



DENTAL BOARD OF CALIFORNIA

2005 Evergreen St., Suite 1550, Sacramento, CA 95815

P (916) 263-2300 | F (916) 263-2140 | www.dbc.ca.gov



DENTAL BOARD OF CALIFORNIA

NOTICE OF TELECONFERENCE MEETING

February 9, 2024

Board Members

Alan Felsenfeld, MA, DDS, President
Joanne Pacheco, RDH, MAOB, Vice President
Lilia Larin, DDS, Secretary
Steven Chan, DDS
Joni Forge, DDS
Meredith McKenzie, Esq., Public Member
Angelita Medina, MHS, Public Member
Sonia Molina, DMD, MPH
Rosalinda Olague, RDA, BA
Yogita Thakur, DDS, MS
James Yu, DDS, MS

Action may be taken on any item listed on the agenda.

The Dental Board of California (Board) will meet by teleconference in accordance with Government Code section 11123.2 at 8:30 a.m., on Friday, February 9, 2024, with the following location available for Board and public member participation:

Department of Consumer Affairs
1625 N. Market Blvd., Hearing Room #102
Sacramento, CA 95834

This meeting will be held via WebEx Events. Instructions to connect to the meeting can be found [HERE](#).

To participate virtually in the WebEx Events meeting on Friday, February 9, 2024, please log on to this website the day of the meeting:

<https://dca-meetings.webex.com/dca-meetings/j.php?MTID=m938bfb911cd02fb128ae20584242f5eb>

**Event number: 2480 363 8267
Event password: DBC29 (32229 from phones)**

Due to potential technical difficulties, please consider submitting written comments by February 2, 2024, to dentalboard@dca.ca.gov for consideration.

AGENDA

8:30 a.m., Friday, February 9, 2024

1. Call to Order/Roll Call/Establishment of a Quorum
2. Public Comment on Items Not on the Agenda **[5]**
Note: The Board may not discuss or take action on any matter raised during this Public Comment section, except to decide whether to place the matter on the agenda of a future meeting. (Government Code sections 11125 and 11125.7(a).)
3. Discussion and Possible Action on Board Meeting Minutes
 - a. November 8-9, 2023 **[6-38]**
 - b. December 15, 2023 **[39-40]**
4. Board President Report **[41-42]**
 - a. Update on 2024 Board Member Committee Assignments
5. Executive Officer Report **[43]**
6. Report on Department of Consumer Affairs Activities, which may include updates on the Department's Administrative Services, Human Resources, Enforcement, Information Technology, Communications and Outreach, as well as Legislative, Regulatory, and Policy Matters **[44]**
7. Budget Report **[45]**
8. Enforcement
 - a. Update on "Attorney General's Annual Report on Accusations Prosecuted for Department of Consumer Affairs Client Agencies, Business and Professions Code Section 312.2, January 1, 2024" **[46-99]**
 - b. Review of Statistics and Trends **[100-107]**
9. Substance Use Awareness **[108-128]**
 - a. Diversion Program Report and Statistics
 - b. Controlled Substance Utilization Review and Evaluation System Report
10. Licensing, Certifications, and Permits **[129-140]**
 - a. Update on Dental Licensure and Permit Statistics
11. Examinations **[141]**
 - a. Report on Commission on Dental Competency Assessment, Western Regional Examining Board, and Council of Interstate Testing Agencies (CDCA-WREB-CITA)
12. Anesthesia and Sedation **[142-168]**

- a. General Anesthesia and Sedation Permits: Inspections and Evaluations Statistics
 - b. Update Regarding Board Implementation of Senate Bill (SB) 501 (Glazer, Chapter 929, Statutes of 2018)
 - c. Discussion and Possible Action Regarding Appointment of General Anesthesia, Medical General Anesthesia, and Moderate Sedation Permit Evaluators
13. Discussion and Possible Action on Board, Council, and Committee Member Administrative Policy and Procedure Manual **[169-194]**
14. Update, Discussion, and Possible Action on Proposed Regulations
- a. Status Update on Pending Regulations **[195-198]**
 - b. Discussion and Possible Action to Appoint a Working Group to Develop Proposed Amendments to California Code of Regulations (CCR), Title 16, Section 1005, Minimum Standards for Infection Control **[199-207]**
 - c. Discussion and Possible Action to Consider Modified Text for Currently Proposed Regulatory Language and to Adopt Amendments to CCR, Title 16, Section 1018 Relating to the Board’s Disciplinary Guidelines **[208-292]**
15. Update, Discussion, and Possible Action on 2023/2024 Legislation Impacting the Board, the Department of Consumer Affairs, and/or the Dental Profession
- a. 2024 Tentative Legislative Calendar – Information Only **[293-297]**
 - b. Update Regarding the Board’s 2024 Sunset Review Oversight Hearing **[298]**
 - c. Legislation of Interest **[299-302]**
16. Discussion and Possible Action Regarding Appointment of Dental Assisting Council (DAC) Members **[303-304]**
17. Public Comment on Future Agenda Items **[305]**
Stakeholders are encouraged to submit proposals in writing to the Board before or during the meeting for possible consideration by the Board at a future meeting.
18. Recess Open Session

CLOSED SESSION (WILL NOT BE WEBCAST)

19. Convene Closed Session
20. Pursuant to Government Code Section 11126(c)(3), the Board will Meet in Closed Session to Deliberate and Vote on Disciplinary Matters, Including Stipulations and Proposed Decisions
21. Adjourn Closed Session

OPEN SESSION

22. Reconvene Open Session – Call to Order/Roll Call/Establishment of a Quorum

23. Board President's Report on Closed Session Items **[306]**

24. Adjournment

Information regarding the meeting is available by contacting the Board at (916) 263-2300 or (877) 729-7789, email: DentalBoard@dca.ca.gov, or send a written request to the Dental Board of California, 2005 Evergreen Street, Suite 1550, Sacramento, CA 95815. This agenda can be found on the Dental Board of California website at dbc.ca.gov. The time and order of agenda items are subject to change at the discretion of the Board President and may be taken out of order. In accordance with the Bagley-Keene Open Meeting Act, all meetings of the Board are open to the public.

