



2019–2023 STRATEGIC PLAN

OSTEOPATHIC MEDICAL BOARD OF CALIFORNIA



Adopted: January 2019

Table of Contents

Board Members1

Message From the Board President 2

About the Osteopathic Medical Board 3

Our Mission, Our Vision, and Our Values 6

Strategic Goals 7

Goal 1: Licensure 9

Goal 2: Enforcement 9

Goal 3: Outreach and Communication 10

Goal 4: Regulation and Legislation 11

Goal 5: Board Administration 12

Strategic Planning Process 13



Board Members

Joseph A. Zammuto, D.O., President

Cheryl Williams, Vice President, Public Member

Cyrus Buhari, D.O., Secretary-Treasurer

Gor Adamyan, Public Member

Elizabeth Jensen-Blumberg, D.O.

Claudia Mercado, Public Member

Andrew Moreno, Public Member

Vacant, D.O.

Vacant, D.O.

Gavin Newsom, Governor

Alexis Podesta, Secretary
Business, Consumer Services and Housing Agency

Vacant, Director
Department of Consumer Affairs

Mark Ito, Executive Director
Osteopathic Medical Board of California

Message From the Board President



On behalf of the Osteopathic Medical Board of California, it is my sincere pleasure to present the 2019–2023 Strategic Plan. I want to thank the California Department of Consumer Affairs’ SOLID unit for their leadership in the process. I want to thank all the Board members, the executive director, assistant executive director, Board staff, and the public for putting together this plan.

The mission of the Board is to protect the public by requiring competency, accountability, and integrity in the safe practice of medicine by osteopathic physicians and surgeons. The Board continually strives to attain meaningful improvement to service our physicians, protect the public, and maintain the highest standards in health care.

The vision of the Board is to uphold the highest standards of quality and care by our physicians; continuing to utilize technology and innovation to enhance and deliver an outstanding level of public protection.

The success of this strategic plan depends on an ever evolving relationship with all the stakeholders in the state of California. We look forward to our relationship involving licensure, enforcement, outreach and communication, regulation and legislation, and Board administration.

Joseph A. Zammuto, D.O.

President, Osteopathic Medical Board of California



About the Osteopathic Medical Board

Developed more than 130 years ago by Andrew Taylor Still, M.D., D.O., osteopathic medicine brings a unique philosophy to traditional medicine. Osteopathic physicians (D.O.s) are fully licensed to prescribe medication and practice in all medical specialty areas including surgery, just like any physician, and they are also trained to consider the health of the whole person and use their hands to help diagnose and treat their patient.

D.O.s make up one of the fastest growing segments of health care professionals in the United States. California has the fourth largest osteopathic population in the United States.

Business and Professions Code section 3600 (Osteopathic Initiative Act) and California Code of Regulations, title 16, “Professional and Vocational Regulations,” Division 16, section 1600 et. seq., authorize the Osteopathic Medical Board of California (OMBC) to license qualified osteopathic physicians and surgeons to practice osteopathic medicine, and to effectuate the enforcement of laws and regulations governing their practice (Medical Practice Act). The act provides that consumer protection is their highest priority in exercising its licensing, regulatory, and disciplinary functions.

The OMBC is a fully functioning board within the Department of Consumer Affairs with the responsibility and sole authority to issue licenses to physicians and surgeons to practice osteopathic medicine in California. The OMBC is also responsible for enforcing legal and professional standards to protect California consumers from incompetent, negligent, or unprofessional D.O.s. The OMBC regulates D.O.s only. There are 9,101 D.O.s in California with active licenses at this time and another 668 who have inactive licenses in California while residing in other states. There are 1,163 D.O.s who maintain delinquent licenses. The total number of osteopathic physicians and surgeons currently holding a California license is 10,932.

D.O.s are similar to M.D.s in that both are considered to be “complete physicians,” in other words, they have taken the prescribed amount of premedical training, graduated from an undergraduate college (typical emphasis on science courses) and received four years of training in medical school. They have also received at least one more year of postgraduate training (residency or rotating internship) in a hospital with an approved postgraduate training program.

