California Registered Veterinary Technicians Association
John Pascoe, DVM, University of California, Davis
Ken Pawlowski, DVM, California Veterinary Medical Association
Scott Pomerantz
Lynn Rieder
Cindy Savely, RVT, Sacramento Valley Veterinary Technician Association
Marshall E. Scott, DVM, California Veterinary Medical Association
Dianne Sequoia
Kerrin Shettle
Leah Shufelt, RVT, California Veterinary Medical Association
Solomon Stupp
James Syms, PT, Dsc, California Physical Therapy Association
Erin Troy, DVM
Janet Van Dyke, DVM, American College of Veterinary Sports Medicine and Rehabilitation
Jessica Waldman, DVM
Cynthia Wallace

3. Review and Approval of January 18-19, 2017 Board Meeting Minutes

The Board made minor corrections to the meeting minutes.

Allyne Moon made a correction on Page 7 to add “California Registered Veterinary Technicians Association (CaRVTA)” to the list of organizations included in the shelter medicine working group.

- Judie Mancuso moved and Kathy Bowler seconded the motion to approve the January 18-19, 2017 meeting minutes as amended. The motion carried 7-0-1. Lee Heller abstained.

4. Discussion and Possible Board Action on Re-appointing Members to the Multidisciplinary Advisory Committee

Ms. Del Mugnaio clarified that there were no other candidates for the position.

- Judie Mancuso moved and Jennifer Loreda seconded to motion to reappoint Dr. Jeff Pollard to the Multidisciplinary Advisory Committee. The motion carried 8-0.

5. Discussion and Possible Board Action on Re-appointing a Member to the Diversion Evaluation Committee

- Dr. Jaymie Noland moved and Dr. Mark Nunez seconded the motion to reappoint Dr. Lane Johnson. The motion carried 8-0.

6. Proposed Regulations

A. Status of Pending Regulations

Ms. Del Mugnaio noted that the Animal Control Officer (ACO) Training rulemaking file is moving through the process. On March 17, 2017, the Board published a 15-Day Notice of Modified Text to incorporate technical and non-substantive changes to the proposed language. The changes included correcting referenced sections and renumbering subdivisions. No adverse comments were received relating to the language; therefore, the rulemaking file will be submitted to the Office of Administrative Law (OAL).

Legal Counsel, Kurt Heppler, clarified that, although the motion made at the July 2016 Board meeting granting the Executive Officer the authority to make technical and non-substantive changes to the proposed ACO Training regulatory language, the motion was not accurately reflected in the July 2016 meeting minutes. The complete motion can be seen on the Board's webcast.

Lee Heller noted that there was an Animal Rehabilitation discussion that occurred in February 2017 that was not reflected in the Status of Pending Veterinary Medical Board (VMB) Regulations document.

B. Review, Discussion, and Possible Board Action on Amendments to the Disciplinary Guidelines - Section 2006 of Title 16 of the California Code of Regulations

Associate Enforcement Analyst, Elizabeth Bynum, presented the substantive changes identified for the Board's consideration.

Dr. Mark Nunez requested clarification on the change stating that cruelty to animals must be of a "significant nature" in order to trigger a maximum penalty. Ms. Del Mugnaio provided the example that in an animal cruelty case, findings may show that the animal was aggressive and may not necessarily indicate animal cruelty.

Ms. Bynum also presented substantive changes to the language that were added in the October 2015 version, but were later deleted in the April 2017 version.

Dr. Jaymie Noland opined that the wording "at least a quarterly basis" on Page 18, regarding inspections performed by the Board, gives the impression that inspections are performed quarterly or more. Ms. Del Mugnaio clarified that the language gives the Board the "right to" perform quarterly inspections, not necessarily that it "shall" perform quarterly inspections.

Ms. Heller noted that the change on Page 6 "or if there are prior violations of the same type of offense" should be "prior violations of a similar nature," as previously approved by the Board at the January 2017 Board meeting.

On Page 16 of the proposed language, Ms. Heller noted that "a minimum of" should be added before "24 hours per week for the duration of probation..." as previously approved by the Board at the January 2017 meeting.

Bonnie Lutz suggested removing "registered veterinary" from "registered veterinary employees" in Standard Terms and Conditions of Probation, Item #8, since all employees should be notified. Ms. Del Mugnaio agreed.

Ms. Lutz expressed confusion regarding the definition of “non-practice” on Page 16, which is described as not practicing for over 30 days, but also not practicing for a minimum of 24 hours per week. Ms. Del Mugnaio clarified that the “over 30 days” portion of the definition is to accommodate those who go on vacation. The portion of the definition regarding not practicing for “24 hours per week” is for those that work part-time. The intention was to define what part-time practice is permissible under probation.

Also on Page 16, Ms. Del Mugnaio clarified that the notice regarding a Respondent’s period of non-practice lasting more than thirty (30) calendar days could occur 15 days before or after the Respondent’s return to practice.

Ms. Lutz questioned if “obey all laws,” which is always a Standard Term and Condition of Probation, would cover the necessity to hold a premises permit listed on Page 18. Ms. Del Mugnaio clarified that the Guidelines are intended to be a notice to a probationer who may or may not be represented by legal counsel. The message is intentionally duplicative in order to be clear to the probationer. Ms. Del Mugnaio and Ms. Lutz both agreed that it would be helpful to reference the code section.

Ms. Lutz opined that the requirement on Page 19, regarding Supervised Practice, can be onerous on the probationer to find a new supervisor, especially if the current supervisor terminates the relationship suddenly. Ms. Lutz recommended setting a number of days in which a probationer would need to find a new supervisor.

Ms. Del Mugnaio stated that any time a probationer is not under supervision, the probationer is not in compliance with the probation term. Enforcement Manager, Candace Raney, noted that Board staff are aware that it is an undue burden on the probationer to find a new supervisor; however, the Enforcement staff makes every effort to respond to requests as soon as possible, oftentimes within the same day.

Regarding Item #8, Notice to Employees, on Page 15, Ms. Del Mugnaio suggested adding the term “registered” to the following sentence (and is shown in double-underline): “Within fifteen (15) days of the effective date of this ~~decision~~ Decision, Respondent shall cause his/her registered employees to report to the Board in writing, acknowledging the employees have read the Accusation and ~~decision~~ Decision in the case and understand Respondent’s terms and conditions of probation.”

- Judie Mancuso moved and Kathy Bowler seconded the motion to authorize the Executive Officer and Board staff to prepare the necessary rulemaking documents, submit to the Business, Consumer Services, and Housing Agency and the Department of Consumer Affairs for review, and in the absence of any adverse comments, publish a 45-day Notice of Proposed Changes. The motion carried 8-0.

C. Review, Discussion, and Possible Board Action on Amendments and Adopting Modified Language Regarding the Consumer Protection and Enforcement Initiative Regulations – Sections 2003, 2017, & 2042 of Title 16 of the California Code of Regulations

Since the proposed regulatory language for Consumer Protection Enforcement Initiative (CPEI) regulations were approved at the October 2014 Board meeting, Legal has reviewed the language and recommended minor changes. The proposed changes do not change the intent of the language, only to place the language in the appropriate code section, California Code of Regulations (CCR) section 2003.