In accordance with Government Code section 11123.2(j)(1), the teleconference locations from which Board members may participate in the meeting may not be identified in the notice and agenda of the meeting.

The meeting will be webcast, provided there are no unforeseen technical difficulties or limitations. To view the webcast, please visit thedcapage.wordpress.com/webcasts/. The meeting will not be cancelled if webcast is not available. Meeting adjournment may not be webcast if it is the only item that occurs after a closed session. Members of the public may, but are not obligated to, provide their names or personal information as a condition of observing or participating in the meeting. (Government Code section 11124.)

Government Code section 11125.7 provides the opportunity for the public to address each agenda item during discussion or consideration by the Board prior to the Board taking any action on said item. Members of the public will be provided appropriate opportunities to comment on any issue before the Board, but the Board President may, at their discretion, apportion available time among those who wish to speak. Individuals may appear before the Board to discuss items not on the agenda; however, the Board can neither discuss nor take official action on these items at the time of the same meeting (Government Code sections 11125, 11125.7(a)).

This meeting is being held via teleconference through WebEx Events. The meeting location is accessible to the physically disabled. A person who needs disability-related accommodations or modifications to participate in the meeting may make a request by contacting Tracy Montez, Executive Officer, at Dental Board of California, 2005 Evergreen Street, Suite 1550, Sacramento, CA 95815, or by phone at (916) 263-2300. Providing your request at least five (5) business days prior to the meeting will help ensure availability of the requested accommodations. TDD Line: (877) 729-7789



DENTAL BOARD OF CALIFORNIA

2005 Evergreen St., Suite 1550, Sacramento, CA 95815

P (916) 263-2300 | F (916) 263-2140 | www.dbc.ca.gov



MEMORANDUM

DATE	January 24, 2024
TO	Members of the Dental Board of California
FROM	Mirela Taran, Administrative Analyst Dental Board of California
SUBJECT	Agenda Item 2.: Public Comment on Items Not on the Agenda

Notes



**DENTAL BOARD OF CALIFORNIA
MEETING MINUTES
November 8-9, 2023**

The Dental Board of California (Board) met by teleconference/WebEx Events on November 8-9, 2023, with the following location available for Board and public member participation:

Department of Consumer Affairs
1747 N. Market Blvd., Hearing Room #186
Sacramento, CA 95834

Members Present:

Alan Felsenfeld, MA, DDS, President
Joanne Pacheco, RDH, MAOB, Vice President
Lilia Larin, DDS, Secretary
Steven Chan, DDS
Joni Forge, DDS
Meredith McKenzie, Esq., Public Member
Sonia Molina, DMD, MPH
Rosalinda Olague, RDA, BA
Yogita Thakur, DDS, MS (November 9, 2023)
James Yu, DDS, MS

Members Absent:

Angelita Medina, MHS, Public Member
Yogita Thakur, DDS, MS (November 8, 2023)

Staff Present:

Tracy A. Montez, Ph.D., Executive Officer
Ryan Blonien, Enforcement Chief (North)
Paige Ragali, Chief of Dental Programs and Customer Support
Tina Vallery, Chief of Dental Assisting
Jessica Olney, Anesthesia Unit Manager
Wilbert Rumbaoa, Administrative Services Unit Manager
David Bruggeman, Legislative and Regulatory Specialist
Juan Fuentes, Investigator
Kelly Silva, Investigator
Mirela Taran, Administrative Analyst
Joseph Tippins, Investigator
Melissa Gear, Deputy Director, Board and Bureau Relations, Department of Consumer Affairs (DCA)

DRAFT - Dental Board of California
November 9, 2023 Meeting Minutes

Kristy Schieldge, Regulatory Counsel, Attorney IV, Legal Affairs Division, DCA
Cesar Victoria, Office of Public Affairs, DCA
Tara Welch, Board Counsel, Attorney IV, Legal Affairs Division, DCA

10:30 a.m., Wednesday, November 8, 2023

Agenda Item 1: Call to Order/Roll Call/Establishment of a Quorum

The Board President, Dr. Alan Felsenfeld, called the meeting to order at 10:50 a.m. The Board Secretary, Dr. Lilia Larin, called the roll; nine Board Members were present, and a quorum was established. Board Members Angelita Medina, MHS, and Yogita Thakur, DDS, MS were absent.

Agenda Item 2: Public Comment on Items Not on the Agenda

There were no public comments made on items not on the agenda.

Agenda Item 3: Discussion and Possible Action on Board Meeting Minutes

Agenda Item 3.a.: August 17-18, 2023

Secretary Larin requested an amendment to the meeting minutes on page 4, Agenda Item 6, third paragraph, nineteenth line, to strike “the issue”. Board Member Steven Chan requested an amendment to the meeting minutes on page 26, Agenda Item 27(b), eighth paragraph, first line, to strike and replace “Witcher” with “Whitcher”. Secretary Larin requested an amendment to the meeting minutes on page 24, Agenda Item 26(e), eighth paragraph, third line, to insert “are” after “they”.

(M/S/C) (Pacheco/Chan) to approve the August 17-18, 2023 meeting minutes as corrected.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco, Yu.

Nays: None.

Abstentions: None.

Absent: Medina, Thakur.

Recusals: None.

The motion passed.

Agenda Item 3.b.: October 12, 2023

(M/S/C) (Chan/Pacheco) to approve the October 12, 2023 meeting minutes.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Pacheco, Yu.

Nays: None.

Abstentions: Olague.

Absent: Medina, Thakur.

Recusals: None.

The motion passed.

Agenda Item 4: Board President Report

President Felsenfeld reported that he attended, along with some fellow Board members, the Diversity, Equity, and Inclusion (DEI) training, which was given by DCA on October 9, 2023. On October 10, 2023, he attended the Board Member Orientation Training, which Board Members are required to attend once they are appointed and re-appointed to a board.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 5: Executive Officer Report

Dr. Tracy Montez shared that the Board's November newsletter was posted to the Board's website and encouraged the public to check it out.

