# BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY • GAVIN NEWSOM, GOVERNOR DEPARTMENT OF CONSUMER AFFAIRS • VETERINARY MEDICAL BOARD 1747 North Market Blvd., Suite 230, Sacramento, CA 95834-2987 P (916) 515-5220 | Toll-Free (866) 229-0170 | www.vmb.ca.gov



# MEMORANDUM

SUBJECT	14 D. Enforcement Report
FROM	Robert Stephanopoulos. Enforcement Manager
то	Veterinary Medical Board
DATE	July 10, 2020

#### **Staff Update**

Due to the pandemic and to ensure proper social distancing, the majority of the enforcement team is telecommuting full-time (aside from the rare visit to pick up case files, mail letters, etc.). Much of the team was already accustomed to telecommuting once a week; however, the switch to telecommuting full-time has generated new challenges for the team to overcome.

One of the main challenges we face as a team is the inability to physically see and interact with each other in the same environment. Physical presence not only facilitates impromptu case discussions and procedural demonstrations, it is also a key component in cultivating workplace relationships. To address this setback, the enforcement team participates in daily videoconference meetings, which allow for work-related questions and discussions, as well as personal conversations about the current state of the world. These video calls are of absolute importance as they provide a way for staff to address their feelings of isolation and fear and overall morale. Further, the team has embraced the use of Microsoft Teams, utilizing the application for phone calls, procedural demonstrations via screen-sharing, and messaging to staff members and DCA. Although it is more cumbersome than simply walking into another staff member's cubicle and doing a demonstration, the Microsoft Teams application has become a useful tool for staff communication.

The enforcement team has had outstanding empathy during this tough time, and each member has been willing to help teammates when they sense the workload is too much. Examples include: former members of intake stepping up at the end of June to open a large influx of complaints; analysts stepping in to push tasks along for others who are unavailable or overwhelmed; and team members willing to accept new projects to get the Board where it needs to be. The team has accepted these challenges and have done so with a great attitude, which is a credit to not only their work-ethic, but their sense of team and family.

# Attorney General's Office (AG's Office)

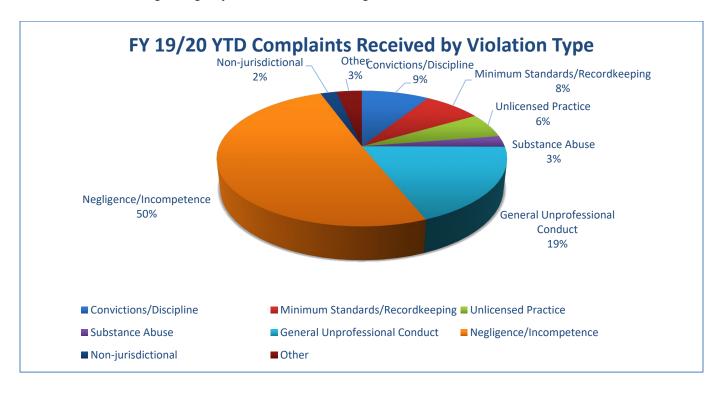
Discipline cycle times rose this year by 29% over last year's 888-day turnaround, which can be attributed to the age of the cases already at the AG's Office; however, the team has been steadfast in keeping tabs on cases with the Division of Investigation, our experts, management, and the AG's Office.

#### Intake

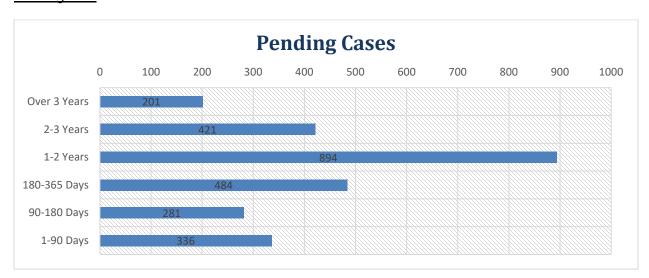
Due to the efforts of the team, the Board met its intake cycle time performance measure of 10 days, while receiving nearly the same amount of cases as last year (around 1300 cases). In addition, there were only six cases pending at intake at the end of the year, despite receiving over 30 cases from licensing in a single day at the end of June. As expected, with the transfer of criminal applicant cases from licensing to enforcement, conviction cases increased by around 30% over last year (166



cases). As demonstrated by the following pie chart, most complaints continue to be high-priority negligence/incompetence complaints (50%), which typically are the most complex and labor-intensive, contributing to high cycle times and backlog.



