

TELECONFERENCE MEETING MINUTES MULTIDISCIPLINARY ADVISORY COMMITTEE

Pursuant to Governor Gavin Newsom's Executive Order [N-29-20](#), issued on March 17, 2020, the Veterinary Medical Board met via teleconference/WebEx Events with no physical public locations on **Wednesday, July 22, 2020.**

9:00 a.m., Wednesday, July 22, 2020

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

Multidisciplinary Advisory Committee (Committee) Chair, Dr. Jeff Pollard, called the meeting to order at 9:00 a.m. Veterinary Medical Board (Board) Executive Officer, Jessica Sieferman, called roll; nine members of the Committee were present, and a quorum was established.

Members Present

Jeff Pollard, Doctor of Veterinary Medicine (DVM), Chair
Kristi Pawlowski, Registered Veterinary Technician (RVT), Vice-Chair
Stuart Eckmann, Public Member
Kevin Lazarcheff, DVM
Jennifer Loreda, RVT, Board Liaison
Leah Shufelt, RVT
Richard Sullivan, DVM
Margaret Warner, DVM
Cheryl Waterhouse, DVM, Board Liaison

Staff Present

Jessica Sieferman, Executive Officer
Timothy Rodda, Administration/Licensing Manager
Patty Rodriguez, Hospital Inspection Program Manager
Robert Stephanopoulos, Enforcement Manager
Virginia Gerard, Probation Monitor
Terry Perry, Enforcement Technician
Justin Sotelo, Lead Administrative & Policy Analyst
Tara Welch, Board Counsel, Department of Consumer Affairs (DCA)

Guests Present

Loren Breen, Animal Policy Group
Nancy Ehrlich, RVT, California Registered Veterinary Technicians Association (CaRVTA)
Aubrey Jacobsen, Legislative Analyst, DCA, Division of Legislative Affairs
Shelly Jones, Co-Moderator, DCA, SOLID
Tom Jurach, DCA, Office of Information Services
Grant Miller, DVM, California Veterinary Medical Association (CVMA)
Brittany Ortega, Moderator, DCA, SOLID
Cindy Savely, RVT, Sacramento Valley Veterinary Technician Association
Cesar Victoria, Television Specialist, DCA

2. Committee Chair's Remarks, Committee Member Comments, and Introductions

Dr. Pollard indicated that he would provide comments later on in the meeting.

There were no additional comments.

3. Public Comment on Items Not on the Agenda

There were no public comments.

4. Review and Approval of January 29, 2020 Committee Meeting Minutes

The Committee reviewed the January 29, 2020 meeting minutes.

- Dr. Richard Sullivan moved and Dr. Kevin Lazarcheff seconded the motion to approve the January 29, 2020 meeting minutes. The motion carried 8-0-1, with Ms. Jennifer Loredo abstaining.

5. Update from the Complaint Process Audit Subcommittee; Potential Recommendation to Full Board

Dr. Pollard reviewed the original goal of the Subcommittee, which was to: 1) identify areas of improvement in processing disciplinary cases; and 2) provide greater consistency in the application of the standard of care by expert witnesses reviewing cases. He also asked that members and the audience reference the chronology of Subcommittee meetings and highlights over the last five years, which was available in the January 22, 2019 meeting [materials](#). Dr. Pollard noted that he and Dr. Kevin Lazarcheff have summarized, in previous meetings, what has been done up until now. However, he explained that due to a change in process, he would allow Ms. Sieferman and Enforcement Manager Rob Stephanopoulos to provide an update.

Ms. Sieferman indicated that there was a recent request from a Board member for the Subcommittee to review the entire complaint process from start to finish, and to recommend improvements. She stated that the Subcommittee could do that; however, the Board is currently in the process of mapping its entire process with DCA's Organizational Improvement Office. She explained that the mapping will identify any redundant or unnecessary steps, and ways to streamline the process. Ms. Sieferman indicated that staff would like to complete the mapping first, and then have the Subcommittee review the results. She noted that it will be helpful to have the visual mapping available so that everyone is on the same page.

Ms. Sieferman also reported that the Subcommittee, the enforcement team, and the Board's Deputy Attorney General (DAG) Liaison revamped the expert witness guidelines. She added that instead of making determinations on what specific laws were violated, they are now focusing on the standard of care and the treatment that was provided. She explained that once the new expert witness reports are available, following the new format, they will go to the Board's in-house consultant to make sure the standard of care was correctly applied and there are no biased comments in the reports. She stated that once the consultant approves the report, it is finalized and becomes part of the enforcement file. She also explained that this will allow Board staff to determine up front whether there are any concerns or whether the standard of care was accurately identified, rather than later when the discipline is already final. She stated that this will be a better use of resources and will streamline the process. She also explained that, in the past, there had been concerns about applying statutes and regulations incorrectly

and experts finding conflicting violations, which created confusion and hurt cases. Ms. Siefertman stated that staff and the AG's Office will be charged with identifying the appropriate statutes and regulations.