- Dr. Richard Sullivan moved and Lee Heller seconded the motion to authorize the Executive Officer and Board staff to prepare the necessary rulemaking documents, submit to the Business,

Consumer Services, and Housing Agency and the Department of Consumer Affairs for review, and in the absence of any adverse comments, publish a 45-day Notice of Proposed Changes. The motion carried 8-0.

7. Multidisciplinary Advisory Committee Report – Dr. Jon Klingborg

A. Review, Discussion, and Possible Board Action on Multidisciplinary Advisory Committee Items and Recommendations

Dr. Jon Klingborg summarized the Multidisciplinary Advisory Committee's (MDC) discussion from its meeting on April 18, 2017.

The Complaint Process Audit Subcommittee will be performing on-going semi-annual case review.

CaRVTA provided additional information regarding the list of proposed Registered Veterinary Technician (RVT) extended duties that they submitted for the MDC's discussion and consideration. The MDC opined that some of the tasks may involve surgery or suturing and discussed the varying degrees to which performing the proposed tasks may cause harm. The MDC inquired about the access and need issues as presented by CaRVTA. The MDC agreed to move forward with the development of a subcommittee to research the issues; Chairman Klingborg indicated that he will assign members to the subcommittee following the meeting.

The MDC reviewed legal counsel's guidance on the Federal Drug Mobility Act. The interpretation is that an RVT would be exempt from the Drug Enforcement Administration (DEA) registration requirements when administering, dispensing, or transporting controlled substances as the RVTs operate under the direction of a veterinarian who is registered with the DEA.

Regarding public and private animal shelters, the work of the State Humane Association of California (SHAC) and the California Veterinary Medical Association (CVMA) is ongoing and more information will be reported at the July MDC and Board meeting. Dr. Klingborg confirmed that CaRVTA will also be involved in the discussions.

Dr. Klingborg, Dr. Richard Sullivan, and Ms. Del Mugnaio met with the Board of Pharmacy to discuss veterinary drug compounding. Dr. Klingborg clarified that it is not the intent to allow veterinarians to become compounding pharmacies; instead, the discussion was narrowly focused on the limited sterile and non-sterile compounding that is necessary for patient safety in a veterinary hospital clinic setting.

Regarding drug counseling, Dr. Jeff Pollard and Dr. Richard Sullivan are developing draft language based on the protocols that pharmacists use for human medicine. The MDC will discuss the draft language at their next meeting in July 2017.

Regarding the Sedation vs Anesthesia discussion, Dr. Klingborg noted that the discussion came about in response to the identification of urgent situations in which an animal may need to be sedated or anesthetized in a shelter setting. The discussion then evolved to include emergency situations that are not necessarily life threatening, but are serious in nature. The MDC requested permission from the Board to form a subcommittee to look at these areas more closely.

Regarding the development of Minimum Standards for Spay and Neuter Clinics, the MDC agreed that the existing language for fixed premises is sufficient and no action was taken. The MDC felt that it should be up to the Hospital Inspector to determine what sections of the minimum standards should apply based on the type of veterinary medicine provided at the premises.

Ms. Del Mugnaio clarified that Hospital Inspectors are trained to understand that not all of the minimum standards will apply to each facility. After the inspection has been completed, it is up to the Board staff to determine what areas are truly non-compliant. Ms. Del Mugnaio confirmed that there is a written training protocol for Hospital Inspectors, which continues to evolve as hot topics emerge.

Regarding Minimum Standards for Mobile Specialists, Dr. Klingborg noted that the MDC felt it was difficult to determine patient responsibility on cases involving two or more veterinarians. Therefore, the MDC was unable to develop minimum standards that would adequately address situations where a specialist may provide limited care to a patient who is already under the care of a primary treating veterinarian. It was decided that situations involving mobile specialists would be more appropriately addressed by examining the specifics of each case since the facts of each case are so unique and responsibilities can vary.

The MDC discussed the possibility of allowing Board certification to qualify for an examination waiver when applying for licensure via the reciprocity pathway. The MDC ultimately decided that Board certification should not replace practical experience since the Board certification process is narrowly focused on one area of practice. Dr. Klingborg reminded the Board that Board-certified specialists are not limited from taking the examination and can apply for licensure through the traditional pathway.

- Dr. Jaymie Noland moved and Kathy Bowler seconded the motion to accept the MDC's report. The motion carried 8-0.

Ms. Del Mugnaio noted that the MDC has satisfied their assignment to discuss Item #7, Develop Minimum Standards for Spay and Neuter Clinics, Item #8, Minimum Standards for Mobile Specialists – Responsibility for Case Management, and Item #9, Discuss equivalency pathway for reciprocity applicants to qualify for an examination waiver based on Board certification, and therefore, these assignments will be removed from the MDC's priority assignment list.

- Dr. Richard Sullivan moved and Dr. Jaymie Noland seconded the motion to direct the MDC to form a subcommittee to study the definitions and scope of responsibility for Sedation vs Anesthesia and the emergency protocols for serious and life threatening situations. The motion carried 8-0.

8. Review, Discussion, and Possible Board Action on Recommendations of the Animal Rehabilitation Task Force

A. Discuss Concepts for Possible Inclusion in Construct of Animal Physical Rehabilitation Legislation

Dr. Nunez provided background information on the Animal Physical Rehabilitation (APR) discussion and reviewed the actions taken by the Animal Rehabilitation Task Force over the course of three meetings.

- Dr. Richard Sullivan moved and Lee Heller seconded the motion to accept the report from the Animal Rehabilitation Task Force. The motion carried 8-0.

Mr. Heppler clarified that the document titled "Animal Physical Rehabilitation Act of 2017 Concepts to Consider in Legislation as Prepared by Board Counsel" contains a licensing scheme that the Board may consider, however, the language was not developed in response to any prior Board action or delegation.

June 20, 2016 – Motion #1

- Judie Mancuso moved and Kathy Bowler seconded the motion to accept Motion #1 from the June 20, 2016 Animal Rehabilitation Task Force meeting which reads as follows: “Animal Physical Rehabilitation is defined as the treatment of injury or illness to address pain and improve function by means of physical corrective treatment.” The motion carried 8-0.

June 20, 2016 – Motion #2

- Judie Mancuso moved and Lee Heller seconded the motion to accept Motion #2 from the June 20, 2016 Animal Rehabilitation Task Force meeting which reads as follows: “Animal Physical Rehabilitation does not include relaxation, recreational or wellness modalities, including but not limited to, massage, athletic training or exercise.” The motion carried 8-0.

June 20, 2016 – Motion #3

- Judie Mancuso moved and Lee Heller seconded the motion to accept Motion #3 from the June 20, 2016 Animal Rehabilitation Task Force meeting which reads as follows: “Any proposed changes to existing law and regulations are not an attempt to restrict or amend section 2038 of the California Code of Regulations regarding the provision of Musculoskeletal Manipulation modalities.” The motion carried 8-0.