#### Investigation



Due to the team's hard work and dedication, they closed 22% more cases than the prior year. However, the related cycle times increased (as expected) by about 15%, as the team focused on investigating the oldest (highest priority) cases. As demonstrated by the previous pie chart, cases involving negligence/incompetence make up half of the Board's cases. These most often will require an expert witness review and often will be transmitted to the AG's Office for discipline, which means higher investigation cycle time; this, combined with the high volume of complaints the Board receives and its insufficient staff, translates to an ever-increasing backlog of complaints (currently at 2,416).

#### Division of Investigation (DOI)

Board staff continues to only utilize DOI when it is necessary. As previously explained, in most cases, the evidence necessary to substantiate complaint allegations can be obtained by our inspection unit. The prior gut reaction to send many cases to DOI has been refocused into proper utilization of the resources from our inspections team. Enforcement will still utilize DOI when necessary, as demonstrated by the 11 requests for services in 2019/20; however, this change has reduced the Board's DOI usage in 2019/20 to about a quarter of its usage in 2017/18. This will eventually lower Board costs, as DOI costs are based on usage from two years prior.

# **Key Accomplishments in FY 2019/20**

#### Expedite Consumer Protection (Strategic Plan Objective 1.1)

The enforcement team referred a little less than half the number of cases (34) to the AG's Office this fiscal year as it did the prior year, while 33 cases ended in discipline. This is partly due to the active communication Board staff has with each other and its DAG liaison, Karen Denvir. Such discussions help streamline the enforcement process, lower costs, and expedite discipline in order to protect consumers.

The enforcement team, in collaboration with its expert witnesses and the AG's Office, refreshed the expert witness program to include new guidelines and a sample veterinary-specific expert witness report. The goal of this refresh was to set proper expectations for our expert witnesses and promote consistency in the resulting written reports, strengthening our cases.

The team has significantly reduced DOI usage by utilizing the Board's inspections team to obtain evidence for enforcement investigations. This allows enforcement staff to obtain medical records and information about facilities in a much quicker fashion, at a fraction of the cost (DOI is still used for cases when necessary).

Due in part to the efficiencies implemented, the enforcement team closed 22% more cases than they did during the prior fiscal year.

Further, although the enforcement team has routinely had vacancies, at this time, all vacancies have been filled, which is necessary to maximize efficiency.

Once the Board's Budget Change Proposal is approved, it will provide the enforcement team with an additional six analysts. These analysts will be able to take on the backlog of over 2000 complaints, expediting consumer protection.

Moreover, telecommuting was implemented prior to the COVID-19 pandemic and was an important piece to staff morale. Since this was already in effect, it was a much easier transition to full-time telecommuting when the pandemic hit. Also, staff has embraced the use of technology via the cloud drive, BreEZe, ADA compliance tools, and Board website.

# **Evaluated Citation Limitations (Strategic Plan Objective 1.2)**

At its January Board meeting, staff brought concerns related to the current statutory and regulatory citation authority limitations. As described in more detail <a href="here">here</a>, staff recommended amending Business and Professions Code (BPC) sections 4875.2 and 4875.6 to streamline the citation process, remove conflicting sections, and provide clarity. The Board approved the recommendations and is seeking to include the proposed amendments in its Sunset bill next legislative session.

In addition, at the recommendation of staff (described <u>here</u>), the Board approved a regulatory proposal to strike "while engaged in the practice of veterinary medicine" from California Code of

Regulations section 2043. These changes will allow the Board to resolve less egregious violations through non-formal disciplinary actions.

Despite these limitations, enforcement nearly doubled the amount of citations issued this year than in the prior year.

# Unlicensed Activity Actions and Tools (Strategic Plan Objectives 1.3 and 1.4)

The Board received 12 fewer unlicensed activity complaints this year (60) vs. the prior year; however, nearly half of the Board's 24 citations this year were issued to unlicensed individuals. Further, some of these citations utilize the Board's authority via BPC section 149 to disconnect phone services related to advertisements of unlicensed individuals.

# Website Update (Strategic Plan Objective 1.5)

Although BreEZe provides the ability to look up information on Board licensees and registrations, it does not have a method to search for unlicensed individuals engaged in the unlawful practice of veterinary medicine. Accordingly, the enforcement team worked with the Department of Consumer Affairs (DCA), Office of Information Services (OIS) to create a section on the Board's website to display all public enforcement actions. This will not only allow a consumer to see monthly Board enforcement actions, but it will also display citations issued against unlicensed individuals. OIS has completed the new enforcement section, and the Board will start posting enforcement actions on its website this month.

# Complaint Process Mapping (Strategic Plan Objectives 1.1, 1.6, 1.9, and 1.10)

The enforcement staff has begun working with DCA's SOLID team to map out the Board's current procedures related to each aspect of enforcement. These processes include complaint intake, AG referral, probation monitoring, expert referral, etc. These process maps will directly contribute to streamlining the enforcement process, improving staff training, developing procedure manuals, and increasing enforcement efficiency.

