

**VETERINARY MEDICAL BOARD
MULTIDISCIPLINARY ADVISORY COMMITTEE
MEETING MINUTES
July 21, 2021**

Pursuant to Governor Gavin Newsom's Executive Order [N-08-21](#), issued on June 11, 2021, the Multidisciplinary Advisory Committee (Committee) of the Veterinary Medical Board (Board) met via teleconference/WebEx Events with no physical public locations on **Wednesday, July 21, 2021**.

9:00 a.m., Wednesday, July 21, 2021

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

Committee Chair, Kristi Pawlowski, Registered Veterinary Technician (RVT), called the meeting to order at 9:00 a.m. Board Executive Officer, Jessica Sieferman, called roll; seven members of the Committee were present, and a quorum was established. Drs. Kevin Lazarcheff and Jamie Peyton were absent.

Members Present

Kristi Pawlowski, RVT, Chair
Christina Bradbury, Doctor of Veterinary Medicine (DVM), Board Liaison
Jennifer Loreda, RVT, Board Liaison
Maria Salazar Sperber, JD
Dianne Sequoia, DVM
Leah Shufelt, RVT
Richard Sullivan, DVM

Staff Present

Jessica Sieferman, Executive Officer
Matt McKinney, Enforcement Program Manager
Timothy Rodda, Administration/Licensing Manager
Patty Rodriguez, Hospital Inspection Program Manager
Lori Kent, Hospital Inspection Analyst
Justin Sotelo, Lead Administrative & Policy Analyst
Tara Welch, Board Counsel, Attorney III, Department of Consumer Affairs (DCA),
Division of Legal Affairs

Guests Present

Dan Baxter, California Veterinary Medical Association (CVMA)
Kathy Bowler, Board Vice President
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, Moderator, DCA, SOLID
Brianna Miller, Staff Services Manager, DCA, Board and Bureau Relations
Grant Miller, DVM, CVMA
Erin Norwood, Norwood Associates
Mark Nunez, DVM, Board President
John Pascoe, DVM, University of California, Davis
Ken Pawlowski, DVM, CVMA
Dianne Prado, Board Member
Susan Riggs, American Society for the Prevention of Cruelty to Animals
Mike Sanchez, Television Specialist, DCA, Office of Public Affairs
Marie Ussery, RVT

2. Committee Chair's Remarks and Committee Member Comments

Ms. Pawlowski welcomed Dr. Dianne Sequoia to the Committee and asked her to introduce herself.

Dr. Sequoia stated she was happy and honored to join the Committee. She noted she is a small animal practitioner in the San Francisco East Bay Area and graduated from Tufts University, Cummings School of Veterinary Medicine, in 1987. She added she also served on CVMA's Board of Directors, and she was interested in veterinary legislation and regulations. She stated, as a consumer, she feels informed consent and consumer protection is very important. She noted veterinary medicine can be underrealized and underappreciated by the public in terms of what veterinary professionals do every day to serve society. Dr. Sequoia stated she has a broad interest in many issues, she was pleased and proud to serve on the Committee, and she hopes to contribute a lot.

There were no other Committee member or public comments.

3. Public Comment on Items Not on the Agenda

There were no public comments made on this item.

4. Review and Approval of April 21, 2021 Committee Meeting Minutes

The Committee reviewed the April 21, 2021 meeting minutes.

Dr. Sequoia noted Bonnie Lutz, Esq. was referred to as "Mr." on pages 7 and 12 of the meeting minutes. Ms. Sieferman indicated those corrections would be made.

- Ms. Jennifer Loreda moved and Ms. Leah Shufelt seconded the motion to approve the April 21, 2021 meeting minutes, as amended. The motion carried 6-0-1, with Dr. Dianne Sequoia abstaining.

There were no public comments made on this item.