Dr. Pollard also noted that the Board is utilizing the hospital inspectors to a greater degree, which can be more efficient and cost effective. Ms. Siefertman concurred and explained that, in the past, it was standard for the Division of Investigation (DOI) to go out with Board inspectors, and this caused a lot of delays, due to coordinating schedules and DOI's backlog. She also stated that there are a lot of things that DOI does not need to be present for. However, she explained that the Board still utilizes DOI if a witness needs to be interviewed or if a statement is needed. But she noted that DOI is expensive, charging \$302 per hour and requiring a minimum of 20 hours for easy cases, while the Board only pays \$250 per inspection. She stated that utilizing inspectors is a cost savings, allows the Board to meet the 20 percent mandate, and saves time.

Mr. Stephanopoulos noted that the Board is being more proactive when it comes to expert witnesses. He added that having a new set of guidelines and having a specific veterinary review case as a sample in the guidelines is valuable, and the Board has received positive feedback on that. He also stated that with regard to inspections, there are many times when inspectors identify activities (i.e., unlicensed activity, etc.) that might otherwise require the services of DOI; however, identifying these types of issues during inspections allows the Board to work more efficiently and cost-effectively. He also added that, while the Board has been able to have DOI prioritize many of its cases, it has significantly reduced its usage of DOI in favor of the inspection program.

Ms. Siefertman stated that, not only does this save the Board money, but it also saves the respondent money. She explained that when DOI is utilized by the Board for a disciplinary case, that cost is sent down in the form of cost recovery to the respondent.

Dr. Pollard inquired about the status of expert witness training.

Ms. Siefertman explained that last year, the Board utilized the Medical Board of California's (MBC) training and that seemed to be successful. She stated that staff is reaching out to MBC again to see if they are doing any kind of virtual training this year or next year. She also mentioned that DCA is working on a subject matter expert training that the Board is assisting with, but that staff will need to follow up on. She stated that the Board could create its own virtual training via webinars or recordings that could be sent out to experts.

6. Update and Discussion on Premises Registration Fees; Potential Recommendation to Full Board

Dr. Sullivan reported that the Veterinary Premises Survey was emailed on Friday, July 17, 2020, and the Board was starting to receive responses. He stated that there are approximately 3,300 premises in California, and the Board has email addresses for about 50 percent of them. He noted that if the responses are not sufficient, then the questions could potentially be incorporated into the renewal process, but that would take much longer to receive results. However, Dr. Sullivan indicated that they are hoping to get a sufficient response, so that the data can be used to evaluate whether a tiered fee structure is possible and what that would look like. He also noted that the Board received a couple of inquiries regarding the survey questions. The first question had to do with whether the respondents provide pre-COVID-19 staffing numbers or current staffing numbers (during COVID-19).

Ms. Kristi Pawlowski stated that is a difficult question to address because, while some hospitals have been affected, staffing wise, her clinic has hired more veterinarians and team members than they anticipated during the pandemic. She indicated that she is concerned because there may be a mix of some hospitals closing, some reducing their staff, and some increasing their staff.

Dr. Pollard concurred with Ms. Pawlowski. He then asked how long it may take, once adequate data is received and a tiered fee recommendation is made, to implement a change to RVT fees.

Dr. Sullivan indicated that a proposal would need to be approved by the Board and then may require legislation.

Ms. Sieferman agreed that a recommendation would need to be discussed and considered by the Board. She also explained that all of the Board fees are currently set at their statutory caps, so the Board would need to request increased fee caps as part of its Sunset legislation. She stated that if that occurs, the legislation would take effect in January 2022.

Ms. Pawlowski stated that legislation could potentially take even longer due to COVID-19.

Dr. Pollard stated that given the circumstances, it can minimize the importance of the survey question because the staffing numbers that exist today could be very different a year from now.

Dr. Cheryl Waterhouse suggested that the question be structured around pre-COVID-19 since those numbers would not reflect the range of staffing changes that have occurred during the pandemic. Dr. Pollard and Dr. Lazarcheff agreed.

Dr. Sullivan suggested that the question be added to the premises registration renewal, so that the Board can continue to collect the data and re-check it at three- or five-year intervals. He explained that most clinics, over time, get larger, and dynamics change every year, especially with corporate purchases. He suggested that the Board continue to follow this.

Dr. Waterhouse asked what would be done with the survey information, because the Board is not likely going to get information on the majority of practices.

Ms. Pawlowski responded that it needs to be determined if using a tiered fee approach is going to make up what is needed in order to reduce RVT fees. She stated that one million dollars is needed; or, if one million dollars cannot be made up, an alternative price point needs to be determined.

Dr. Waterhouse asked if a 20 percent survey response rate was achieved, is it going to be assumed that the 20 percent is representative of all practices in the state.