President Felsenfeld inquired whether the Board has received any feedback on the newsletter. Dr. Montez reported that one of the Board's special investigators from the Orange Field Office informed her that in his work of being out in the field, licensees have commented that the newsletter has been helpful and educational.

Board Member Rosalinda Olague verbalized that she has also heard from peers and colleagues regarding the newsletter and has gotten the impression that it has been perceived well.

Secretary Larin expressed that she was asked whether other associations can place the link to the newsletter on their website. President Felsenfeld responded that is acceptable.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 6: Report on Department of Consumer Affairs Activities, which may include updates on the Department's Administrative Services, Human Resources, Enforcement, Information Technology, Communications and Outreach, as well as Legislative, Regulatory, and Policy Matters

Melissa Gear provided a departmental update. She stated that training continues to be a priority for the DEI Steering Committee. In October 2023, 138 DCA leaders and 26 Board Members completed DEI Human-Centered Approach training provided by University of Massachusetts consultant Dr. Bernard Gibson. On November 7, 2023, University of Massachusetts consultant Christopher Veil provided a virtual training titled DEI Dialogue for Leaders to DCA managers, supervisors, and leadership. She added that DCA encouraged all executive officers and their management teams to attend and continues to support DCA boards and bureaus in expanding culturally competent communications and promotes the importance of meeting the needs of all California consumers, licensees, and applicants. DCA's Deputy Director of Communications recently met with the Consulate of Mexico in San Francisco to share information and resources about DCA, as well as hear about areas of interest to the Consulate. As a result of the meeting, DCA offered partnerships for future in-person and online events and to share available consumer resources. Ms. Gear stated that DCA boards and bureaus may conduct entirely remote public meetings without notice locations accessible to the public through December 31, 2023, so long as the public is able to participate in the meeting remotely. Commencing on January 1, 2024, four meeting options will be available pursuant to the Bagley-Keene Open Meeting Act. She reminded the Board Members to check out the latest Board and Bureau Relations newsletter. Ms. Gear provided updates on out-of-state travel restrictions and addressed required Board Member trainings, the Our Promise Campaign, and DCA's annual Turkey Drive.

Board Member Chan commented that he was in attendance for the DEI session and voiced that he has been involved with different arenas, more recently being with the American Dental Association and his hospital district. He noted that the Strategic Organizational Leadership and Individual Development (SOLID) session on DEI is following Governor Newsom's thrust to try and inculcate that into structural institutions. He voiced that the first session calibrated what the language and words mean and looked at structural ways that some of the agencies and boards can start integrating that.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 7: Report on Dental Hygiene Board of California Activities

Anthony Lum, Executive Officer of the Dental Hygiene Board of California (DHBC), provided a verbal report on their activities.

Board Member Olague complimented DHBC President Dr. Carmen Dones and the DHBC and voiced that it is really nice when the community, students, and stakeholders

complement what the DHBC's actions have been on an expansion of hygiene programs.

Secretary Larin noted that the Board's Access to Care Committee wants to increase the workforce for all the professions, which includes registered dental assistants (RDAs) and RDA extended functions and asked what the DHBC is doing to create more job opportunities in hygiene. Mr. Lum replied that when entities are requesting to open up new schools, the DHBC has to look at the demographics throughout the state and unfortunately, the mass majority of the individuals who want to open a new school are in the Los Angeles Basin. Fortunately, there are currently two that are looking at more rural areas, which should help that aspect. Other items that he would personally like to start focusing on is to enhance more of the Registered Dental Hygienist in Alternative Practice (RDHAP) program. He voiced that California, surprisingly for a very popular state, has a substantial amount of dental deserts, and RDHAPs can fill in a lot of gaps for that if they are able to have the resources to open a mobile dental clinic or even a standalone brick and mortar place.

Secretary Larin asked for an explanation on how bad the shortage is. Mr. Lum responded that they have not had a chance to do a lot of research on that. However, based upon the feedback that they have received from licensees and in working with DCA management, they identified areas where the profession is lacking and areas of California that are in mostly rural areas and Indian reservations that could really use consistent dental care.

Secretary Larin stated that between her colleagues, it is very difficult to find a hygienist, and the Dental Assisting Council (DAC) had a suggestion to look into the expired licenses to determine if those individuals want to reactivate their license. Mr. Lum replied that what he sees in paralleling it with their program is that when you are looking at thousands of licensees who have had a canceled license, they are cancelled due to the fact that a lot of them moved on to become dental hygienists or to go to dental school. A considerable amount of the individuals with canceled license also have left the profession due to moving out of state and possibly because they did not find it appealing to continue in dental hygiene and moved on to other professions. He voiced that he was surprised at how many individuals contacted the DHBC once they implemented a retired license status.

President Felsenfeld asked for clarification on whether the DHBC was looking at regulations relative to military spouses or those in the military coming through. Mr. Lum responded that the DHBC is working on a regulation for the temporary license for active military individuals or their spouses.

Vice President Joanne Pacheco thanked the DHBC and their work on the elimination of the clinical board for California graduates.

President Felsenfeld requested public comment on this item. The Board received public comment.

Tooka Zokaie, representing California Dental Association (CDA), stated that CDA is working on a survey to all California dental hygiene programs to learn more about capacity, wait list, graduation, areas of practice, and additional feedback. They also are investigating how they can quantify the dental hygiene shortage experiences that many are facing and are working closely with the DHBC to report what they find.