5. [Discussion and Potential Recommendation Regarding Legislative Proposal to Amend Business and Professions Code \(BPC\) Section 4825.1 and Add BPC Section 4826.3, and Regulatory Proposal to Amend Section 2032.1, Article 4, Division 20, Title 16 of the California Code of Regulations \(CCR\) Regarding Telemedicine – Kristi Pawlowski, RVT, and Richard Sullivan, DVM, Telemedicine Subcommittee](#)

Ms. Pawlowski stated, due to the importance of the topic, she prepared a memo she wanted to read to the Committee. She added she wanted the Committee to fully understand what was done by the Telemedicine Subcommittee. She noted the memo was also included with the meeting materials.

In presenting her memo, Ms. Pawlowski explained the information was being provided to the Committee in order to approve legislative and regulatory proposals. She stated the COVID-19 pandemic has highlighted the extreme need for clarification of veterinary telemedicine practice. She noted the DCA Director's waivers of the veterinarian-client-patient relationship (VCPR) may soon be expiring. Ms. Pawlowski explained there is therefore an urgent need to get clarification of telemedicine practice in statute this year.

Ms. Pawlowski stated, due to the impending legislative deadlines, if the Committee approves the legislative and regulatory recommendations at this meeting, she would present the proposal to the Board for consideration during its meeting.

She stated the Subcommittee recognized the ability to provide veterinary care through electronic means is a valuable tool in many situations and for all populations. She added access to care afforded by electronic veterinary services is particularly important for high-risk populations. She stated the ability to intervene early and leverage the continuum of care afforded by electronic veterinary services are benefits the Subcommittee is encouraging the Committee and Board to consider.

Ms. Pawlowski stated to resolve concern raised at the Committee's April 2021 meeting regarding the effect of the diagnosis definition in BPC section 4825.1 and on proposed regulations for electronic veterinary services, and because veterinary professionals do not have a clear understanding or guidance as to the electronic services they may provide to animal patients, the Subcommittee recommended defining these types of services in statute.

Ms. Pawlowski stated during the Subcommittee review, they found the current statutory definition of telehealth placed within the Medical Practice Act. Under that definition, telehealth is intended to facilitate patient self-management and caregiver support for patients. Ms. Pawlowski stated the Medical Practice Act provides that telehealth includes telemedicine, as the term is referenced in the Code of Federal Regulations. She stated those terms do not readily apply to veterinary health care, and there is no other definition of telemedicine in the BPC. She added the regulations supporting the Medical Practice Act do not further clarify this term.

Ms. Pawlowski stated since BPC section 2290.5 and federal regulations referenced in the memo do not readily apply to animal patients and because of the fundamental differences between humans and animals in communicating and identifying sickness or symptoms, the Subcommittee determined that to properly use telehealth in accordance with BPC section 686, it is necessary to establish statutory provisions in the Veterinary Medicine Practice Act for the performance of electronic veterinary health services, including telehealth for animal patients.

Ms. Pawlowski stated the Subcommittee had included a legislative proposal defining telehealth, telemedicine, telerriage, and teleconsultation to establish the authority of veterinary professionals to provide such services. She added the legislative proposal seeks to address stakeholder concerns raised during the Board's January 2021 meeting regarding the racial and economic inequities resulting in a lack of access to veterinary care facilities and difficulty for consumers to travel with their pets to veterinary premises. She stated these legislative changes are designed to protect public interest and consumer safety, and are intended to address social and economic disadvantages in rural and low-income communities by expanding the use of electronic technology and media to increase access to veterinary health care services for the benefit of consumers and their animals.

Ms. Pawlowski stated the Subcommittee believed it is in the best interest of improving veterinary care for consumers, animals, and the veterinary professionals to include the legislative proposal in the Board's Sunset bill. She added that is why she would be presenting the recommendation to the Board during their meeting this week if the Committee approves the recommendation.

Ms. Pawlowski explained once the legislative proposal is enacted, regulatory amendments to CCR, title 16, section 2032.1 would be necessary to remove superseded and redundant references to telemedicine.

She noted she would go over the definitions, highlighting some of the changes since the last version of the proposal. Regarding teleconsultation, she explained the definition had been modified to include, "or other person whose expertise in the opinion of the California licensed veterinarian." She noted the change also further clarifies a veterinary consultant provision to model the American Association of Veterinary State Boards (AAVSB) guidelines. Regarding telehealth, she explained the definition had been modified, as described earlier, to accommodate for the electronic provision of general veterinary advice and education. She stated telehealth services are defined later.

