



## MEMORANDUM

<b>DATE</b>	October 9, 2020
<b>TO</b>	Veterinary Medical Board
<b>FROM</b>	Patty Rodriguez, Inspection Program Manager
<b>SUBJECT</b>	<b>Agenda Item 16.F. Hospital Inspection Program</b>

### **Staff Update**

As staff continues to deal with the pandemic's impacts, they remain working from home to minimize exposure to others, going to the office only when necessary. Due to challenges brought on by COVID-19, two members of the Inspection Team have been assisting with front desk duties and will continue to do so for the time being. Staff continues to make every effort to perform their duties to the best of their abilities under difficult and unfamiliar circumstances. However, some staff are working reduced hours as the pandemic continues to affect different aspects of life. We remain in regular contact utilizing the MS Teams app to collaborate on program issues, continue developing and modifying processes, and provide training. This is especially true as we transition to complaint case reviews and begin preparing complex cases for transmittal to the Attorney General's Office for disciplinary action.

### **Professional Development** (Strategic Plan Objective 3.7)

Inspection staff completed CalHR's Implicit Bias virtual training through their Learning Management System, CalLearns, and are scheduled for upcoming online training classes offered by the Department of Consumer Affairs' (DCA) SOLID training office. Upcoming training includes Best Practices for Working from Home and Introduction to MS Teams, among others. As a manager, I am completing the required 80-hour California Leadership Academy-Supervisor Development Program this month. The Management Team has also completed CalHR's Strategies for Effective Remote Management of People, as well as Strategies for Working as a Remote Team.

### **Inspections Training**

The annual Inspector Training session was conducted remotely via WebEx in August. We have 11 inspectors returning for the 2020-2021 fiscal year. As no new inspectors were added, no field training took place this year. While the training went well, several inspectors stated their eagerness to return to in-person training in 2021. They continue to adjust the way inspections are conducted, always wearing face masks and gloves when conducting inspections and reminding veterinary staff of the need to utilize personal protective equipment.

### **DCA Emails for Inspectors** (Strategic Plan Objective 6.6)

Staff continues to work on improving the correction submission process on Box, DCA's cloud technology for inspection corrections, particularly in the area of monitoring submissions and distributing workload to the analysts. Staff worked with DCA's Office of Information Security (OIS) to provide each inspector with a DCA email to facilitate the use of Box while in the field.

### **Analyzing Inspection Review Process/Maximizing BreEZe** (Strategic Plan 6.5)

Staff continues to map the inspection process with DCA's Organizational Improvement Office to identify gaps and design process improvements.

In addition, staff has been working diligently to understand the importance of BreEZe and how it affects statistical reporting. Ongoing efforts in the area of data cleanup continue. Staff continues to work with OIS on identified gaps in the premises and inspection modules.

### **Increased Licensee Knowledge and Compliance** (Strategic Plan Objectives 6.1)

Staff continues to promote the Hospital Standards Self-Evaluation Checklist at every opportunity, encouraging Managing Licensees and practice managers to conduct mock inspections at their facilities and providing a link to the Checklist when responding to email inquiries concerning minimum standards.

### **Routine/Complaint/Probation Inspections**

As previously reported, the Inspection Unit remains focused on completing complaint and probation inspection compliance reviews in date order, with the oldest inspections first. After the analysts complete the inspection reviews, the cases are returned to the Enforcement analyst. However, in some instances, the Inspection analysts perform the investigation and determine whether to close the case, move forward with a citation, or transmit the case to the Attorney General's Office for formal disciplinary action. The Inspection Unit continues to work with the Enforcement Unit to learn different enforcement processes. However, with training limited to virtual means, this may take longer than in-person training and may affect processing times.

Currently, there are 72 pending complaint-related inspections. With the Enforcement Unit initiating more inspections, these numbers, as well as cycle times, continue to increase. Training will also be provided to the Inspection Unit support staff to review routine compliance documents and assist the analysts in preparing cases for issuance of citations and fines.

The data continues to indicate the additional legislative positions from Senate Bill [1480](#) are inadequate for the present workload, which is worrisome considering the significant drop in routine inspections being performed. Staff will continue collecting data to substantiate a possible Budget Change Proposal (BPC) to support additional staff, if needed.

### **Inspection Survey Results** (Strategic Plan Objective 6.10)

The inspection survey now is included in inspection closure letters. As few inspections have been closed, we have not had any survey results to review. Staff will be working to create a general inspection survey to capture customer satisfaction for all stakeholders with whom the Inspection Unit staff interact. In addition, staff is developing a general inspection survey to gauge customer satisfaction with the internal inspections team.

**Inspections Statistics  
FY 2020-2021**

		Q1			Total
		July	Aug.	Sept.	
Routine	Assigned	0	0	0	0
	Performed	2	0	0	2
	Closed*	0	5	2	7
	Pending**	87	82	78	78
	Avg. Cycle Time***	N/A	1,417	1,222	1,361
	Compliance Rate	N/A	0%	0%	0%
	Document Review	Apr-20	Apr-20	Apr-20	Apr-20
Complaint Related	Requested	2	0	1	3
	Assigned	2	3	0	5
	Performed	6	1	2	9
	Closed*	0	1	1	2
	Pending**	70	73	72	72
	Compliance Rate	N/A	0%	0%	0%
	Avg. Cycle Time***	N/A	615	668	642
Probation Related	Requested	5	0	0	5
	Assigned	5	1	2	8
	Performed	4	3	4	11
	Closed*	0	0	0	0
	Pending**	30	30	32	32
	Compliance Rate	N/A	N/A	N/A	N/A
	Avg. Cycle Time***	N/A	N/A	N/A	N/A
Citations	Issued	0	0	0	0
	Fines Ordered				
	Fines Collected				
	Fines Outstanding				

\*Closed means all corrections have been addressed (or citation issued), and the inspection record is closed.

\*\*Pending means any assigned inspections that have not been closed

\*\*\*Cycle Time means the average number of days from assignment to closure