Agenda Item 8: Budget Report

Wilbert Rumbaoa provided a report on the State Dentistry Fund, which the Board manages, for fiscal year (FY) 2023-24. Mr. Rumbaoa conveyed that the Board ended FY 22/23 with just over \$17.6 million in reserve balance. There are 10.6 months in reserve, which is the amount of time the Board can continue normal operations without any new incoming revenues. A healthy program is considered to have at least 6 to 12 months in revenue. Based on the reports received by DCA, the Board projected to revert approximately \$635,000 at the end of FY 23/24. The fund condition includes the projections from Fiscal Month 3 and any projections for revenue that Board staff have submitted to DCA. Regarding the report on page 52 of the meeting materials for the expenditure projections, there are currently three months of projections. In terms of the three months, all the information has not been entered into the system yet. Therefore, the Board, in conjunction with DCA, makes the best projection available at the time based on the data that staff have input into the system. Mr. Rumbaoa stated that Board staff will keep the line of communication with the DCA Budget Office open to monitor the Board's fund condition statement, expenditures, and revenues. Any future legislation or unanticipated events could result in the Board's need for additional resources.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 9: Enforcement

Agenda Item 9.a.: Review of Statistics and Trends

Ryan Blonien provided the report, which is available in the meeting materials.

Dr. Montez noted that the Board's Orange Field Office is fully staffed, which has not happened in a very long time, and the unit is shy of one investigator with an individual who is in the final stage of the background process.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 9.b.: Update on Enlightened Enforcement Project

Vice President Pacheco provided the presentation, which is available in the meeting materials.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 10: Substance Use Awareness

Agenda Item 10.a.: Diversion Program Report and Statistics

Dr. Montez provided the report, which is available in the meeting materials.

Board Member Chan stated that periodically over the years, the Board received testimony from the Chair of the Diversion Evaluation Committee, and that testimony is very compelling as it gives a face to the numbers in the report. He added that it also helps to understand why the Board does what it does in regards to diversion. He encouraged the Board to consider having that testimony again.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 10.b.: Controlled Substance Utilization Review and Evaluation System Report

Mr. Blonien provided the report, which is available in the meeting materials.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

At 11:50 p.m., the Board recessed for a break.

At 12:58 p.m., the Board reconvened.

Agenda Item 11: Licensing, Certifications, and Permits

Agenda Item 11.a.: Update on Dental Licensure and Permit Statistics

Paige Ragali provided the report, which is available in the meeting materials.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 12: Examinations

Agenda Item 12.a.: Update, Discussion, and Possible Action on the Review of the Joint Commission on National Dental Examinations Integrated National Board Dental Examination

Dr. Montez provided the report, which is available in the meeting materials.

Board Member Chan voiced that he got lost on page 89 of the meeting materials, specifically the third paragraph, where it states “The INBDE [Integrated National Board Dental Examination] did not assess practical demonstration of skills and California-specific laws and ethical guidelines”. He noted that as a preamble to that, there are three elements, which include the knowledge base, clinical performance, and California

Law and Ethics. The last paragraph claims that even though INBDE did not assess the practical demonstration, the Board accepts them. Board Member Chan asked if we accept it as only that portion of the triumvirate, meaning those three things.

Dr. Montez pointed out that the full report is on the Board's website. She voiced that the Office of Professional Examination Services (OPES) is essentially saying that this is a knowledge-based test, which is suitable given the direction of the Board in using a national exam.

President Felsenfeld added that the three things needed to get licensed consist of knowledge base, clinical base, and law and ethics. He noted that this is going to take the place of the two-part national boards that candidates used to take back in the day, and that is going to be one part. Dr. Montez replied that it is the continued use of the INBDE, and nothing has changed to significantly cause any concerns with the continued use of it. Dr. Matthew Grady commented that the INBDE integrates the knowledge of basic biomedical sciences and assesses it in a way that focuses on clinical relevance; it is that merging of what was national boards part one and part two.

President Felsenfeld mentioned that it is his understanding that part one and part two were universal across all dental schools in the country, and now this is going to be what students have to take so that they can graduate. Dr. Grady responded that is correct. President Felsenfeld inquired when the exam is going into effect. Dr. Grady replied that it launched in August of 2020.

Secretary Larin asked what the percentage pass rate is before with the old exam and the new exam. Dr. Grady responded that what they have seen so far with the INBDE is that for candidates who were educated in Commission on Dental Accreditation (CODA) accredited education programs, the pass rate is approximately 99%. For the national board part one and part two, the pass rates historically were in the same neighborhood ranging from 90 to 97% until conceivably over the final 10 years of the administration of that exam. The pass rate for the new exam is approximately 99%.

(M/S/C) (Felsenfeld/Pacheco) to accept OPES's recommendation to continue use of the INBDE combined exam as part of the Board's licensing requirements.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco, Yu.

Nays: None.

Abstentions: None.

Absent: Medina, Thakur.

DRAFT - Dental Board of California
November 9, 2023 Meeting Minutes

Page 8 of 33

Recusals: None.

The motion passed.

Agenda Item 12.b.: Update, Discussion, and Possible Action on the Review of the Joint Commission on National Dental Examinations Licensure Objective Structured Clinical Examination

Dr. Montez provided the report, which is available in the meeting materials.

President Felsenfeld asked for an explanation on what the Dental Licensure Objective Structured Clinical Examination (DLOSCE) does and what it is.

Dr. Grady responded that the DLOSCE is essentially a new type of clinical dental examination designed to assess candidate's clinical judgment skills, and is a computer-based examination that is administered at prometric test centers all across the country including throughout California and neighboring states. As a one-day exam, it takes about six and a half hours to complete and contains 150 questions. Essentially all of the questions on the examination present a patient scenario where the candidate must evaluate, for example, clinical photographs and radiographs. Additionally, many of the questions involve three-dimensional models that the candidate can view on the screen and manipulate. The examination launched in June of 2020 and since that time, the Joint Commission has established significant validity evidence to support the Board's use of the examination.

Secretary Larin stated that she is concerned that although they may be able to assess clinical skills, transferring that into a life situation and actually doing the work is very different. She noted that she believes it is extremely important to have a hands-on examination and inquired how do you assess whether a candidate has successfully removed decay and the like. Dr. Grady responded that the Joint Commission does feel that as psychomotor skills are important in dentistry, the DLOSCE does not directly assess psychomotor skills, but it does an excellent job of predicting a candidate's clinical performance in dental school. The DLOSCE assesses those clinical micro judgments that underly the candidate's ability to detect that decay, know it is there, and know whether they need to keep going or stop. The DLOSCE is able to predict how a student does in the clinic.