Regarding telemedicine, Ms. Pawlowski stated the new proposal defines telemedicine as the use of electronic technology or media, including interactive audio and/or video, by a California licensed veterinarian to practice veterinary medicine provided within an established VCPR for the patient. She explained the requirement to establish a VCPR to provide treatment complies with federal law and is consistent with other states' laws and veterinary guidelines.

Ms. Pawlowski stated to address stakeholder concerns that the current regulatory definition of telemedicine limits the use of technology in veterinary medicine practice and results in decreased consumer access to veterinary care, the legislative proposal would narrow the definition of telemedicine, so more electronic veterinary services could be provided through telehealth.

She stated under the proposed definition, when a veterinarian needs to prescribe treatment of whatever nature for the animal patient's medical condition, this new telemedicine definition would ensure practitioners are in compliance with federal and California state law and animals patients are properly protected by having a VCPR established before the treatment could be provided electronically. Ms. Pawlowski stated by narrowing the definition of telemedicine and establishing a definition for telehealth, consumers will have more options available to receive veterinary health care for their animals.

Regarding teletriage, she stated the legislative proposal would define teletriage to mean the use of electronic technology or media, including interactive audio and/or video to diagnose and treat a medical emergency, as defined, until the animal patient can be transported to and/or seen by a veterinarian.

Ms. Pawlowski explained this proposal would expand the existing VCPR exemption in CCR, title 16, section 2032.1, subsection (f), which authorizes advice given in an emergency. She stated pursuant to CCR, title 16, section 2032.1, subsection (a), in order to treat an animal patient, a VCPR must be established; she explained this requirement is consistent with federal law, other states' laws, and veterinary association guidelines that limit the ability to prescribe and/or treat a medical condition. She added BPC section 4826.4 authorizes a California licensed veterinarian to render necessary and prompt care and treatment, including dispensing and prescribing a dangerous drug or device, to an animal patient without establish a VCPR if conditions are such that one cannot be established in a timely manner. Ms. Pawlowski stated to conform to the emergency provisions in BPC section 4826.4, and ensure necessary and prompt care and treatment of animal patients, the definition of teletriage would include electronically diagnosing and treating a medical emergency.

She explained the Subcommittee is providing a legislative proposal, also included in the meeting packet, defining specific veterinary services that could be performed through electronic technology. She stated, to provide clarity, she would outline these services for the Committee.

Regarding telemedicine services, she explained the proposal would authorize a California licensed veterinarian to further evaluate an animal patient's progress and diagnose and treat the medical condition for which the VCPR has been established. She stated the limitation on the use of telemedicine is consistent with the AAVSB guidelines for the appropriate use of telehealth, as well as CCR, title 16, section 2032.1, which requires a VCPR to treat an animal patient.

Ms. Pawlowski added the proposal would maintain the existing prohibition on establishing a VCPR by telephonic or other electronic means in CCR, title 16, section 2032.1, subsection (e), which is consistent with the American Veterinary Medical Association Model Veterinary Practice Act, as well as federal law. She noted the United States Food and Drug Administration also recently reiterated that the federal VCPR definition requires animal examination and/or medically appropriate and timely visits to the premises where the animals are kept. She stated the federal VCPR definition cannot be met solely through telemedicine.

Regarding telehealth services, Ms. Pawlowski explained these services would include a general or preliminary diagnosis of the general health of the animal patients using a virtual examination of the animal patient. She stated the provision was crafted carefully to conform with the existing definition of diagnosis, which is defined to meet the act or process of identifying or determining the health status of an animal through examination and the opinion derived from that examination.

She stated the new telehealth provision would specify the examination could be performed virtually in order to provide a general or preliminary diagnosis of the general health of the patient. She explained this provision would benefit consumers by expanding the use of electronic technology and increasing access to veterinary healthcare services. She stated the proposed telehealth provision would not authorize treatment to be electronically provided, therefore it could be used without establishing a VCPR. She added the proposed telehealth provision would also allow RVTs and veterinary assistants to use telehealth to determine the seriousness of a medical situation and advise a client or client's representative of the urgency of the animal patients being seen, which also would increase access to veterinary health.