Ms. Del Mugnaio noted that musculoskeletal manipulation was outside the scope of the Animal Rehabilitation Task Force.

June 20, 2016 – Motion #4

- Lee Heller moved and Judie Mancuso seconded the motion to accept Motion #4 from the June 20, 2016 Animal Rehabilitation Task Force meeting which reads as follows: “Prior to performing or authorizing Animal Physical Rehabilitation, a veterinarian shall establish a valid veterinarian-client-patient relationship as defined in sections 2032.1 or 2032.15 of the California Code of Regulations.” The motion carried 8-0.

Ms. Lutz asked why CCR section 2032.15 was included and opined that it may not be a good idea to include a second veterinarian. Dr. Klingborg clarified that it is not meant to be a referral, but a continuity of care provision.

Dr. James Syms asked if establishing a Veterinarian-Client-Patient Relationship (VCPR) includes determining if physical rehabilitation is appropriate for the animal patient. Dr. Klingborg confirmed that the veterinarian may determine a need for a particular modality, but may also decide that the current health status of the animal does not allow for physical rehabilitation.

October 4, 2016 – Motion #1

- Judie Mancuso moved and Jennifer Loreda seconded the motion to accept Motion #1 from the October 4, 2016 Animal Rehabilitation Task Force meeting which reads as follows: “Veterinarians have sufficient education and training to provide Animal Physical Rehabilitation.” The motion carried 8-0.

Consumer, Kerrin Shettle, felt that only licensed individuals trained in veterinary medicine should be

handling animals.

October 4, 2016 – Motion #2

Jennifer Loredo noted that since the October 2016 Animal Rehabilitation Task Force meeting, the National Association of Veterinary Technicians in America (NAVTA) recognized the Academy of Physical Rehabilitation Veterinary Technicians (APRVT) as the 15th official specialty. Dr. Waterhouse clarified that RVTs recognized with an official specialty are not necessarily allowed to perform their specific disciplines under indirect supervision.

- Jennifer Loredo moved to amend Motion #2 from the October 4, 2016 Animal Rehabilitation Task Force meeting to include RVTs with a specialty from the Academy of Physical Rehabilitation Veterinary Technicians to perform tasks under indirect supervision or a degree of supervision to be determined by the veterinarian. There was no second.

The Board requested more time to research information on APRVT, the 15th official specialty.

NAVTA Board Director, Stephen Cital, offered to provide more information regarding APRVT.

Nancy Ehrlich requested that RVTs be allowed to perform APR under indirect supervision since it has been allowed since the 1970s. Ms. Ehrlich opined that there was no need to increase supervision.

APRVT President, Kristin Hagler, expressed support for RVTs being allowed to perform APR under indirect supervision and requested that the Board consider including the APRVT specialty in the future.

Dr. Nunez opined that it seems inconsistent to allow California licensed physical therapists with advanced certification to provide APR under the degree of supervision to be determined by the veterinarian (Motion from February 2, 2017), but not allow RVTs with advanced certification (Motion #2 from October 4, 2016).

Ms. Loredo pointed out that Motion #2 from the October 4, 2016 Animal Rehabilitation Task Force meeting is contradictory to Motion #3 from the October 4, 2016 Animal Rehabilitation Task Force meeting.

- Dr. Richard Sullivan moved and Judie Mancuso seconded the motion to accept Motion #2 from the October 4, 2016 Animal Rehabilitation Task Force meeting, which reads as, “Registered Veterinary Technicians (RVTs) may provide Animal Physical Rehabilitation under the direct supervision of a veterinarian unless in a range setting in which case the veterinarian may provide the appropriate level of supervision” and address new changes during the formal rulemaking process.

Dr. Klingborg clarified that there was an error in the document containing the language for Motion #2 from the October 4, 2016 Animal Rehabilitation Task Force meeting. The language should read “decide” instead of “provide” at the end of the motion. Ms. Del Mugnaio suggested changing “decide” to “determine”. There was no opposition towards Ms. Del Mugnaio’s suggestion and the motion was amended to include the change.

Dr. Sullivan amended his previous motion.

Kathy Bowler opined that there is no need to make the motion since it is currently in practice today. Ms.

Del Mugnaio clarified that this is a policy decision consideration and the Board must decide if RVTs should be under a different level of supervision when providing APR. Voting on the motion as stated would reinforce the Board's position on what is current standard of practice.

- Dr. Richard Sullivan moved and Judie Mancuso seconded the motion to change language in Motion #2 from the October 4, 2016 Animal Rehabilitation Task Force meeting to "Registered Veterinary Technicians (RVTs) may provide Animal Physical Rehabilitation under the degree of supervision to be determined by the veterinarian who has established the veterinarian-client-patient relationship". The motion carried 6-2. Jennifer Loredo and Kathy Bowler opposed the motion.

October 4, 2016 – Motion #3

Ms. Loredo opined that it does not make sense to require RVTs to have direct supervision, because if an RVT is required to provide direct supervision over a veterinary assistant, that means the veterinarian, RVT, and veterinary assistant would all need to be in the building.

Ms. Del Mugnaio referenced CCR section 2036.5(b) which provides the authority for a veterinarian to direct a veterinary assistant to perform APR under indirect supervision.

Mr. Cital pointed out that physical therapists would be considered veterinary assistants.

- Dr. Richard Sullivan moved and Jennifer Loredo seconded the motion to reject Motion #3 from the October 4, 2016 Animal Rehabilitation Task Force meeting which reads as follows: "Veterinary Assistants may provide Animal Physical Rehabilitation under the direct supervision of a veterinarian or an RVT." The motion carried 6-2. Dr. Mark Nunez and Judie Mancuso opposed the motion.

Dr. Marshall Scott expressed opposition towards the motion since there are a variety of physical therapy modalities that require varying degrees of skill. Dr. Scott opined that it should be under the discretion of the veterinarian to determine what level of supervision should be applied.

To Dr. Scott's point, Dr. Noland noted that cold therapy is considered physical therapy and would not typically require direct supervision.

- Jennifer Loredo moved and Dr. Richard Sullivan seconded the motion to amend the language originally proposed in Motion #3 from the October 4, 2016 Animal Rehabilitation Task Force meeting to "Veterinary Assistants may provide Animal Physical Rehabilitation under direct supervision of a veterinarian."

Mr. Cital suggested amending Ms. Loredo's motion to include an RVT with advanced training in APR to provide direct supervision to the veterinary assistant. Ms. Loredo accepted Mr. Cital's suggestion. Dr. Sullivan did not accept the suggestion since he felt he did not know enough about the new specialty yet. As a result, Ms. Loredo stood by her original motion.

- Jennifer Loredo moved and Dr. Richard Sullivan seconded the motion to amend the language originally proposed in Motion #3 from the October 4, 2016 Animal Rehabilitation Task Force meeting to "Veterinary Assistants may provide Animal Physical Rehabilitation under direct supervision of a veterinarian." The motion did not carry, with a vote of 4-4. Dr. Mark Nunez, Lee Heller, Judie Mancuso, and Dr. Jaymie Noland opposed the motion.