Secretary Larin asked Dr. Grady whether he compared the examination and applied it to an actual psychometric exam when he did research for the exam. Dr. Grady replied that they looked at a number of students who took the DLOSCE and their course grades in their clinical courses in the third year of dental school. They then looked at the correlation between those two and found a strong positive correlation. They also asked the academic dean at these students' school to rate the students in terms of their clinical performance and asked the dean to essentially categorize the students into three different categories, which includes the top 20% of clinical performers, the bottom 20%, and then the middle 60%. When they compared how those three groups

performed on the exam, they found that the students who were rated by their dean as being in the top 20% performed much better on the examination than the students who were in the bottom 20% of the exam. The difference was very large being that it was a 1.28 standard deviation.

Board Member Sonia Molina asked whether there were any correlations made with the cohorts that had limited exposure to patients during COVID since they were not able to see as many patients and therefore not get the practical experience. Dr. Grady responded that the candidates who participated in their study would have made it through their clinical training prior to COVID. He noted that the study was conducted in the summer of 2020 and that they have not done a follow-up study looking at a cohort that would have been most heavily affected by COVID.

Board Member Chan voiced that the statement in the memo for this agenda item, "Board staff do not recommend adding an additional examination to the dental licensure pathway. The current examinations appear to be functioning well. An additional examination requirement could be perceived as a barrier and cost to candidates," contradicts the statement "OPES generally supports the Board's potential use of the DLOSCE for licensure in California, as an alternative to the ADEX, and in addition to the INBDE and LEX".

Dr. Montez responded that Board staff does not feel that they need to simply add an exam to be adding an exam. To have the American Board of Dental Examiners (ADEX), DLOSCE, INBDE, and the Law and Ethics Examination (LEX) may not be necessary as currently things seem to be functioning well. If the Board decides that it would like to explore an alternative to the ADEX because it may have a stronger assessment of clinical skills, then Board staff would certainly support that. With DCA, boards are often approached by associations about various exams, and before you know it, there are all kinds of exams being used to assess entry-level competence, which creates a challenge for statistical purposes. She voiced that if the Board chooses to move forward, Board staff want a thoughtful assessment as to whether or not it should be possibly replaced, which would be the ADEX essentially.

(M/S/C) (Felsenfeld/Olague) to direct staff to further research the use of the DLOSCE compared to the ADEX as a means to clinically assess candidates for dentist licensure.

President Felsenfeld requested public comment before the Board acted on the motion. The Board received public comment.

Ms. Zokaie, representing CDA, voiced that they support the Board's motion to explore the DLOSCE examination further and also to look at what was used to determine the impact of the DLOSCE compared to other exam pathways that currently exist both in how it was evaluated and how it has now been implemented in other spaces.

Dr. David Carsten, Washington State Dental Commission Chair, DLOSCE Steering Committee, and Assistant Professor at Oregon Health Sciences University, expressed that he is interested in authenticity and truth and speaks in favor of the motion. He voiced that an exam that is meaningful is important, in addition to it testing critical thinking and clinical judgment. As he has taught residents that passed the ADEX and residents that passed the DLOSCE during COVID and has had some issues with the residents that passed the ADEX; one was deemed incompetent, and the others that passed the DLOSCE were fine. Dr. Carson disclosed that he has been involved in creating DLOSCE exams for testing clinical competence to go into the clinic for the school's DS2 to DS3 students, and he found it to be predictive. He added that the DLOSCE is inexpensive to students, it is about \$1,000, and it is convenient for schools.

Dr. David Waldschmidt, Director of the Joint Commission on National Dental Examinations (JCNDE), read a statement on behalf of Dr. Anthony Herro, Chair of the JCNDE. On behalf of the Joint Commission, Dr. Herro extends their thanks to the members of the Board for their thoughtful and considerate review of the Joint Commission's INBDE and dental licensure objective search clinical exam. The Joint Commission is pleased to have the opportunity to serve the Board through their examinations, which are in use by boards throughout the United States. The Joint Commission's assessments of candidate cognitive skills are accepted by every dental board in the United States. In just five years, they will celebrate 100 years since they first began work in helping to inform decisions to license individuals to practice dentistry. Dr. Waldschmidt verbalized that the Joint Commission is an organization that the Board has relied upon for many years to provide accurate information about whether an individual seeking a license to practice truly possesses the level of skills necessary for safe and effective practice. The decisions that the Board makes are incredibly important as these decisions have implications for the health and wellbeing of every citizen of California who receives dental treatment in this state. With the preceding in mind, the Joint Commission is particularly proud of its most recent examination, the DLOSCE, which is a cutting-edge examination designed to fulfill boards clinical licensure examination requirements. The DLOSCE recognizes the vital importance of sound clinical judgment in practitioner decision-making. Although it is a relatively new examination, the DLOSCE's predictive abilities have been demonstrated to far exceed any other examination currently being used for dental licensure purposes.

Peter Loomer, test construction writer for the Joint Commission for over 10 years, including the DLOSCE, and professor and Dean of the School of Dentistry at UT Health San Antonio, commented on the fabrication of the examination. He affirmed that it is able to test a lot of your ability to not just diagnose but to understand what the next step would be in treating the patient. Furthermore, it is a highly challenging exam and is acutely different from other exams, as it really focuses on clinical skills. He noted it is lower in cost to the candidate and is able to test skills on a wide variety of patient scenarios that you are not able to do in a simulation board exam.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, McKenzie, Molina, Olague, Pacheco.

Nays: None.

Abstentions: Larin.

Absent: Medina, Thakur, Yu.*

Recusals: None.

The motion passed.

Agenda Item 13: Anesthesia and Sedation

Agenda Item 13.a.: General Anesthesia and Sedation Permits: Inspections and Evaluations Statistics

Jessica Olney provided the report, which is available in the meeting materials.