Ms. Pawlowski explained the legislative proposal for teletriage services would provide clarity in that teletriage cannot be used for treatment of non-life-threatening cases. She added it may be used in an emergency, as specified. She stated advice can be provided through telemedicine in an emergency without establishing a VCPR. She stated the proposal would increase access to critical veterinary care using the emergency provisions under BPC section 4826.4, subdivision (a), and authorize a California licensed veterinarian, without establishing a VCPR, to utilize teletriage to diagnose and treat animal patients until the animal patient can be seen or transported to a veterinarian. She added this proposal would also authorize an RVT to use teletriage in an emergency.

Ms. Pawlowski explained if the legislative proposal is ultimately enacted, the telemedicine provisions in CCR, title 16, section 2032.1 must be updated to reflect the new statutory provisions. She stated the attached regulatory proposal was provided for the Committee's consideration and intended to be submitted as a CCR, title 1, section 100 rulemaking for expedited enactment. She explained section 100 allows the Board to add to, revise, or delete regulatory text without complying with the usual rulemaking procedures under article 5 of the Administrative Procedure Act, as long as the change

does not materially alter any requirement, right, responsibility, condition, prescription, or other regulatory element of any CCR provision.

She stated today the Subcommittee was requesting the Committee entertain a motion to recommend to the Board submission of the legislative proposal to the California State Legislature to amend BPC section 4825.1, add BPC section 4826.3, and include the legislative proposal in the Board's Sunset bill. She stated the Subcommittee also requested, if the Committee agreed with the regulatory proposal, to entertain a motion to recommend the Board approve the regulatory proposal to amend CCR, title 16, section 2032.1 and direct the Executive Officer to take all steps necessary to initiate the section 100 rulemaking process, make any technical or nonsubstantive changes to the rulemaking package, and adopt the proposed regulatory changes.

Dr. Sequoia asked if the reference to high risk populations in the introduction was referring to human or animal populations. Dr. Sullivan responded that it was referring to human populations.

Tara Welch clarified there were two recommended motions before the Committee for consideration.

- Dr. Christina Bradbury moved and Dr. Dianne Sequoia seconded a motion to recommend to the Board submission of the legislative proposal to the California State Legislature to amend BPC section 4825.1 and add BPC section 4826.3 and include the proposal in the Board's Sunset bill. The motion passed 7-0.

Dr. Sequoia stated she was very impressed with the work of the Subcommittee and their thoroughness. She next offered some clarifications and questions regarding the memo Ms. Pawlowski presented. Ms. Siefertman suggested it would be helpful to offer comments or suggestions on the actual legislative and regulatory proposals instead of on the memo. Dr. Sequoia responded that she understood and stated she therefore retracted the comments provided.

Ms. Loreda stated the Subcommittee did an amazing job of putting everything together. She noted it was a lot of information and she was still digesting all of the details. She stated it appeared the proposals were actually increasing access to veterinary care due to the added definitions. Regarding the emergency aid provisions in BPC section 4840.5, she stated she was trying to think of things from a consumer or pet owner perspective. She asked how pet owners are able to know what a life-threatening situation is. She also asked how the new proposal would help someone get access to care if they are at home without a vehicle and cannot get their pet to a veterinarian. She asked if the pet owner, in that situation, would be able to establish the VCPR and have treatment prescribed.

Ms. Pawlowski explained the idea behind the proposal was to use it to assess the situation; so, you may start off with one and end up in another and realize it is an emergency situation. She stated the proposal is giving pet owners access to more

information. She added this would also give the veterinarian the ability to ask questions and not have any issues because they can assess and triage better.

Ms. Loredo stated the proposal was essentially untying the hands of the veterinarian to make a determination, whereas before, they were restricted because this addition increases the ability triage.

Ms. Pawlowski stated that was probably the best way to explain it.

