



## **Briefing Paper**

## **Agenda Item 12**

**Date:** May 16, 2024

**Prepared for:** OMBC Members

**Prepared by:** Robin Matson, Associate Governmental Program Analyst

**Subject:** Enforcement Program Updates

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**Purpose:** Update on Enforcement Program  
Q1, Q2, and Q3 - FY 2023-2024

**Attachments:** [12\(a\) Enforcement and Probation Performance Measures  
Q1, Q2, and Q3-FY 2023-2024](#)

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### **Background:**

This is a report on the Board's Enforcement updates for the first, second, and third quarters of FY 2023-2024. Please refer to attachment 12(a), which encompasses the Enforcement Program statistics.

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### **Analysis:**

The enforcement unit continues to excel. Enforcement staff continue to receive training from Director Calderon in all areas of the enforcement process and the unit is getting a lot stronger. We are conducting our own desk investigations, referring cases to the field, executing our own administrative citations, offering our own pre accusation public letter of reprimands, referring our own cases to the Office of Attorney General, and subsequently filing our own disciplinary orders.

Our newest analyst, Ms. Andrea Harmon, has been doing an exceptional job with complaint intake and carrying her own case load. Her prior employment experience in the health care system has really proven to add to the unit's success. Her addition has also greatly reduced overall caseloads and processing times in enforcement.

We are all prepared for the implementation of the new requirements for SB 815. The unit in collaboration with the BreEZe team, created new template letters to request impact statements and have updated BreEZe with new activity codes. Once the Board

receives funding, the unit will be fully prepared to implement the additional requirements.

We continue to work with the Department of Consumer Affairs BreEZe team daily to improve database efficiencies. This allows the enforcement staff to appropriately reflect the status of complaints and to obtain accurate statistics.

In addition, we continue to work with the Division of Investigation's (DOI) non-sworn unit on most of our cases that are being referred for further investigations. As you can see in our statistics, the number of cases being referred to the field continues to increase each quarter.

Every month, the analysts receive individualized pending reports from Director Calderon. These reports highlight our high priority and short statute of limitation cases. In addition to receiving these reports, we meet weekly to conduct enforcement roundtable meetings with Director Calderon. The analysts can bring case files that require guidance which lead to very productive group discussions. This has proven to be very beneficial to all of us as it has provided the opportunity for additional training. Director Calderon also meets with us for one-on-one discussions.

In terms of communication with our stakeholders, we continue to meet monthly with HQUI, the Attorney General's Office, and our legal counsel.

#### *Board Program Statistics:*

For our program statistics please refer to attachment 12(a) which covers our Enforcement Program Q1, Q2, and Q3 statistics for fiscal year 2023-2024. Performance Measure 1 (PM1) covers the amount of consumer complaints and arrests and convictions received in comparison to last year. The Board is seeing a significant increase of about 35% in consumer complaints and a slight decrease of about 26% in arrest and conviction cases, bringing the total number of complaints received to an increase of 31% in comparison to last fiscal year. The Board believes that the changes that were made to the Medical Board of California's website because of our request to help redirect our consumers to our agency may be accounting for this increase. We are receiving these complaints directly at a more expeditious timeframe, which was the goal. In turn we are providing faster consumer protection.

Performance Measure 2 (PM2) is the average number of days it takes for our analysts to initiate our enforcement complaints and acknowledge receipt. The target for this performance measure is ten (10) days and we continue to be well under the target at a three (3) day average for the past three quarters.

Performance Measure 3 (PM3) is the average number of days it takes to complete investigations and enforcement action for cases not referred to the Attorney General's Office. Case aging here fluctuates greatly because it takes an average of all cases, and one or two very complicated cases can skew these numbers drastically. These numbers

include the timeline for HQIU investigative staff. The target for PM3 is 360 days and as you can see, we are at about 218 days.

Performance Measure 4 (PM4) is the average number of days it takes to complete investigations and enforcement actions that are transmitted to the Attorney General's Office for formal action. Case aging in this category had a slight increase of about 17% in comparison to last year.

So far, this fiscal year, the Board is well under its performance measure targets for three (3) of its categories which is amazing. PM4 is the measure that unfortunately the Board has less control over as this measure takes into consideration the timeline from the Attorney General's Office, respondent's legal representatives, and the Office of Administrative Hearings. The 17% increase from last year can be attributed to the Board referring more cases to the Attorney General's office. In addition, some of these cases have been found to be complicated in nature.

The Board currently has 439 pending enforcement cases, 68 of those are pending at HQIU and 17 at the Attorney General's Office. The remaining are pending at the desk investigation level. As previously reported by Director Calderon, the goal of adding Ms. Harmon to the unit was to reduce our caseload and we can successfully report that each analyst went from 145 cases to 109 cases each this quarter.

Year to date the Board has filed thirteen (13) accusations or amended accusations, one (1) accusation and petition to revoke probation, eight (8) citations, eleven (11) public reprimands or public letter of reprimands, eleven (10) decision orders with probation, one (1) surrender, and two (2) revocations. As you can see enforcement is taking more action in comparison to last year.

**Action Requested:** No Action Required