- Lee Heller moved and Dr. Richard Sullivan seconded the motion to amend the language originally proposed in Motion #3 from the October 4, 2016 Animal Rehabilitation Task Force meeting to “Veterinary Assistants may provide Animal Physical Rehabilitation under the degree of supervision to be determined by the veterinarian who has established the veterinarian-client-patient relationship.”

Ms. Ehrlich opined that the proposed language may allow anyone off the street to perform APR under the indirect supervision of a veterinarian.

Dr. Jessica Waldman felt that the proposed motion would create a loss of consumer protection.

Mr. Heppler noted that a statutory revision may be required for any regulatory changes.

Dr. Sullivan referenced CCR section 2035 which states that the supervising veterinarian shall be responsible for determining the competency of the RVT, permit holder, or veterinary assistant to perform allowable animal care tasks.

Based on Dr. Sullivan’s comment, Ms. Ehrlich opined that there was no need to discuss the motion made at the February 2, 2017 Animal Rehabilitation Task Force meeting.

To clarify the levels of supervision and the responsibilities of the veterinarian, Mr. Heppler described a scenario in which there was possible negligence by the subordinate. For example, the liability would not necessarily fall on the veterinarian if the veterinarian had already satisfied the obligation to determine the competency of an RVT, permit holder, or veterinary assistant, and the individual showed up to work under the influence of drugs or alcohol.

- Lee Heller moved and Dr. Richard Sullivan seconded the motion to amend the language originally proposed in Motion #3 from the October 4, 2016 Animal Rehabilitation Task Force meeting to “Veterinary Assistants may provide Animal Physical Rehabilitation under the degree of supervision to be determined by the veterinarian who has established the veterinarian-client-patient relationship.” The motion did not carry, with a vote of 3-5. Dr. Mark Nunez, Dr. Jaymie Noland, Jennifer Loreda, Kathy Bowler, and Dr. Cheryl Waterhouse opposed the motion.

February 2, 2017 – Animal Rehabilitation Task Force Motion

Dr. Klingborg presented his opinion on the Motion made on February 2, 2017, which identified potential issues in the following areas:

- 1) Physical Therapy education does not cover animals.
- 2) Patient responsibility control and liability (e.g. APR premises have not been defined; it is difficult to determine who is responsible for harming an animal patient when a supervising veterinarian, referring veterinarian, and a Physical Therapist (PT) are all involved).

Dr. Nunez clarified that Dr. Klingborg’s opinion is his own and not representative of the Board’s position.

The Board discussed that the reasoning behind having the veterinarian hold the VCPR was to utilize a team approach; however, this in turn places patient responsibility on the veterinarian who establishes the VCPR.

Ms. Loredo expressed support for a team approach and pointed out that a national accreditation has not yet been established for the Canine Rehabilitation Institute.

Dr. Sullivan pointed out that the Board may only conduct inspections on premises that hold permits. He also inquired about whether or not the Board is considering issuing premises permits to physical therapy facilities and if PTs should be allowed to be managing licensees of those premises.

Dr. Sullivan opined that if APR is considered veterinary medicine, it should fall under the Board and not split between multiple boards.

Ms. Loredo felt that the language, as written, does not provide the Board with jurisdiction over the facilities where APR could be practiced and does not ensure consumer protection.

Ms. Bowler expressed that she would like to see “advanced certification” defined and would like to see an accreditation or license embedded within the language.

- Lee Heller moved and Dr. Mark Nunez seconded the motion to accept the motion made at the February 2, 2017 Animal Rehabilitation Task Force meeting as written, which reads as follows: “California licensed physical therapists with advanced certification in Animal Physical Rehabilitation (with such certification to be defined by the Veterinary Medical Board and Physical Therapy Board working cooperatively) may provide animal physical rehabilitation under the degree of supervision to be determined by the veterinarian who has established a veterinarian-client-patient relationship, on a veterinary premises or an Animal Physical Rehabilitation premises (as defined in regulation by the Veterinary Medical Board and the Physical Therapy Board working cooperatively), or a range setting.”

Shelah Barr felt that the Board’s main concern should be the consumer and that it is important to keep up with human medicine. Ms. Barr opined that APR is effective and the Board should keep up with science and what works for consumers. Ms. Barr felt that the product of the Animal Rehabilitation Task Force was misrepresented to the public and that comments generated from the discussion were represented as fact. She also felt that there have been enough stop gaps written in to reach a reasonable conclusion.

Dr. Syms requested that the Board accept a letter that he provided from the California Physical Therapy Association (CPTA) which was not included in the Board meeting packet. Dr. Syms clarified that the intent of the APR regulation(s) to be promulgated was to authorize PTs with specialized training, not all PTs.

Karen Atlas requested that a packet of letters that did not make it into the Board packet be accepted for consideration. Ms. Atlas reminded the Board that the Animal Rehabilitation Task Force felt that the veterinarian should do the following:

- remain in control over the animal patient;
- have clear oversight of the case;
- first examine the animal patient to determine if APR would be safe and appropriate for the animal patient;
- remain the gatekeeper of the animal patient to ensure optimal safety throughout the duration of the treatment; and
- determine the level of supervision that should be required for the animal patient (including allowing the veterinarian to authorize a PT to perform APR under indirect supervision).

Ms. Atlas expressed support for the suggestion to create an APR premises permit with either the Board or the Physical Therapy Board to solve the issue of assigning Board oversight.

Janet Van Dyke expressed that physical therapy is missing from veterinary care. Ms. Van Dyke encouraged the Board to look at the success in Colorado regarding PTs performing APR. The Colorado APR regulations require the following:

- The PT must register with the CO Veterinary Board to treat animal patients.
- The veterinarian must provide veterinary medical clearance in order for the animal patient to receive APR.
- The veterinarian determines which PT will treat the animal.
- The PT must maintain communication and exchange medical records with the veterinarian within 24 hours.

Ms. Van Dyke shared that Colorado has not received any complaints since implementing this model.

Susan Abel shared a story about her dog that had died after receiving APR and requested that the Board restrict physical therapy from being performed outside of a veterinary facility. Ms. Abel requested that direct veterinarian oversight be required for all types of care, including physical therapy.

Judy Duff shared a story about her dog that had responded well to APR and opined that it would be beneficial to increase access to APR to consumers.

Dr. William Grant reminded the Board that the Animal Rehabilitation Task Force voted unanimously for direct supervision by a veterinarian. Dr. Grant expressed that he is not convinced access is an issue and opined that animals will be harmed if APR is not performed in a veterinary clinic.

A Southern California consumer shared a personal story about her dog that responded well to APR. She expressed support of APR and working jointly with the Physical Therapy Board to develop the regulations.

Dr. Erin Troy stated that it has not been demonstrated that APR is safer without a veterinarian present. Dr. Troy acknowledged that the costs may go up, but opined that onsite collaboration between veterinarians and PTs will increase access. Dr. Troy felt that the amount of APR training offered by the two for-profit APR schools in California is not enough and requested that the Board require the PTs to obtain more APR training.