Ms. Welch stated she wanted to refer back to the existing regulation requiring the VCPR. She explained it references telemedicine requiring a VCPR with the exception for advice given in an emergency, as defined under BPC section 4840.5. She stated the proposed legislation effectively moves the emergency provisions that currently exist under the regulation and better clarifies it in the new legislative proposal. She explained the proposed legislation provisions were not really changing much with respect to emergency protocol. She stated the biggest change in this legislative proposal was providing for telehealth, which is the provision of general advice that the Board currently does not have in regulation. She again stated, regarding emergency services, the legislative proposal continues the ability to provide advice over the phone or through electronic veterinary services that already exists under the regulation.

Ms. Pawlowski added the proposal is giving the veterinarian more access to gather information.

- Dr. Christina Bradbury moved and Ms. Maria Salazar Sperber seconded a motion to recommend the Board approve the regulatory proposal to amend CCR, title 16, section 2032.1 and direct the Executive Officer to take all steps necessary to initiate the section 100 rulemaking process, make any technical or no-substantive changes to the rulemaking package, and adopt the proposed regulatory changes. The motion passed 7-0.

There were no public comments made on this item.

Dr. Bradbury thanked Ms. Pawlowski and Dr. Sullivan for the well thought out proposal and stated she really thought this would help things.

Ms. Pawlowski thanked the Committee for their input on this item.

6. Discussion and Potential Recommendation Regarding Veterinary Premises Inspection Checklist and Inspection Process Improvements – Jennifer Loredo, RVT, and Dianne Sequoia, DVM, Inspections Subcommittee

Ms. Loredo stated they have been talking about the 20 percent mandate for inspections. She explained what was most eye-opening for her at the last Subcommittee meeting was learning from board managers directly involved in those processes about the inefficiencies of the internal structure of, and significant costs to, the different boards.

She explained the Subcommittee would continue researching the 20 percent mandate and see what they can do. She stated that merging the Board's Inspection Unit into the Enforcement Unit would make a big difference.

Ms. Siefertman acknowledged it was helpful for Ms. Loreda to hear directly from the DCA managers who are living the inspection process every day. She stated they asked Hospital Inspection Program Manager Patty Rodriguez to provide some background and an overview of what was provided in the meeting memo regarding the 20 percent mandate, the current inspection process, and the process improvements that have been made. She stated the Committee would also hear from Enforcement Program Manager Matt McKinney who would provide information from an enforcement standpoint.

Ms. Rodriguez explained the 20 percent mandate was an issue that goes back nearly 20 years, and it was an issue brought up in the Board's 2003 Sunset Review. She stated the Joint Legislative Sunset Review Committee has had concerns over the number of inspections the Board has been able to conduct. She added it has been an ongoing issue for many years. She also explained the 20 percent inspection requirement seemed to come out of a conversation Board staff had at the time with the Sunset Review Committee in which Board staff said they would inspect facilities at least once every five years. She added, with subsequent Sunset Reviews, it has been an ongoing issue that there had not been an increase in the number of inspections. She explained, in the past, there had only been five inspectors in the state and one staff member who handled the review of those inspections. She stated, after ongoing concerns, the 20 percent mandate was added to BPC section 4809.7. She explained the 20 percent inspections provision was not a mandate at the time; the statute just stated the Board would make every effort to meet the goal.

Ms. Rodriguez stated the Inspection Unit had been made its own unit. She explained previously it had been part of the Enforcement Unit, as an enforcement tool. She also stated after the separate unit was created, additional staff and inspectors were added.

Ms. Rodriguez explained, at one point, the unit got close to completing the mandated number of inspections (approximately 700); however, she stated she did not think anyone had an idea of what the workload would look like on the other side, in terms of the documentation that resulted from the inspections. She discussed the process issues and delays that resulted from complaint-related inspections and the back and forth between the two units. She stated the inspection program was not as effective as they would like it to be.

She added it was the hope that with the two units merging, they would go back to where they started with inspections being a part of enforcement. She stated processes would be streamlined and be less confusing.