After medical school, D.O.s may choose to practice in any specialty or subspecialty, as do M.D.s. Examples are, but not limited to, family practice, internal medicine, pediatrics, and any surgical specialty. These programs may range from an average of two to six years of additional postgraduate training. Licensing examinations are comparable in rigor and comprehensiveness to those given to M.D.s. Whether one becomes a D.O. or an M.D., the process of receiving complete medical training is basically the same. The same laws govern the required training for D.O.s and M.D.s who are licensed in California. D.O.s utilize all scientifically accepted methods of diagnosis and treatment, including the use of drugs and surgery. D.O.s are licensed in all 50 states to perform surgery and prescribe medication. D.O.s practice in fully accredited and licensed hospitals and medical centers. Section 2453 of the Business and Professions Code states that it “is the policy of this State that holders of M.D. degrees and D.O. degrees shall be accorded equal professional status and privileges as licensed physicians and surgeons.”

A D.O. may refer to himself or herself as a “doctor” or “Dr.” but in doing so must clearly state that he or she is a D.O. or osteopathic physician and surgeon. He or she may not state or imply that he or she is an M.D. while being licensed in California as a D.O.



A key difference between the two professions is that D.O.s have an additional dimension in their training and practice—one not taught in medical schools giving M.D. degrees. Osteopathic medicine gives particular recognition to the musculoskeletal system (the muscles, bones, and joints), which makes up more than 60 percent of body mass. The osteopathic physician is trained to recognize that all body systems, including the musculoskeletal system, are interdependent, and a disturbance in one can cause altered functions in other systems of the body. The osteopathic physician is also trained in how this interrelationship of body systems is facilitated by the nervous and circulatory systems. The emphasis on the relationship between body structure and organic functioning is intended to provide a broader base for the treatment of the patient as a unit. These concepts require a thorough understanding of anatomy and the development of special skills in diagnosing and treating structural problems through manipulative therapy. D.O.s use structural diagnosis and manipulative therapy along with all of the other traditional forms of diagnosis and treatment to care effectively for patients and to relieve their distress.

To meet its responsibilities for regulation of the D.O. profession, the OMBC is authorized by law to:

- a. Monitor licensees for continued competency by requiring approved continuing education.
- b. Take appropriate disciplinary action whenever licensees fail to meet the standard of practice, or otherwise commit unprofessional conduct.
- c. Determine that osteopathic medical schools and hospitals are in compliance with medical education curriculum and postgraduate training requirements.
- d. Provide rehabilitation opportunities for licensees whose competency may be impaired due to abuse of alcohol or other drugs.

Additionally, the OMBC is charged with enforcement of laws proscribing unlicensed osteopathic medical practice.

OUR MISSION

To protect the public by requiring competency, accountability, and integrity in the safe practice of medicine by osteopathic physicians and surgeons.

OUR VISION

The Osteopathic Medical Board upholds the highest standards of quality and care by our physicians; continuing to utilize technology and innovation to enhance and deliver an outstanding level of public protection.

OUR VALUES

Collaborative
Health
Inclusion
Proactive
Diversity
Innovation
Professional

Strategic Goals

1. **Licensure**

The OMBC requires that only qualified individuals are licensed as osteopathic doctors.

2. **Enforcement**

Protect the health and safety of consumers through the enforcement of the laws and regulations governing the practice of osteopathic medicine.

3. **Outreach and Communication**

Consumers and licensees are able to make informed decisions regarding the safe practice of osteopathic medical services.

4. **Regulation and Legislation**

Monitor and uphold the law, and participate in the regulatory and legislative process.

5. **Board Administration**

Build an excellent organization through proper Board governance, effective leadership, and responsible management.





Goal 1: Licensure

The OMBC requires that only qualified individuals are licensed as osteopathic doctors.

- 1.1 Investigate the options to implement the Interstate Medical Licensure Compact to streamline the licensing process.
- 1.2 Investigate the options available through BreZE to reduce barriers to entry and improve functionality.
- 1.3 Develop an online portal for documentation submissions to streamline the process and reduce time for licensees.
- 1.4 Align continuing education audits with the renewal process to reduce confusion among licensees.
- 1.5 Collaborate with the Office of Information Services (OIS) to schedule a demonstration of BreZE to view the licensee point of view and better understand how the system operates.
- 1.6 Research the feasibility of hiring additional staff to improve office efficiencies.
- 1.7 Implement a board member in-office training to improve board member understanding of office processes.

Goal 2: Enforcement

Protect the health and safety of consumers through the enforcement of the laws and regulations governing the practice of osteopathic medicine.

- 2.1 Create efficiencies with the Board's internal investigations to reduce case aging.
- 2.2 Research the concept of the chaperone and set parameters around who can be a chaperone to protect patients and determine best practices.