Ms. Moon recommended that the Board allow a veterinarian to delegate the performance of APR to a licensed PT with Board-approved certification in APR under direct or indirect supervision. Ms. Moon added that if the PT is directed to provide APR under indirect supervision, an RVT, who has been determined to be competent by the veterinarian who established the VCPR, must be present with the PT.

Cynthia Wallace requested that the Board require a veterinarian to actively manage the APR case and expressed that she is not supportive of oversight by multiple boards. Ms. Wallace opined that PTs do not have the medical training or understanding of others species and felt that PTs need certified advanced animal training, at least as comprehensive as RVTs in California, or the equivalent requirements currently in New York or Texas.

Dr. Jessica Waldman referenced her information packet that she asked to be handed to the Board members and noted that veterinary insurance companies may not cover APR if it is not directly supervised by a veterinarian. Ms. Waldman opined that the individual providing APR treatment to an

animal should be able to read the medical record, x-rays, Magnetic Resonance Imaging (MRI) and Computed Tomography (CT) scans; and felt that PTs are not trained in these skills in animals.

Dr. Po-Yen Chou, University of California, Davis, felt that since the Animal Rehabilitation Task Force agreed that APR is the practice of veterinary medicine, APR should be under the supervision of the veterinarian. Dr. Chou also opined that California is different than other States and it is dangerous to assume that the model used in other States would work the same in California. He also felt that there has not been enough research to prove that APR is beneficial to animal patients, nor does he feel consumer access will increase.

Scott Pomerantz shared a story about his dog that had died while under the care of an animal rehabilitation facility. Mr. Pomerantz felt that there is a lack of clarity regarding the responsibility of the rehabilitation veterinarian to notify the owner when the animal is displaying signs or symptoms requiring veterinary care. He expressed concern that rehabilitation veterinarians are not taking responsibility of the case, and instead, leaving the responsibility up to the primary veterinarian.

Mr. Cital submitted NAVTA's formal position: "The role of the Veterinary Medical Board is to protect the animals and the public of the State in which they govern. To that end, it is the belief of NAVTA that only licensed veterinarians and RVTs possess the knowledge and training to plan and supervise APR for veterinary patients. Therefore, we highly recommend a veterinarian or RVT must be present to ensure proper animal handling, to recognize pain and discomfort, and to provide emergency care and assistance as needed in the particular field of APR. PTs may seek further training to allow them to perform APR on veterinary patients but only under supervision by a credentialed veterinary professional to ensure patient safety. Furthermore, having the College of Sports Medicine and the newly approved APRVT, an accredited AVMA-recognized advanced certification for animal physical rehabilitation for credentialed veterinary technicians on more than just one species, now reduces the need for PTs to suggest a dramatic change to the Veterinary Practice Act that undermines the licenses and veterinary profession as a whole."

Ms. Hagler noted that there is a recognizable need for APR, which she feels is addressed through advanced training programs such as the College of Sports Medicine and APRVT. Ms. Hagler expressed support for collaborative work between veterinary professionals and PTs, but urged the Board to require at least an RVT onsite where APR is performed under indirect supervision and a veterinarian, who holds the VCPR, to remain liable for the animal's care.

Dr. Jay Kerr emphasized the Board's role to protect consumers and their animals, and felt that consumers would not be better protected based on the concept of referral to a PT without supervision. Dr. Kerr felt that a lack of veterinary supervision is a disservice to the animals and it is only a matter of time before animals are harmed.

Diann Sequoia feels that the proposed change is not consistent with the Department of Consumer Affairs's mission and the Board's mission for consumer protection, nor would animals be well protected by the proposed change. Ms. Sequoia feels that animal patients should be treated as a whole, rather than only for isolated conditions.

Dr. Ken Pawlowski opined that allowing APR to be performed outside of an animal hospital setting creates complications regarding who to hold liable when an animal is harmed. Since the VCPR cannot be transferred, the veterinarian would ultimately be held liable. Dr. Pawlowski added that PTs are trained in humans, and felt that since there are hundreds of animal species, PTs are not adequately trained to work on animals.

Dr. Elisa Dowd expressed support of veterinarians supervising animal patients while they are receiving APR.

Ms. Heller shared a story about her dog that had responded well to APR. Ms. Heller noted that the recommendation from the Animal Rehabilitation Task Force is to recognize PTs with additional training and certification in APR. She opined that the current market is constrained because PTs can only provide their services in a limited environment, which limits the consumer's access. She suggested that PTs can receive indirect supervision, referral, and oversight by veterinarians as a market-manageable model. Ms. Heller also addressed the misrepresented information regarding the outcome of the Animal Rehabilitation Task Force meetings.

Ms. Loreda felt that making this change would be approving unlicensed activity. Ms. Loreda expressed support for a collaborative effort, but without a national accrediting body for APR, more work needs to be done before making the change.

Judie Mancuso emphasized the importance of providing the best care to animals and provided examples of PTs, RVTs, and veterinarians with advanced training in APR that could be considered appropriate. Ms. Mancuso expressed concern regarding veterinarians not being on the same premises and added that it would be problematic when trying to determine which licensee should be disciplined. She expressed support of requiring PTs to obtain a permit and perform APR under supervision.

Dr. Sullivan noted that Dr. Klingborg had researched 94 APR clinics in California and opined that access is not an issue. Dr. Sullivan added that since APR has been determined to be the practice of veterinary medicine, APR should be handled by the Board.

Dr. Waterhouse shared a story about a licensed PT, certified in APR, who is currently in veterinary school; and when asked why he went to veterinary school, he said he knew he "didn't know enough about dogs."

Ms. Bowler felt uncomfortable with the language as written, including the open-ended wording for off-site practice. Ms. Bowler added that animal species are so different, even within breeds of dogs, and the pain signals are different from humans.

Ms. Heller clarified that the idea behind the Animal Rehabilitation Task Force recommendation is for the veterinarian to determine which animals need to be treated in an animal hospital setting and which ones are safe to be treated at an off-site facility. The Animal Rehabilitation Task Force also recommended working with the Physical Therapy Board to develop the permit and training requirements.

Ms. Heller also clarified that the Animal Rehabilitation Task Force did not specify which credentialing program would be accepted.

- Lee Heller moved and Dr. Mark Nunez seconded the motion to accept the motion made at the February 2, 2017 Animal Rehabilitation Task Force meeting as written, which reads as follows: "California licensed physical therapists with advanced certification in Animal Physical Rehabilitation (with such certification to be defined by the Veterinary Medical Board and Physical Therapy Board working cooperatively) may provide animal physical rehabilitation under the degree of supervision to be determined by the veterinarian who has established a veterinarian-client-patient relationship, on a veterinary premises or an Animal Physical

Rehabilitation premises (as defined in regulation by the Veterinary Medical Board and the Physical Therapy Board working cooperatively), or a range setting.” The motion did not carry, with a vote of 3-5. Dr. Cheryl Waterhouse, Dr. Richard Sullivan, Dr. Jaymie Noland, Jennifer Loreda, and Kathy Bowler opposed the motion.