Mr. McKinney stated there were some areas identified between inspections and enforcement where inefficiencies were happening. He explained there is sometimes confusion and tracking issues between the two units, in terms of who is handling certain

aspects of a case. He added inspections are only valid for a certain amount of time, and then re-inspections are required. He stated this can increase costs for each case. He added the goal would be to have as few hands as possible on each case in order to reduce costs and the time it takes to investigate each case. He also stated the separation also created an artificial divide between the Enforcement and Inspection Units.

Ms. Sieferman added, with the merge, staff believed they would be able to start conducting routine inspections again, and they would be able to do that through using office technicians. She explained if there was compliance, technicians could oversee that and, if necessary, send educational letters. If additional action was required, like in the form of a citation or possible transmittal to the Attorney General's Office for filing formal discipline, then the matter would go to an analyst. She explained they believed the merge would be beneficial for Board staff and also for the licensees who are inspected. She stated, overall, she believed the merge would be more efficient and save money. She added the merge would also allow the Board to better track the status of inspections. She also explained there had been separate enforcement and inspections modules in BreEZe; but going forward, they wanted to use just one module in order to make the processes a lot more streamlined for all staff.

Ms. Pawlowski stated she was impressed with all of the efficiencies staff had been able to identify. She acknowledged these efficiencies will save on costs, as well as the sanity of staff.

Dr. Bradbury stated this was a great move in the right direction. She thanked the Subcommittee team for its efforts. She acknowledged it was difficult to just look at numbers and try to figure things out. She stated, in reviewing the minutes from the last Committee meeting, she was struck by something she did not fully grasp at the time. She explained there was a comment regarding how long the inspection checklist was; she wondered if the checklist could be a little more focused. She stated this might allow the Board to do more inspections. Regarding the 20 percent mandate, she stated the Subcommittee was going to try to figure out what a new mandate should be. She asked if an actual mandate was needed and if it was something the Board had created.

Ms. Loreda explained that looking at the mandate and checklist was something the Subcommittee will continue to do. She stated they got some feedback from hospital inspectors, and they did not seem to collectively be in favor of shortening the checklist. She added they looked at some other options that had been mentioned at the last meeting about doing a self-checklist for veterinarians and hospitals when they renew their premises permit. She explained the inspectors indicated the items on the checklist are very important in that they are related to sanitation and animal care. She also added the Board utilizes licensees as inspectors, as they are better able to recognize red flags. Ms. Loreda also stated it was a great decision on Ms. Sieferman's part to suggest a meeting with other DCA inspection managers. However, Ms. Loreda stated the Subcommittee was still exploring the checklist.

Regarding the inspection mandate, Ms. Loredo stated she felt 20 percent was too high based on hearing from all of the other DCA boards they met with. She stated, by merging the units, she believed they will see more efficiencies. She explained she believed 20 percent was 900 hospitals, which was a lot.

Ms. Pawlowski again explained a higher number of inspections also creates a lot of follow-up workload and delays. She added it is not just the inspection that causes an issue, it is what happens after the inspection and subsequent follow-up that must be done.

Ms. Loredo also stated BreEZe was supposed to increase efficiencies; however, the system did not allow staff to track the inspections properly.

Ms. Pawlowski stated she has an issue with the Board having a mandate when other boards do not. However, she added she understood it has to be a line item in the budget.

Ms. Siefertman clarified that the legislative proposal that brought about the mandate did not create a line item in the budget. She stated, in the budget reports that are provided at every Board meeting, there is not a separate line item for inspections. She added the proposal also did not provide the Board with any additional funds; and if you look at the history, the Board asked for authority to spend existing money to pay for additional employees. She explained it has always been noted the Board does not have sufficient funds to fund inspections. She stated this has been a 20-year problem with no funds, and the Board is still at the same point. She stated she did not believe the mandate was realistic. She explained, even if the Board changed the checklist and did more inspections, the Board still does not have the funds to comply. She stated the whole idea of this fixing the budget was not accurate.

Dr. Bradbury stated she hoped they all understand now that the Board does not get increased funding for anything, it just gets permission to spend the limited funds it already has. She stated she was definitely in support of merging the two units. She added, as the Subcommittee continues its work, perhaps not having a mandate at all could be considered.

- Dr. Christina Bradbury moved and Ms. Leah Shufelt seconded a motion to recommend the Board consider a legislative proposal to remove the 20 percent mandate for inspections.