#### Collaboration (Strategic Plan Objective 1.11)

Enforcement has collaborated with other boards, as well as state and local agencies during field investigations, to ensure better consumer protection. These collaborations include providing investigative information to a Board that licenses the subject of our investigation, submitting investigations to the local district attorney's office for criminal prosecution, and working with other state agencies that have jurisdiction over potential violations we uncover during our investigation.

In addition, enforcement continues to meet with representatives from DOI, and the AG's Office to ensure high-quality consumer protection.

# Complaint Priority (Strategic Plan Objective 1.12)

Complaints continue to be prioritized pursuant to BPC section <u>4875.1</u> and are investigated based on the age of these high-priority complaints. These complaints are prioritized at intake, and due to the enforcement team's hard work, we have met our intake performance measure cycle times, while keeping the number of complaints pending at intake to a single day's worth.

# Promoting Transparency (Strategic Plan Objective 1.14)

The inability to timely address the backlog of complaints greatly affects staff, consumers, and licensees, contributing to less-than-cordial encounters. However, the team has done an exceptional job of dealing with the influx of calls/emails from upset consumers regarding processing timelines. Staff has become adept at listening to our stakeholders and empathizing with their concerns, while creating realistic expectations and describing the enforcement process and hurdles.

# Goals for FY 2020/21

#### Expedite Consumer Protection (Strategic Plan Objective 1.1, 1.6, 1.9, and 1.10)

The enforcement team will continue to utilize efficiencies previously implemented over the prior year. In addition, we will be constantly looking for methods to become more efficient through the use of technology such as BreEZe, QBIRT, cloud storage, videoconferencing, etc.

#### Obtain Additional Staff (Strategic Plan Objectives 1.1 and 1.6)

The six analyst positions requested in the Board's Budget Change Proposal will be filled by individuals who take the Board's mission to heart. These analysts will be given the tools and support to succeed and further the Board's goals, while reducing the backlog of complaints.

In addition, management will continue to work on obtaining assistance for the probation unit to ensure exceptional compliance monitoring.

#### Further Utilize BreEZe (Strategic Plan Objectives 1.8 and 1.14)

As requested, staff will continue to innovate via BreEZe to promote better communication with affected parties regarding complaints.

#### Performance Measures (Strategic Plan Objective 1.13)

Board staff will reexamine current performance measures once additional staff are obtained to evaluate whether the target cycle times are in line with consumer protection.

# Finalize Procedure Manuals (Strategic Plan Objectives 1.6 and 1.9)

Staff will continue to work with DCA to craft procedure manuals that reflect consistency and efficiency. The current drafts will be updated once the mapping process is complete, and all staff will have quick access to these tools to perform their duties.

In addition, staff will continue its efforts to further all of the Board's new strategic plan objectives.

#### **Mail Vote Results**

STIPULATED SETTLEMENT	VOTE	RESULT
Megan Dispenza, DVM (Case No. 4602017001048)	6 – Adopt	Adopt
Sahib Singh Vander, DVM (Case No. 4602017001048)	6 – Adopt	Adopt
Mitchell Purcell, RVT(Case No. 4602019000442)	7 – Deny	Deny
Ariell Benter (Case No. 4602019000920)	5 – Adopt 1 – Not Adopt	Adopt
Serge Dana, DVM (Case No. 4602017001045)	7 – Adopt	Adopt
Rae-Lynn Hinkle, RVT (Case No. 4602018000508)	5 – Adopt	Adopt
Shelly Ford-Moberley, DVM (Case No. 4602019000536)	7 – Adopt	Adopt
Carlos Lopez, DVM (Case No. 4602019000193)	5 – Adopt 2 – Hold for Discussion	Hold for Discussion
Sukhwinder Virk, DVM; Alpine Veterinary Hospital (Case No. 4602018000343)	7 – Adopt	Adopt
Michael LaPorte, DVM (Case No. 4602018000737)	7 – Adopt	Adopt
DEFAULT DECISION	VOTE	RESULT
Donna Subocz, RVT, (Case No. 4602019000445)	7 – Adopt	Adopt
PROPOSED DECISION	VOTE	RESULT
Tejpaul Ghumman, DVM; Alta Vista Veterinary Hospital (Case No. 4602017000814)	3 – Adopt 3 – Hold for Discussion 1 - Deny	Hold for Discussion

Thomas Jenkins, DVM (Case No. 1002051061)	5 – Adopt	Hold for
, , , , , , , , , , , , , , , , , , ,	2 – Hold for Discussion	Discussion

# **Petition Hearings**

PETITION FOR TERMINATION OF PROBATION	VOTE	RESULT
Joseph Bisignano, DVM (Case No. AV 2015-32)	7 – Grant	Grant
Miguel Rivera, RVT (Case No. 4602016000269)	7 – Grant	Grant