Ms. Heller noted that any new material presented that was not made available for public review, would be in violation of the Open Meeting Act; therefore, the Board is not able to develop language during the meeting.

Mr. Heppler clarified that if the Board would like to review the issue to determine what can be accomplished through regulations, the item can be placed on the next agenda for discussion.

- Judie Mancuso moved and Dr. Jaymie Noland seconded the motion to amend the motion made at the February 2, 2017 Animal Rehabilitation Task Force meeting to “California licensed physical therapists with advanced certification in Animal Physical Rehabilitation (with such certification to be defined by the Veterinary Medical Board and Physical Therapy Board working cooperatively) may provide animal physical rehabilitation under the direct supervision by a veterinarian who has established a veterinarian-client-patient relationship on a licensed veterinary premises or indirect supervision on a large animal range setting.”

Dr. Nunez expressed that the Board may be doing a disservice to consumers by being overly prescriptive.

Ms. Heller felt that with advanced training, PTs should be able to perform APR under indirect supervision.

Dr. Chou reiterated that APR has been determined to be the practice of veterinary medicine and should be supervised by a veterinarian. Dr. Chou expressed support for Dr. Noland’s motion as amended.

Ms. Moon pointed out that PTs are not licensed or trained to react to, or provide treatment for animals during emergency situations; APR should only be provided by an RVT or a veterinarian.

Ms. Van Dyke opined that it is inappropriate for the Board to take away the veterinarian’s right to determine if APR can be under indirect supervision.

Mr. Cital reminded the Board that there are accredited credentialing programs for APR for RVTs and there are no accredited programs available for PTs at this time.

Mr. Cital also pointed out that there was a recent media release regarding a credentialed APR individual from the Canine Rehabilitation Institute (CRI) who was not an RVT or a PT. Ms. Van Dyke clarified that the individual came from a State that does not license or register RVTs, and also clarified that the course offered through CRI requires 204 hours of contact time and 24 hours of online time.

Mr. Cital pointed out that the consumer may not know that the unlicensed, credentialed individual does not hold an RVT or veterinarian license.

Dr. Grant Miller noted the amended motion removes the ability to prescribe direct supervision by a veterinarian in a range setting.

Ms. Mancuso agreed with Dr. Miller’s point and suggested amending the motion to allow the

veterinarian the option to provide direct or indirect supervision in a range setting.

- Judie Mancuso moved and Dr. Jaymie Noland seconded the motion to amend the motion made at the February 2, 2017 Animal Rehabilitation Task Force meeting to “California licensed physical therapists with advanced certification in Animal Physical Rehabilitation (with such certification to be defined by the Veterinary Medical Board and the Physical Therapy Board working cooperatively) may provide animal physical rehabilitation under direct supervision by the veterinarian who has established a veterinarian-client-patient relationship on a licensed veterinary premises or for large animal practice, the appropriate degree of supervision shall be determined by the veterinarian who established the veterinarian-client-patient relationship in a range setting.” The motion carried 6-2. Dr. Mark Nunez and Lee Heller opposed the motion.

Ms. Del Mugnaio clarified that the recommendations of the Animal Rehabilitation Task Force and the motions voted on by the Board will be communicated to the Legislature, and Legal Counsel and Board staff will determine the most appropriate route for implementation (i.e. regulatory or statutory changes).

- Dr. Richard Sullivan moved and Judie Mancuso seconded the motion to direct Legal Counsel and Board staff to take the recommendations that have been voted on by the Board and provide direction to the Board regarding the appropriate route for implementation, and bring back to the Board for its consideration at the next Board meeting. The motion carried 6-2. Dr. Mark Nunez and Lee Heller opposed the motion.

9. 2017 Legislation Report; Potential Adoption of Positions on Legislative Items

A. SB 673 (Newman) Pet Lover’s specialized license plates

Ms. Del Mugnaio noted that the Senate Bill (SB) 673 amendment transfers the Pet Lover’s License Plate Program to the California Department of Food and Agriculture (CDFA). The Board previously held a support position on the bill since CDFA currently possesses the infrastructure to properly administer the program.

- Dr. Jaymie Noland moved and Dr. Richard Sullivan seconded the motion to support Senate Bill (SB) 673. The motion carried 6-0-2. Judie Mancuso and Dr. Mark Nunez abstained.

B. SB 546 (Hill) Veterinary Pharmacy

Dr. Waterhouse noted that the latest amendments to SB 546 were provided to the Board on April 19, 2017, the previous day.

Ms. Del Mugnaio reviewed three new provisions to SB 546 that the Board has requested of the Legislature. The first provision would change existing statutory language surrounding a “suggested” 20 percent inspection of all registered veterinary premises and instead make the 20 percent inspection language mandatory. The change would assist the Board in securing necessary funding from the Department of Finance. The legislative request, taken from the Board’s 2015 Strategic Plan, would mandate the Board to inspect 20 percent of all veterinary premises on an annual basis and, mandate that all new veterinary premises be inspected within one year of being issued a premises permit.

The second provision added to SB 546 allows students within an American Veterinary Medicine Association (AVMA)-accredited program and those within a recognized program to obtain the necessary experience, including experience in surgery under the immediate supervision of a licensed veterinarian,

and require the school to establish a Memorandum of Understanding (MOU) and details regarding the expected educational outcome of the program and a method for evaluating the educational outcome.

The third provision added to SB 546 staggers the terms in which an individual can petition for a reduction of penalty or reinstatement.

Ms. Del Mugnaio noted that SB 546 is not in its final form and will likely go through more iterations and amendments.

Ms. Ehrlich suggested replacing “administer to animal patients in conjunction” with “while receiving in-patient services” and recommended opposing the bill if the veterinarian must contact the client every time the animal patient must receive treatment.

Ms. Del Mugnaio clarified that the expectations of the Business and Professions Committee include contacting the owner after examining the animal and prior to anesthetizing the animal or administering medication. There are situations in which the owner cannot be reached, but it is the responsibility of the veterinarian to make an effort to inform the client of the medications being administered.

Mr. Heppler identified the triggering condition described in Section 4076 of Pharmacy Law as when a veterinarian, in nonemergency situations and outpatient settings, “prescribes, administers, dispenses, or furnishes a dangerous drug or prescription medicine”.

Ms. Del Mugnaio recommended that the Board take a position of “Support if Amended (SIA)” and bring the conceptual amendments back before the Board the next day, April 20, 2017, for discussion.

Solomon Stupp provided a brief background on the Lizzie initiative.

Ms. Del Mugnaio clarified that the intent of the language was to apply to outpatient settings only, and the client may decline consultation, but does not have to do so each time the same medication is given.

The Board expressed concern that they did not have sufficient time to properly review the amendments to the language since they were only published days before, on April 17, 2017, and the Board received them on April 19, 2017.

Mr. Stupp clarified that he would like to see protection on both sides, for the veterinarian and the client, and expressed support for the inclusion of language that states a client may decline consultation.