After discussion below, Dr. Bradbury and Ms. Shufelt agreed to rescind the motion.

The Committee received public comment on the motion. Dr. Grant Miller stated he had several questions. He noted CVMA was in support of the Board inspection program. He stated Ms. Rodriguez had done an excellent job with the program over the years. He added the program has been very educational for veterinarians and very helpful in

making veterinary practices safer and better places, and the program was of great value.

Dr. Miller stated he had questions and some concerns with just removing the mandate. He explained everything was put in place to help secure the program. He stated he understood the mandate was there to protect the program and to make it actually be able to happen. He asked if Ms. Sieferman could again explain why it went to being mandated because that was done by the Board just a few years ago.

Ms. Sieferman agreed the inspection program is a great education tool and they all are committed to keeping it going. She clarified the inspection program would not be going away and it would remain. She added the ultimate goal is always going to be education over any kind of action. Regarding the 20 percent mandate, she stated she thought there were some misunderstandings of the difference between the budget and the funds. She stated she did not have any concerns if the Board removed the mandate because she did not think it would remove the ability to have the inspection program.

Ms. Sieferman explained it would be a different story if the Board created the mandate and then, at the same time, increased the fees for the premises registrations to fund additional inspectors and individuals to keep up with the workload. She stated that would be something that would be helpful. She explained when the inspection mandate was created, the Board did not have funds to implement it. She added she thought the mandate was proposed because it was believed it would help the Board when going to the Department of Finance (DOF) and the Legislature with a budget change proposal for staff. She stated she believed the thought was, by making it a mandate, it would help fund the program. But she reiterated that is not how the funds and the budget work. She added, while DOF can give the Board authority through the Governor's budget to get staff, it does not give the Board the money to fund the staff.

Ms. Sieferman stated she believed the merge would allow the Board to do more inspections with existing resources. But she explained if the Board wants to keep the 20 percent mandate, it would definitely need to increase premises registration fees again.

Dr. Miller recalled when the Board was having financial issues, it would go to DOF and say it was having these problems, and DOF would tell the Board to stop the inspections because they were not mandated. He added everyone agreed the inspections were one of the most important things the Board does; and so, it was strategic to require the mandate because, in a way, it bound the hands of DOF. He stated, with the mandate, DOF could not tell the Board not to hire somebody. Dr. Miller asked Ms. Sieferman if she was concerned the Board might end up in the situation again where the mandate is removed and DOF could say inspections are not required, or the Board cannot hire, or DOF would not support the Board hiring.

Ms. Sieferman stated she believed Dr. Miller was referring to when the Board comes very close to the budget, and it has to perform emergency cost savings procedures. She explained it is possible DOF, or even the DCA fiscal office, had advised the Board it was

close to going over its budget, so the Board had to enact the emergency cost savings procedures. Ms. Sieferman stated she did not have any concerns if the mandate was removed.

Dr. Miller stated he just remembered enacting the legislative mandate was strategic, and the Board needed the mandate in order to safeguard the inspection program. He added he was appreciative of Ms. Sieferman's analysis. He added another option to consider would be to lower the mandate to something Ms. Sieferman and Ms. Rodriguez recommend. He explained it could be at perhaps 10 percent if there is value to having the protection of the mandate. He added, if this was something the Board wants to do, then CVMA would support getting it into the Sunset bill.

Ms. Loredo suggested getting input from the full Board. Ms. Pawlowski stated she did not believe this item was on the Board's agenda the following day, and, therefore, they would not be able to take any action at that time. Ms. Loredo stated, during the Committee report, perhaps the issue could be mentioned.

Ms. Welch stated, because legislative action was not agendized, the Board would not be able to take action on a recommendation to remove or lower the 20 percent mandate.

Dr. Bradbury asked if Ms. Rodriguez should be asked what a reasonable mandate would be. Ms. Loredo stated the Subcommittee would continue to research that. Ms. Rodriguez responded she thought they would need more time to explore the question in order to come up with a reasonable mandate.

