MEMORANDUM

DATE	March 26, 2021
TO	Veterinary Medical Board (Board)
FROM	Patty Rodriguez, Inspection Program Manager
SUBJECT	**Inspection Program Report**

Staff Update

Staff continues working from home due to COVID-19. Staff maintains regular ongoing contact via MS Teams to discuss program issues process modifications. Training on enforcement case reviews and preparation for administrative and disciplinary action continues.

Promoting the Veterinary Premises Self-Evaluation Checklist (Strategic Plan Objective 6.1)

Staff will be promoting the Checklist through the Board's social media accounts, in addition to adding the Checklist to each managing licensee's (MGL) BreEZe account. Staff will be contacting the veterinary medical schools and asking them to provide the Checklist to fourth-year students. Local veterinary medical association chapters will be contacted and asked to link the Checklist to their websites. In addition to providing the Checklist to each MGL at the time of issuance of the premises registration, it will also be provided to each new veterinarian licensee.

Evaluate Inspection Mandate (Strategic Plan Objective 6.2)

Staff conducted meetings with other Board and Bureau Inspection programs to gather information to begin creating best practices. While some inspection programs vary greatly, there are some similarities. Staff will continue gathering data and holding meetings regarding this objective.

Inspection Process Analysis/Maximizing BreEZe

Staff continues to work with the Department of Consumer Affairs (DCA), Organizational Improvement Office to map the premises inspection process and enforcement component of inspection cases. As gaps are identified in the inspection process, discussions take place to make process improvements and develop better monitoring methods. Staff is spending a significant amount of time analyzing BreEZe's enforcement module and has been working closely with the Board's BreEZe Business Integration Analyst, as well as the BreEZe Reports Team, to make necessary changes to enforcement configurations for all inspection data. This also involves a significant amount of user testing. Inspection Unit staff will start attending the Enforcement Users Group meetings to gain additional knowledge of BreEZe process improvements for the enforcement module.

Mobile Inspection App (Strategic Plan Objective 6.3)

Staff continues to explore the use of Accela's mobile inspection application. A meeting was held with other Boards and Bureaus to discuss, among other things, the possibility of their programs utilizing the mobile application to reduce overhead costs to the boards. More discussions are needed, as well as a budget analysis, to determine feasibility.

Routine/Complaint/Probation Inspections

Staff remains focused on reviewing complaint-related inspections, reviewing those cases with the oldest inspection dates first. As staff continues reviewing multiple complex cases, case processing times continue to be affected. Staff is also focusing on conducting follow-up inspection for aging routine cases with outstanding compliance issues. Staff will be making every effort to adhere to response times in a timely manner. Due to ongoing data cleanup and procedure changes, statistics vary slightly from the previous reporting period.

Inspection Statistics
FY 2020-2021

		Q1			Q2			Q3			Total
		July	Aug.	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	
Routine	**Assigned**	0	0	0	0	0	0	0	0		0
	Performed	3	0	0	0	0	0	0	0		3
	Closed*	0	5	3	0	3	1	2	4		18
	Pending**	73	68	65	65	62	61	59	55		55
	Avg. Cycle Time**	N/A	1417	878	N/A	836	482	220	423		825
	Compliance Rate	N/A	0%	0%	N/A	0%	100%	50%	25%		29%
	Document Review	Apr-20	Apr-20	Apr-20	Apr-20	Apr-20	Apr-20	Apr-20	Apr-20		Apr-20
Complaint Related	**Requested**	2	0	1	0	1	0	1	4		9
	Assigned	2	2	0	0	0	6	1	1		12
	Performed	4	1	2	0	1	2	4	2		16
	Closed*	0	2	1	11	2	1	1	7		25
	Pending**	72	72	71	60	58	63	63	57		57
	Compliance Rate	N/A	0%	0%	0%	0%	100%	0%	0%		14%
	Avg. Cycle Time**	N/A	398	668	314	327	394	446	464		386
Probation Related	**Requested**	5	0	0	0	0	0	3	0		8
	Assigned	5	0	2	0	0	0	3	0		10
	Performed	4	3	4	0	0	0	0	2		13
	Closed*	0	0	0	0	0	0	0	2		2
	Pending**	28	28	30	30	30	30	33	31		31
	Compliance Rate	N/A	N/A	N/A	N/A	N/A	N/A	N/A	100%		100%
	Avg. Cycle Time**	N/A	N/A	N/A	N/A	N/A	N/A	N/A	348		348
Citations	**Issued**	0	0	0	0	0	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.