- Dr. Richard Sullivan moved and Dr. Mark Nunez seconded the motion to clarify the intent of the language, include an option for the client to decline consultation, and take a “Support if Amended (SIA)” position on SB 546. The motion carried 8-0.

C. AB 485 (O'Donnell) Dogs and cats: adoption and retail sales

The Board agreed to take a watch position on Assembly Bill (AB) 485.

D. AB 942 (Mathis) Personal income taxes: credit: veterinary costs

The Board agreed to take a watch position on AB 942.

10. Public Comment on Items Not on the Agenda

Ms. Ehrlich requested that the Board consider placing a discussion on RVT examination fees on the agenda for the next Board meeting. She also requested the Board research whether California should still require applicants to take and pass both the Veterinary Technician National Examination (VTNE) and a California examination or go back to a California-only examination. Ms. Del Mugnaio noted that the RVT examination fees topic can be placed on the table for consideration; however, there are several items already on the July 2017 Board meeting and it may need to be added to the October 2017 Board meeting agenda.

11. Recess until April 20, 2017, at 9:00 a.m.

9:00 a.m. Thursday, April 20, 2017

12. Reconvene - Establishment of a Quorum

Dr. Waterhouse called the Veterinary Medical Board (Board) meeting to order at 9:05 a.m. Enforcement Manager, Ms. Raney, called roll; eight members of the Board were present and thus a quorum was established.

13. Introductions

Board Members Present

Cheryl Waterhouse, DVM, President
Richard Sullivan, DVM, Vice President
Kathy Bowler, Public Member
Jennifer Loreda, RVT
Judie Mancuso, Public Member
Jaymie Noland, DVM
Mark Nunez, DVM
Lee Heller, Public Member

Staff Present

Annemarie Del Mugnaio, Executive Officer
Ethan Mathes, Administrative Program Manager
Candace Raney, Enforcement Manager
Louis Galiano, DCA Webcast
Tara Welch, Legal Counsel
Diann Sokoloff, Supervising Deputy Attorney General

Guests Present

Ivon Osegueda
Allyne Moon, California Registered Veterinary Technicians Association
Nancy Ehrlich, California Registered Veterinary Technicians Association

14. Review Legal Guidance on DVM Graduates Practicing as RVTs; Discussion and Possible Board Action on Proposed Statutory Amendments to Require Registration

Ms. Del Mugnaio reviewed the Doctor of Veterinary Medicine (DVM) Graduate – RVT Registration memo prepared by Ms. Welch. Ms. Del Mugnaio noted that there is currently no exemption in statute

that allows DVM graduates to practice as RVTs, but it has been in practice for years. Therefore, the Board proposed a regulatory change to require DVM graduates to apply for registration, with a prospective date of January 2019.

Ms. Welch clarified that the concern is whether or not the Board has authority to create the exemption and added that the appropriate approach would be to pursue a statutory change first.

Ms. Del Mugnaio estimated that there are approximately 25-30 DVM graduates currently practicing as RVTs without registration. The focus would be to provide due notice to individuals in this category.

Ms. Welch clarified that those individuals within eight months of graduation may work as an RVT.

Ms. Del Mugnaio clarified that the Board may make a request to pursue legislation, but based on the legislative cycle, the request may not be seen until next year. Ms. Welch clarified that if legislation was pursued next year, the effective date in the proposed language would need to be changed.

- Dr. Richard Sullivan moved and Judie Mancuso seconded the motion to send forward the proposed statutory amendments on DVM graduates practicing as RVTs to the Legislature. The motion carried 8-0.

15. Discuss Implementation Issues Regarding the Veterinary Assistant Controlled Substances Permit Program

Ms. Del Mugnaio clarified that Euthanasia Technicians, ACOs, and Humane Officers are exempt from the Veterinary Assistant Controlled Substances Permit (VACSP) requirements when performing tasks under their narrow scope of responsibility. Any other act that would be considered the practice of veterinary medicine would need to be performed under direct or indirect supervision of a veterinarian.

Ms. Del Mugnaio explained that the narrow scope of Euthanasia Technicians includes the authority to carry sodium pentobarbital; and the scope of ACOs and Humane Officers includes the authority to sedate animals in the field.

In a boarding setting, boarding staff would not be required to obtain a VACSP if they are tasked with providing a continuation of medication based on an existing prescription. Receptionist may also not be required to obtain a VACSP if they are tasked with handing medicine to a client.

Ms. Welch clarified that ACOs are authorized to perform their specific tasks under the Penal Code and they are also required to be fingerprinted under their employment obligation.

Ms. Moon opined that not requiring Euthanasia Technicians to be held accountable is dangerous to the public.

Ms. Del Mugnaio clarified that weekend volunteers would be required to obtain a VACSP.

Ms. Del Mugnaio noted that there has been a backlog due to issues linking the supervisor to the veterinary assistant; however, there has been no backlog with issuing the permits. Administrative Program Manager, Mr. Mathes, clarified that 3,000 applications have been received to date and Board staff are operating under an 8 week processing time for issuing permits.

16. Board Chair Report – Dr. Cheryl Waterhouse

Dr. Waterhouse reviewed a list of outreach activities, trainings, and meetings that have occurred since the last Board meeting, as well as upcoming activities.

February 2, 2017	Dr. Waterhouse, Dr. Nunez, Lee Heller, and Annemarie Del Mugnaio attended the Animal Physical Rehabilitation Task Force meeting in Sacramento, CA.
March 13, 2017	Dr. Waterhouse participated in a webinar by AAVSB on Telemedicine. Dr. Sullivan serves on the AVMA Committee on Telemedicine.
April 2, 2017	Dr. Waterhouse completed Ethics training.
April 17, 2017	Dr. Waterhouse attended the Expert Witness training in Sacramento, CA.
April 22-23, 2017	Dr. Waterhouse attended the CVMA Board of Governors meeting in Anaheim, CA.

Dr. Waterhouse reminded the Board members that they must take the Ethics training and Sexual Harassment Prevention training, as well as a reminder that the Defensive Drivers training must be taken every four years.

17. Registered Veterinary Technician (RVT) Report – Jennifer Loredo

Ms. Loredo updated the Board on the RVT-related topics since the last Board meeting with the following highlights:

- BreEZe will allow retroactive fingerprinting for RVTs that have not yet been fingerprinted.
- NAVTA has recognized APRVT as the 15th official specialty.
- Ms. Loredo will be participating in the AAVSB’s upcoming Occupational Analysis (OA) on the VTNE.
- The OA on the California RVT Examination is now on the Board’s website.

Ms. Loredo identified “RVT Graduates of Foreign Institutions” as a potential future agenda item. Mr. Mathes updated the Board that AAVSB is aware of the request to form a working group and the Board has expressed interest in working with them. No date has been set yet.

18. Executive Officer & Staff Reports

A. Administrative/Budget- Fee Audit Update

Mr. Mathes updated the Board that a third-party contractor, Capitol Accounting Partners (CAP), has already begun work on a 13-week audit of the Board’s fee structure. The cost for the fee audit is approximately \$21,000 and the goal is to provide updates at the meeting in July 2017.