President Felsenfeld commented that when the Board gets through sunset review, the Board anticipates going from two evaluators on the first exam and one each thereafter. Ms. Olney replied that the Board is currently implementing that at the moment. President Felsenfeld asked whether it is easier to schedule evaluations now that there is only one evaluator on the second time around. Ms. Olney responded that it is and clarified that it only applies to existing permit holders who renewed after January 1, 2022.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 13.b.: Update Regarding Board Implementation of Senate Bill (SB) 501 (Glazer, Chapter 929, Statutes of 2018)

Ms. Olney provided the report, which is available in the meeting materials.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 13.c.: Discussion and Possible Action Regarding Appointment of General Anesthesia, Medical General Anesthesia, and Moderate Sedation Permit Evaluators

Ms. Olney provided the report, which is available in the meeting materials.

Board Member Chan voiced that he does not have objections to the individuals on the list but raised a caution flag that the entire reason and driver for the paradigm shift in the anesthesia regulations was about pediatric deaths. In the regulations, they defined for the permit system a pediatric endorsement for kids under 13 and under seven. When the Board got the preliminary survey of adverse events, it was not pediatrics but geriatrics. He continued that the caution flag is that a general evaluator does not necessarily have to have a pediatric endorsement in order to evaluate someone that

has a pediatric endorsement. Board Member Chan expressed that if evaluators are limited to those who have the pediatric endorsement on their general anesthesia, medical anesthesia, or moderate sedation permits, the Board would be limiting how many individuals they can evaluate. If evaluators who may not have the pediatric endorsements evaluate individuals who do have the pediatric endorsement, they may fail to see something because they do not have the experience. He reiterated that tracking forward is a caution flag.

President Felsenfeld asked whether it is correct that if an individual has a moderate sedation permit with no pediatric endorsement, they can go and evaluate someone for a pediatric endorsement. Ms. Olney responded that the evaluation process is not separated by pediatric endorsement holders versus non-endorsement holders.

President Felsenfeld inquired whether it is true that the Board's ability to issue the permit for pediatric patients under 13 or under seven on the oral surgery side is strictly by the applicant demonstrating that they have completed 20 cases for each of that group. Ms. Olney responded that is correct, in addition to the training.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

(M/S/C) (Felsenfeld/Chan) to appoint Dr. Hooman Adamous as an evaluator for the general anesthesia onsite inspection and evaluation program.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco.

Nays: None.

Abstentions: None.

Absent: Medina, Thakur, Yu.*

Recusals: None.

The motion passed.

(M/S/C) (Felsenfeld/Chan) to appoint Dr. Rachel Dason as an evaluator for the general anesthesia onsite inspection and evaluation program.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco.

Nays: None.

Abstentions: None.

Absent: Medina, Thakur, Yu.*

Recusals: None.

The motion passed.

(M/S/C) (Felsenfeld/Pacheco) to appoint Dr. Dustin Coyle as an evaluator for the medical general anesthesia, general anesthesia, and moderate sedation onsite inspection and evaluation program.

President Felsenfeld inquired whether all General Anesthesia (GA) permit holders can do Moderate Sedation (MS) as well. Ms. Olney responded that they can.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco.

Nays: None.

Abstentions: None.

Absent: Medina, Thakur, Yu.*

Recusals: None.

The motion passed.

(M/S/C) (Felsenfeld/Chan) to appoint Dr. Derek Carson as an evaluator for the moderate sedation onsite inspection and evaluation program.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco.

Nays: None.

Abstentions: None.

Absent: Medina, Thakur, Yu.*

Recusals: None.

The motion passed.

(M/S/C) (Felsenfeld/Pacheco) to appoint Dr. Ryan Dunlopas as an evaluator for the moderate sedation onsite inspection and evaluation program.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco.

Nays: None.

Abstentions: None.

Absent: Medina, Thakur, Yu.*

Recusals: None.

The motion passed.

(M/S/C) (Felsenfeld/Forge) to appoint Dr. Clarke Filippi as an evaluator for the moderate sedation onsite inspection and evaluation program.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco.

Nays: None.

Abstentions: None.

Absent: Medina, Thakur, Yu.*

Recusals: None.

The motion passed.

(M/S/C) (Felsenfeld/Larin) to appoint Dr. Richard Gagne as an evaluator for the moderate sedation onsite inspection and evaluation program.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco.

Nays: None.

Abstentions: None.

Absent: Medina, Thakur, Yu.*

Recusals: None.

The motion passed.

(M/S/C) (Felsenfeld/Pacheco) to appoint Dr. Christopher Henninger as an evaluator for the moderate sedation onsite inspection and evaluation program.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco.

Nays: None.

Abstentions: None.

Absent: Medina, Thakur, Yu.*

Recusals: None.

The motion passed.

(M/S/C) (Felsenfeld/Chan) to appoint Dr. Karilyn House as an evaluator for moderate sedation onsite inspection and evaluation program.

Board Member Chan voiced that the term pedodontics is obsolete and that it is pediatric.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco.

Nays: None.

Abstentions: None.

Absent: Medina, Thakur, Yu.*

Recusals: None.

DRAFT - Dental Board of California
November 9, 2023 Meeting Minutes

The motion passed.

(M/S/C) (Felsenfeld/Pacheco) to appoint Dr. Mai Ky as an evaluator for the moderate sedation onsite inspection and evaluation program.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco.

Nays: None.

Abstentions: None.

Absent: Medina, Thakur, Yu.*

Recusals: None.

The motion passed.

(M/S/C) (Felsenfeld/Olague) to appoint Dr. Dax Martin as an evaluator for the moderate sedation onsite inspection and evaluation program.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco.

Nays: None.

Abstentions: None.

Absent: Medina, Thakur, Yu.*

Recusals: None.

The motion passed.

(M/S/C) (Felsenfeld/McKenzie) to appoint Dr. Douglas Martin as an evaluator for the moderate sedation onsite inspection and evaluation program.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco.

Nays: None.

Abstentions: None.

Absent: Medina, Thakur, Yu.*

Recusals: None.

The motion passed.

(M/S/C) (Felsenfeld/McKenzie) to appoint Dr. Cyrus Mozayan as an evaluator for moderate sedation onsite inspection and evaluation program.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco.

Nays: None.

Abstentions: None.