Dr. Sullivan stated that he was hoping for a higher percentage. However, he again suggested adding the question to the renewal application if an adequate response rate is not received. He also stated that if the process is going to take a year, more information can be obtained over nine or ten months. He also stated that he was not necessarily looking at reducing RVT fees down to what they were before, but to reduce them significantly.

Ms. Pawlowski concurred that making up a million dollars in premises registration fees may not be possible, but a realistic price point needs to be determined.

Dr. Waterhouse indicated that the materials indicated that there are 3,360 premises. She stated that if you take the \$995,000 and divide it evenly across the number of premises, that would be about \$300 per practice. She added that if you kept the single doctor practice at \$400, it could be doable.

Dr. Sullivan stated he believed that in two months, it will be known what kind of response the Board is getting with the survey. He stated that the Committee can either make a recommendation at that point or pursue Plan B.

Dr. Waterhouse asked if the Board could start collecting that information on premises renewals now.

Ms. Sieferman explained that if the Board is going to include an insert with a paper renewal, it would take some time for staff to put that together. She also indicated that 90 percent of the premises renew during the month of May.

Dr. Sullivan again stated that he felt the Board should try to obtain the survey information via emails, and if an adequate response is not achieved, then pursue Plan B.

Ms. Tara Welch pointed out that the Board can only collect information, as part of the renewal, that it is statutorily authorized to collect. She explained that if the Board wanted to tie the premises information to the renewal, it still has to be in the form of a survey or information provided voluntarily; it cannot be added to the renewal application as a requirement unless the Board goes through the statutory process. Ms. Sieferman stated that she would suggest doing it as an optional survey.

Dr. Pollard stated that he thought survey results could potentially be available for consideration at the October 2020 meeting. Dr. Sullivan concurred. Ms. Sieferman also stated that reminder emails could sent out or phone calls could be made.

Dr. Sullivan stated that an update would be provided at the next meeting.

7. Election of Officers

Dr. Pollard stated that he would be terming off of the Committee, and a veterinarian would be appointed to the Committee by the Board on July 23 or 24, 2020. He asked for a motion or motions to nominate a new Committee Chair.

- Ms. Leah Shufelt moved and Dr. Cheryl Waterhouse seconded the motion to nominate Ms. Kristi Pawlowski as the new Chair of the Committee. Ms. Pawlowski accepted the nomination. The motion carried 9-0.

Ms. Sieferman congratulated Ms. Pawlowski.

- Ms. Kristi Pawlowski moved and Dr. Cheryl Waterhouse seconded the motion to nominate Dr. Kevin Lazarcheff as the new Vice-Chair of the Committee. Dr. Lazarcheff accepted the nomination. The motion carried 9-0.

Ms. Sieferman congratulated Dr. Lazarcheff.

8. Future Agenda Items, Committee Priorities, and Meeting Dates

Dr. Pollard indicated that he made a list of agenda items that the Committee has addressed over the last six years. He stated that the items were: Minimum Standards; RVT Alternate Route; RVT Student Exemptions; University Licensure; Animal Rehabilitation; Dental Extractions by RVTs; Dental Radiography; Cannabis Guidelines; Complaint Process Audit; and Corporate Medicine.

He noted that future Committee agenda items would include: Cannabis Guidelines (pending legislation); and Complaint Process Audit.

Dr. Pollard also stated that he would like to see the Committee, with the Board's direction, consider: Telemedicine; Dental Radiography (revisited); and Nurse Initiative/RVT.

Dr. Waterhouse stated that she would like the Board to decide whether the Committee should discuss the duties of a managing licensee (MGL) and how many premises one MGL can realistically manage.

Ms. Sieferman stated that one item that may potentially come up is whether the veterinarian-client-patient relationship (VCPR) is tied to an individual veterinarian or to the clinic. She explained that, currently, the VCPR is tied to the individual veterinarian, but there are situations when there are veterinarians providing follow-up care, and there is some confusion and questions as to how that VCPR needs to be re-established for each veterinarian. Ms. Sieferman noted that this issue would likely come up at the July 23, 2020 Board meeting as a future agenda item to consider.

Nancy Ehrlich, RVT, CaRVTA, stated that she would like the Committee to look into approving applications from RVTs who are graduates of RVT schools in other countries that are not already approved in the Practice Act. She indicated that she did not see any reason why the Board could not review applications like these, similar to alternate route applications, and that these would be easier than alternate route applications.

Regarding future meeting dates, Ms. Sieferman stated that the only other finalized Committee meeting date was October 21, 2020. She indicated that this meeting would likely be another virtual meeting. She also noted that the 2021 meeting calendar has not been set yet.

Committee members thanked Dr. Pollard for his work and service.

9. Adjournment

Dr. Pollard adjourned the meeting at 9:56 a.m.