A Budget Change Proposal (BCP) has been approved to increase the appropriation for Attorney General (AG) and Office of Administrative Hearings (OAH) expenditures. The Board’s request will be lumped together with requests from other Boards to form one large Departmental BCP.

Mr. Mathes clarified that the funding for staff positions is covered under a separate BCP and the Board will be requesting permanent funding for staff positions.

Mr. Mathes noted that the Board is experiencing a structural imbalance, where the Board’s expenditures exceed its revenue.

Ms. Del Mugnaio clarified that the Board may increase its fees by regulation without going to the legislature for a change to the statutory cap, but at some point, it will be necessary to increase the statutory cap on application and licensing fees. As a result, the third-party auditor will identify the point at which the Board will need to exceed the statutory cap.

Ms. Del Mugnaio clarified that the lease agreement for the office was under an adjustable rate mortgage; therefore, the rent increased for all tenants within the building.

B. Enforcement

Ms. Raney noted that Expert Witness training was held on April 17, 2017, which included presentations from current Expert Witnesses regarding report writing and testimony at hearings.

Ms. Raney noted that the Board received approximately 750 complaints so far this year, and is on track to receive at least 1,000 complaints by the end of the year.

Ms. Raney added that Board staff continues to meet or exceed the average number of days to complete investigations that do not result in AG action. The investigations that result in AG action were above the Board's performance measure.

Ms. Raney clarified that there are a couple of old cases that are being worked, which contributes to the high number of days to completion..

Regarding staffing, the Enforcement Unit is currently at full staff. Sidney Villareal joined the staff, as well as two Retired Annuitants who are scheduled to be with the Board through the end of June.

C. Licensing/Examination- Update on RVT Examination Validation Study

Mr. Mathes updated the Board that approximately 1,200 VACSPs have been issued as of March 2017.

The State RVT OA is complete and is available on the Board's website. The National RVT OA is expected to be completed by the end of 2017, and the Board's goal is to begin a comparison study of the state and national RVT OA by January 2018.

The Board is also working on transitioning the Board's website to the new State web template, which includes improving the site layout to make it easier for the public to find information.

Mr. Mathes noted that there are spikes throughout the year in which the Board receives a large number of applications. The spikes generally occur toward the end of the calendar year, and over the course of the next several years, the trend is showing an increase of applications received and licenses being issued. Mr. Mathes offered to provide a graph at the next Board meeting to display the historical increase of applications and licenses.

Mr. Mathes clarified that VACSP applications do not get "rejected," but applications may be found "ineligible" based on a felony conviction, for example. Ms. Del Mugnaio clarified that based on the results of fingerprinting, applicants may be "denied," but they are given the opportunity to appeal the denial. Ms. Del Mugnaio confirmed that some VACSP applicants that have been denied.

Ms. Ehrlich opined that the RVT examination pass rates may have gone up because the correct test plan is now up. Ms. Ehrlich added that approximately 2,000 RVTs now appear to have been identified, averaging around two RVTs for every premises permit.

Ms. Del Mugnaio noted that the pass rate of the national RVT examination is on the AAVSB website, which can be provided at the next meeting.

D. Hospital Inspection

Ms. Del Mugnaio noted that the Board has insufficient funds to complete the goal of inspecting 20 percent of premises per year. However, the Board will continue to conduct complaint-driven inspections this fiscal year.

The Board has been working with CVMA to update the Hospital Inspection Checklist. The goal is to make the Hospital Inspection Checklist as user-friendly as possible.

Board staff have also been working on developing a Frequently Asked Questions (FAQ) document. The new website template will include a separate tab specifically for Hospital Inspections. The goal is to develop a webinar for Hospital Inspection training.

Ms. Del Mugnaio noted that the Board issues permits for an average of 100-150 new premises per year.

Dr. Noland, Ms. Heller, and Ms. Bowler expressed that the Hospital Inspection ride-along was informational. The inspectors appear to be sensitive to the effect that random inspections may have on the business operations.

Dr. Miller commended the Board staff on the statement that they published on the current laws and policies regarding marijuana, hemp, and animals, as it has been useful to CVMA's members. Ms. Mancuso suggested adding the item to a future agenda.

19. Future Agenda Items and Next Meeting Dates –

- July 26-27, 2017 (Sacramento)
- October 18-19, 2017 (Fresno)

The following is a list of agenda items to be discussed at the July 2017 Board meeting or a future Board meeting:

- Legislative Report
- Animal Physical Rehabilitation
- Medicinal Marijuana for Animals
- Board Size and Structure
- Strategic Plan Update
- RVT Examination Validation Study and Transition to VTNE
- Review and Consider Developing a Statutory Change Regarding Facility DEA Licenses
- Telemedicine
- Review and Consider Developing a Statutory Change to Eliminate VLE
- Fee Audit Recommendations

Ms. Del Mugnaio noted that the next meeting dates are July 26-27, 2017 (Sacramento), and October 18-19, 2017 (Fresno).

Ms. Loreda requested to add Consideration of Pathways for Foreign Educated RVTs and Tattooing Spay and Neutered Animals.

Ms. Bowler noted that she can present the results on the International Council for Veterinary Assessment (ICVA) survey at next Board meeting in July 2017.

A. Agenda Items for Next Meeting- Review Action Items on Strategic Plan, Telemedicine, Retroactive Fingerprinting

Ms. Del Mugnaio noted that she can provide an update on retroactive fingerprinting.

B. Multidisciplinary Advisory Committee Meetings – July 25, 2017; Sacramento

20. Petition for Reduction of Penalty – Ivon Osegueda – 11:00 a.m.

Supervising Deputy Attorney General (DAG), Diann Sokoloff, opened the reduction of penalty hearing presenting the case against Ivon Osegueda.

SDAG Sokoloff reviewed the contents of the People's Exhibit #1 in its entirety and requested that it be marked into evidence.

Administrative Law Judge, Michael Scarlett, identified the documents Ms. Osegueda submitted to the Board, the hearing notice, and Ms. Osegueda's license certification as Exhibit #1 and the Board's Packet as Exhibit #2.

Ms. Osegueda confirmed that she received Exhibit #1 and Exhibit #2 and had no objections regarding the contents of either exhibit. ALJ Scarlett marked Exhibit #1 and Exhibit #2 into evidence.

Ms. Osegueda represented herself and presented her case for reduction of penalty. Ms. Osegueda answered questions from the SDAG and members of the Board.

ALJ Scarlett closed the hearing.

CLOSED SESSION

21. Pursuant to Government Code Section 11126(c)(3), the Board met in closed session to deliberate and vote on the above petitions and disciplinary matters, including stipulations and proposed decisions.

Petition for Reduction of Penalty – Ivon Osegueda

The Board rejected the petition for reduction of penalty and proposed a modification.

RECONVENE OPEN SESSION

22. Adjournment

The Board adjourned at 3:00 p.m.