- 2.3 Implement cross-training with enforcement staff to improve morale and continuity of work.
- 2.4 Research technological opportunities to improve workflow, efficiency, and communication between staff.

Goal 3: Outreach and Communication

Consumers and licensees are able to make informed decisions regarding the safe practice of osteopathic medical services.

- 3.1 Educate licensees on personal responsibilities regarding licensure and ongoing to set expectations.
- 3.2 Develop presentations and informational videos (e.g., for out-of-state doctors and residents who are considering applying for licensure in California) to explain the application process and provide statistics on the resident population.
- 3.3 Create a quarterly newsletter as a way for stakeholders to get to know the Board and promote the Board's Listserv and website so that important issues are disseminating to all interested parties.
- 3.4 Recreate the branding and logo of the Board to better market and educate stakeholders.
- 3.5 Collaborate with the Office of Public Affairs to develop a marketing plan to improve awareness of the Board, create interest for potential licensees, and allow them to be more engaged with the Board and the community.
- 3.6 Attend schools, conventions (e.g., medical association events), and other outreach events to be proactive in informing the public and potential licensees about the Board.
- 3.7 Audit the website and develop content to keep it up-to-date, innovative, and informative, and to drive stakeholders to the website.
- 3.8 Create a budget change proposal for additional staff who would manage content for the website and update regulations and legislation.

Goal 4: Regulation and Legislation

Monitor and uphold the law, and participate in the regulatory and legislative process.

- 4.1 Research the feasibility of developing a statute for including anti-discrimination language to allow the Board to take action when complaints arise.
- 4.2 Explore hiring a consultant or pursuing a dedicated staff person to better track regulations and legislation.
- 4.3 Collaborate and build relationships with law makers and staffers in order to have a stronger voice and represent the Board.
- 4.4 Research innovative approaches to disease/medication and create advisory guidelines for legislation and regulations to support best practices.



Goal 5: Board Administration

The Board builds an excellent organization through proper Board governance, effective leadership, and responsible management.

- 5.1 Research options available to collaborate and utilize SOLID to assist in creating a more cohesive team.
- 5.2 Implement cross-training with staff for business continuity and efficiency.
- 5.3 Improve communication using available technology to promote office efficiencies and provide better customer service.
- 5.4 Create a schedule for staff to attend Board meetings to foster a greater understanding of Board processes.
- 5.5 Update procedure manuals to onboard new employees and prepare for succession planning.
- 5.6 Develop Board informational materials to provide to DCA staff and help when onboarding new employees.
- 5.7 Schedule a legal training for the Board to assist members in the decision-making process.
- 5.8 Develop a Board member orientation packet to provide to new Board members during onboarding.



Strategic Planning Process

To understand the environment in which the Board operates and identify factors that could impact the Board's success, the SOLID unit conducted an environmental scan of the internal and external environments by collecting information through the following methods:

- Interviews conducted with five members of the Board, the executive director, and the assistant executive director completed during the month of March and April 2019 to assess the challenges and opportunities the Board is currently facing or will face in the upcoming years.
- One focus group with Board staff on April 11, 2019, to identify the strengths and weaknesses of the Board from an internal perspective. Eight Board staff members participated.
- An online survey sent to randomly selected external Board stakeholders in March 2019 to identify the strengths and weaknesses of the Board from an external perspective. A total of 211 stakeholders completed the survey.

The most significant themes and trends identified from the environmental scan were discussed by the Board executive team during a strategic planning session facilitated by SOLID on April 30, 2019. This information guided the Board in the development of its mission, vision, and values, while directing the strategic goals and objectives outlined in this 2019–2023 Strategic Plan.





Osteopathic Medical Board of California
www.ombc.ca.gov

1300 National Drive, Suite 150
Sacramento, CA 95834-1991
Phone: (916) 928-8390
Fax: (916) 928-8392
Email: osteopathic@dca.ca.gov



Prepared by:
Julie Kolaszewski, Strategic Business Analyst and Facilitator
SOLID Training and Planning Solutions

Department of Consumer Affairs
1747 North Market Blvd., Suite 270
Sacramento, CA 95834

This strategic plan is based on stakeholder information and discussions facilitated by SOLID for the Osteopathic Medical Board of California in March and April 2019. Subsequent amendments may have been made after Board adoption of this plan.