Absent: Medina, Thakur, Yu.*

Recusals: None.

The motion passed.

(M/S/C) (Felsenfeld/McKenzie) to appoint Dr. Alex Pezeshkian as an evaluator for moderate sedation onsite inspection and evaluation program.

Board Member Chan noted that Dr. Pezeshkian is a pediatric dentist not a general dentist according to the application.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco.

Nays: None.

Abstentions: None.

Absent: Medina, Thakur, Yu.*

Recusals: None.

The motion passed.

DRAFT - Dental Board of California
November 9, 2023 Meeting Minutes

(M/S/C) (Felsenfeld/Larin) to appoint Dr. James Rore as an evaluator for the moderate sedation onsite inspection and evaluation program.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco.

Nays: None.

Abstentions: None.

Absent: Medina, Thakur, Yu.*

Recusals: None.

The motion passed.

(M/S/C) (Felsenfeld/McKenzie) to appoint Dr. Gina Salatino as an evaluator for the moderate sedation onsite inspection and evaluation program.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco.

Nays: None.

Abstentions: None.

Absent: Medina, Thakur, Yu.*

Recusals: None.

The motion passed.

(M/S/C) (Felsenfeld/Olague) to appoint Dr. Mark Stevenson as an evaluator for the moderate sedation onsite inspection and evaluation program.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco.

Nays: None.
Abstentions: None.
Absent: Medina, Thakur, Yu.*
Recusals: None.

The motion passed.

(M/S/C) (Felsenfeld/McKenzie) to appoint Dr. Damon J. Westwood as an evaluator for the moderate sedation onsite inspection and evaluation program.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco.
Nays: None.
Abstentions: None.
Absent: Medina, Thakur, Yu.*
Recusals: None.

The motion passed.

(M/S/C) (Felsenfeld/McKenzie) to appoint Dr. Craig Y. Yonemura as an evaluator for the moderate sedation onsite inspection and evaluation program.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco.
Nays: None.
Abstentions: None.
Absent: Medina, Thakur, Yu.*
Recusals: None.

The motion passed.

Agenda Item 14: Recess Open Session Until November 9, 2023, at 9:00 a.m.
President Felsenfeld recessed Open Session at 2:22 p.m.

Agenda Item 15: Convene Closed Session

At 2:37 p.m., the Board convened Closed Session.

Agenda Item 16: Pursuant to Government Code Section 11126(a)(1), the Board will Meet in Closed Session to Discuss the Executive Officer Performance Appraisal

The Board convened in Closed Session to discuss the Executive Officer performance appraisal.

Agenda Item 17: Pursuant to Government Code Section 11126(c)(3), the Board will Meet in Closed Session to Deliberate and Vote on Disciplinary Matters, Including Stipulations and Proposed Decisions

The Board convened in Closed Session to discuss disciplinary matters.

Agenda Item 18: Pursuant to Government Code Section 11126(e)(1) and (2)(A), the Board will Confer with and Receive Advice from Legal Counsel and Deliberate Regarding SmileDirectClub, LLC v. Montez, et al., United States District Court, Eastern District of California, Case No. 2:23-cv-01769-WBS-KJN

This matter was not discussed.

Agenda Item 19: Adjourn Closed Session

President Felsenfeld adjourned Closed Session at 3:54 p.m.

9:00 a.m., Thursday, November 9, 2023

Agenda Item 20: Reconvene Open Session – Call to Order/Roll Call/Establishment of a Quorum

President Felsenfeld called the meeting to order at 9:03 a.m. Secretary Larin called the roll; ten Board Members were present, and a quorum was established. Board Member Angelita Medina, MHS, was absent.

Agenda Item 21: Board President's Report on Closed Session Items

President Felsenfeld provided a verbal report to the Board regarding Closed Session items. He reported that the Board discussed the Executive Officer's annual performance review and also voted on three pending enforcement cases. There was no discussion of any pending lawsuits.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 22: Dental Assisting Council Meeting Report

Cara Miyasaki, Vice Chair of the DAC, provided a verbal report on the November 8, 2023 DAC meeting. Ms. Miyasaki advised the Board regarding DAC discussion of DAC meeting agenda items.

President Felsenfeld requested public comment on this item. The Board received public comment.

Shari Becker, representing the Alliance, stated that they are enthusiastic about the DAC working group and are very excited to support and help in any way that they can.

Agenda Item 23: Update Regarding the Board's 2024 Sunset Review Report

Dr. Montez provided the report, which is available in the meeting materials.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 24: Update, Discussion, and Possible Action on Proposed Regulations

Item 24.a.: Status Update on Pending Regulations

David Bruggeman provided the report, which is available in the meeting materials. He stated that the Board has a package that represents an update to the Board's disciplinary guidelines that would amend California Code of Regulations (CCR), title 16, section 1018. The package has been published and noticed with the Office of Administrative Law (OAL) and is currently in the midst of a public comment period that ends on November 14, 2023. If there are any adverse comments received during that comment period, the Board will have an opportunity to address them at a future meeting and then proceed with a package at that point. Mr. Bruggeman voiced that the other active package concerns revisions to the lost, destroyed, and mutilated licenses section of CCR, title 16, section 1012 and section 1017.2 related to inactive and active license status. Because there is a fee increase associated with the lost or mutilated license replacement license changes, the package amends section 1021, as well. The package was approved by the Business, Consumer Services and Housing Agency on November 6, 2023, and Board staff is currently anticipating it being noticed by OAL on November 17, 2023, which would be the start of the 45-day public comment period and should end on January 3, 2024.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 24.b.: Discussion and Possible Action to Consider: (1.) Comments

Received During the 45-Day Comment Period and Proposed Responses Thereto for the Board's Rulemaking to Adopt California Code of Regulations (CCR), Title 16, Section 1006 (AB 107: Temporary Licenses for Military Spouses or Partners)

Mr. Bruggeman provided the report, which is available in the meeting materials.