# **Statistical Report**

			COM	PLAIN	TS ANI	CON	VICTIO	NS						
	FY2018/19						FY	′ 2019/	20					
Complaints and Convictions	YTD	July	Aug.	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	Jun.	YTD
Complaints Received	1215	102	104	96	67	74	96	107	80	86	89	124	114	1139
Convictions Received	123	16	12	6	10	9	12	8	8	17	21	7	40	166
Average Days to														
Intake	44	6	9	10	30	18	7	14	10	4	3	8	17	10
Pending at intake	26	10	21	16	9	17	46	40	36	18	12	28	6	6

Average Days to Intake - Average cycle time from complaint received, to assignment to an investigator.

		UNLIC	ENSE	D ACTI	VITY C	OMPL	AINTS	RECE	VED					
	FY 2018/19						FY	<sup>'</sup> 2019/	20					
Unlicensed Activity														
Complaints	YTD	July	Aug.	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	Jun.	YTD
Received	72	0	0 8 6 1 4 8 10 5 5 3 6 4 60											

	DESK INVESTIGATIONS													
	FY 2018/19						FΥ	<sup>2019</sup> /	20					
Desk Investigation	YTD	July	Aug.	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	Jun.	YTD
Assigned	1133	135	109	108	84	73	79	121	93	121	116	115	178	1332
Closed	512	55	125	75	63	34	33	47	33	40	37	41	42	625
Average Days to														
Complete	269	137	137   197   304   382   414   321   538   259   435   212   427   99   309									309		
Pending	1790	1848	1830	1863	1884	1923	1969	2043	2103	2184	2263	2337	2416	2416

Average Days to Complete Desk Investigations - Average cycle time from complaint receipt to closure.

			S	WORN	INVE	STIGA	TIONS							
	FY 2018/19						FΥ	<sup>2019</sup> /	20					
Sworn Investigations	YTD	July	<del></del>										YTD	
Assigned	20	0	<del>- /                                   </del>										11	
Closed	60	0											11	
Average Days to														
Complete	378	0	0	0	453	574	0	0	674	0	745	669	44	550
Pending	40	12	12	12	8	6	6	6	7	8	7	10	12	12

Average Days to Complete Sworn Investigations - Average cycle time from complaint receipt to closure.

			ALL	TYPES	OF IN	VESTI	GATIO	NS						
	FY 2018/19						F١	/ 2019/	20					
All Types of														
Investigations	YTD	July	Aug.	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	Jun.	YTD
Closed Without														
Discipline	509	56	140	83	62	30	30	40	42	45	38	35	38	639
Cycle Time - No														
Discipline	285	105	166	256	365	385	323	439	342	478	179	337	99	277
All pending cases	1779	1870	1863	1891	1901	1946	2021	2089	2146	2210	2282	2375	2434	2434

	CITATIONS													
	FY 2018/19						F۱	/ 2019/	20					
Citations	YTD	July											YTD	
Issued	13	0	<del>- /                                    </del>									24		
Avg Days to														
Complete Cite	1038	0	0	0	1249	1380	0	0	1108	1766	1464	1189	85	1316
Citations appealed	0	0	0 0 0 0 0 0 0 0 1 0 0 1											

Average Days to Issue a Citation - Average cycle time from complaint receipt to the effective date of the citation.

	ATTORNEY GENERAL CASES													
	FY 2018/19						FΥ	/ 2019/	20					
Attorney General	YTD	July											YTD	
Initiated / Referred to	77	1	1	5	3	8	5	2	2	1	0	4	2	34
Pending at the AG	114	120	108	109	109	104	99	94	95	94	94	98	99	99
Statement of Issues														
Filed	7	0	1	0	0	0	1	0	0	0	0	0	1	3
Accusations Filed	22	2	1	2	1	3	0	0	1	1	3	1	1	16

		AT	TORNI	EY GEN	NERAL	CASE	S CLO	SURE	S					
	FY 2018/19						FΥ	<sup>2019</sup> /	20					
AG Case Action	YTD	July	Aug.	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	Jun.	YTD
Closed Without														
Discipline*	5	0	2	1	0	1	0	1	0	0	0	0	0	5
Closed With														
Discipline	53	5	7	4	2	6	2	2	0	4	1	0	0	33
Average Days to														
Close (Discipline)	888	1555	696	1154	851	830	940	918	0	1963	2384	0	0	1148

Average Days to Close a Discipline Case - Average cycle time from complaint receipt to the effective date of disciplinary order.

<sup>\*</sup>Closed without discipline relates to cases which have been withdrawn, dismissed, or declined by the AG's office.