Ms. Sieferman stated she thought what the Subcommittee would like to do is merge the units and then monitor things over the next year. She explained they need to know a baseline because, with the changes and efficiencies they are making, they are hoping to be able to do more. She also stated, regarding a possible change to the mandate, she was not concerned with the timing, whether it was included in the Sunset bill or included in a later omnibus bill. She added she thought it was premature to determine an appropriate percentage, and the Subcommittee will continue to monitor.

Ms. Pawlowski stated, just because they remove the 20 percent mandate, does not mean they do not put another number back in.

Ms. Sieferman agreed they could remove the mandate or keep a mandate and make it a lower percentage. However, she indicated this was something the Subcommittee was still reviewing and would continue to monitor.

Ms. Sperber agreed with Ms. Sieferman and stated the focus should also be on what happens after the inspections. She added she believed they need to see how the merge of the units affects the complete circle of the inspection process.

Ms. Pawlowski stated they did not need to do anything at this point, but she understood the urgency to want to remove the inspection mandate. However, she stated they are also in a process where they can do nothing, and wait and see what the results of the Subcommittee are. She added there are a lot of improvements and efficiencies being made and a lot of action taking place, so removing the mandate at this time may be premature.

Dr. Bradbury stated she understood the value in waiting and getting more information, but she had the impression that having the mandate in place was negatively impacting several things occurring at the Board because it was not meeting the requirement. She asked Ms. Siefertman if having the mandate in place was negatively affecting Board operations.

Ms. Siefertman responded the 20 percent mandate is something the Board has never been able to comply with. However, she explained the Board has had open communications with both the Assembly and Senate committees on the issue. She added they are well aware of the issues the Board is having and the Board is trying to address them. She stated it also was not an issue or a concern currently with the Legislature. Therefore, she explained she was not concerned with leaving the inspections mandate in place while the Board implements the efficiencies and continues to monitor.

Ms. Pawlowski thanked the Subcommittee, Ms. Rodriguez, and Mr. McKinney for all of their work.

7. Update from the Complaint Process Audit Subcommittee – Kevin Lazarcheff, DVM, and Christina Bradbury, DVM

Ms. Siefertman reported on this agenda item. She thanked Dr. Margaret Warner for the work she did on the Complaint Process Audit Subcommittee. She next stated they were very excited Dr. Bradbury agreed to join the Subcommittee; Dr. Bradbury brings a wealth of experience to the team.

Ms. Siefertman stated, due to the transition of Subcommittee members, the Subcommittee had not reviewed any cases since the last Committee meeting. However, she reported the Subcommittee members would be attending training for expert witnesses that is offered by the Medical Board of California (MBC). She explained the purpose was for them to identify any potential gaps there are in the training and create a separate supplemental training for the Board's expert witnesses. She added the MBC training was offered quarterly.

Ms. Siefertman asked Dr. Bradbury if she wanted to comment on why she joined the Subcommittee.

Dr. Bradbury responded she has been focused on the Subcommittee's work as a Board member. She explained some of the cases the Board has lost have been related to

perhaps not giving the expert witnesses the feedback or guidance they needed. She stated she was very excited to learn more about the process and to help in any way she can. She added she was thankful for being offered the opportunity.

Ms. Pawlowski thanked Dr. Bradbury for joining the Subcommittee. She also noted Dr. Kevin Lazarcheff would be attending the expert witness training in October.

There were no public comments made on this item.

8. Future Agenda Items and Meeting Dates

Ms. Pawlowski asked if members had any future agenda items to suggest. There were no suggestions.

Ms. Sieferman stated the next Committee meeting was scheduled for October 20, 2021, and the 2022 calendar would be set at that meeting. She also added the Committee would be electing its 2022 officers at the next meeting.

Dr. Sullivan asked if the Committee would potentially meet in person in October.

Ms. Sieferman stated it was being looked at. She explained they are anticipating being able to return to in-person meetings in October; however, costs and the length of Committee meetings would have to be considered. She added all logistics were being considered and they were trying to make the best decision going forward.

There were no public comments made on this item.

9. Adjournment

Ms. Pawlowski adjourned the meeting at 11:01 a.m.