Kristy Schieldge noted that the issue that was raised by the commenter is mainly that he does not think it is necessary for the Board to do regulations. She stated that Board staff does believe that it is necessary to clarify what the procedures are as required by Business and Professions Code (BPC) section 115.6, which was enacted by Assembly Bill (AB) 107. BPC section 115.6 provides an exemption to implementation of the statute

if the agency has an expedited license process “with no additional requirements.” However, if there are additional requirements, then you have to use the expedited licensure process set out in BPC section 115.6 and that version has fewer requirements for applicants to meet in order to obtain a temporary license than this Board’s licensure by credential law. She conveyed that the Board is therefore obligated according to the statute to proceed with implementing this process, and the other comments about insurance coverage are unrelated to this proposal. Therefore, the recommendation is that the comment be rejected.

(M/S/C) (Chan/McKenzie) to direct staff to proceed as recommended to reject the comments as specified and provide the responses to the comments as indicated in the staff recommended response in Attachment 1 of the memo.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco, Thakur, Yu.

Nays: None.

Abstentions: None.

Absent: Medina.

Recusals: None.

The motion passed.

(2.) Adoption of CCR, Title 16, Section 1006 (AB 107: Temporary Licenses for Military Spouses or Partners)

Ms. Schiedge expressed that she believes that OAL has concerns that any qualifying questions could result in someone disclosing that they have been arrested, convicted, or disciplined for a criminal act in another jurisdiction no matter how the question is phrased. Therefore, their suggestion was to simply obtain a license history for their licenses and other jurisdictions, and if they have been disciplined, Board staff would investigate to see what the underlying issues are to see if there are grounds for denying the application.

President Felsenfeld affirmed that what Board staff is attempting to do is ensure that the Board’s language is consistent with other agencies within DCA, and they are trying to be consistent with state law and regulations.

(M/S/C) (Chan/McKenzie) to approve the proposed modified text in Attachment 4 and direct staff to take all steps necessary to complete the rulemaking process, including sending out the modified text with these changes for an additional 15-day comment period. If after the 15-day public comment period, no adverse comments are received,

authorize the Executive Officer to make any non-substantive changes to the proposed regulation, and adopt the proposed regulations as described in the modified text notice for CCR, title 16, section 1006.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco, Thakur, Yu.

Nays: None.

Abstentions: None.

Absent: Medina.

Recusals: None.

The motion passed.

Agenda Item 24.c.: Discussion and Possible Action to Initiate a Rulemaking to Amend CCR, Title 16, Sections 1021 and 1028 Related to the Application for Licensure and Fee Requirements

Mr. Bruggeman provided the report, which is available in the meeting materials.

Ms. Schieldge stated that one of the main things that the proposal would do would be to remove the current form dental licensure and move to a narrative application format in the regulations, which would allow Board staff to accept the application in a variety of formats. She expressed that when a form is incorporated by reference, the exact form must be used in every case. Otherwise, it is not permitted under the Administrative Procedure Act. A lot of the DCA boards and bureaus are moving to this model because they want to be able to facilitate the ability of the applicants to use a variety of methods of submission. The content would be the same in whatever format it is received by the Board, and that content needs to be adopted in regulation. She noted that the big change to the current standards for this proposal would be to correct existing text in this section to remove questions involving criminal history collection, for instance, on page 10 of the meeting materials, it would state "Excluding actions based upon the applicant's criminal conviction history...". As mentioned for the other rulemaking for AB 107, AB 2138, at (f)(2) of Business and Professions Code (BPC) section 480, prohibits the Board from asking any applicant for criminal history information. She added that the Board has to be careful about the way questions are asked now, and this is her attempt to meet that issue and still allow the Board to collect information about other types of discipline. Ms. Schieldge expressed that Board staff want to make sure the Board is still able to ask qualifying questions to determine whether someone is fit to practice in California.

(M/S/C) (Pacheco/Felsenfeld) to approve the proposed regulatory text in Attachment 1 and submit the text to the Director of the Department of Consumer Affairs and the

Business, Consumer Services and Housing Agency for review. If no adverse comments are received, authorize the Executive Officer to take all steps necessary to initiate the rulemaking process, make any non-substantive changes to the text and the package, and set the matter for a hearing if requested. If after the 45-day public comment period, no adverse comments are received, and no public hearing is requested, authorize the Executive Officer to take all steps necessary to complete the rulemaking, and adopt the proposed regulations as noticed for CCR, title 16, sections 1021 and 1028.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco, Thakur, Yu.

Nays: None.

Abstentions: None.

Absent: Medina.

Recusals: None.

The motion passed.

Agenda Item 24.d.: Discussion and Possible Action to Initiate a Rulemaking to Amend CCR, Title 16, Section 1018.01 and Adopt Section 1018.02, Related to Uniform Standards for Substance Abusing Licensees and Cease Practice Orders

Mr. Bruggeman provided the report, which is available in the meeting materials.

Board Member Chan expressed that as the state is transitioning with trends towards marijuana and now with the psychogenic mushrooms, the Board may have to ask Board staff, through the Executive Officer, to provide a tutorial of what the Board is looking at in terms of some of these regulations as it relates to these drugs.

(M/S/C) (Chan/Pacheco) to approve the proposed regulatory text and incorporated Uniform Standards document in Attachments 1 and 2 and submit the text to the Director of the Department of Consumer Affairs and the Business, Consumer Services, and Housing Agency for review and if no adverse comments are received, authorize the Executive Officer to take all steps necessary to initiate the rulemaking process, make any non-substantive changes to the text and the package, and set the matter for a hearing if requested. If after the 45-day public comment period, no adverse comments are received, and no public hearing is requested, authorize the Executive Officer to take all steps necessary to complete the rulemaking, and adopt the proposed regulations as noticed for 16 CCR sections 1018.01 and 1018.02.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco, Thakur, Yu.

Nays: None.

Abstentions: None.

Absent: Medina.

Recusals: None.

The motion passed.

Agenda Item 24.e.: Consideration of Proposed Regulatory Language, and Discussion and Possible Action on Recommendation to Initiate a Rulemaking to Amend CCR, Title 16, Sections 1080, 1080.3, 1081, and 1081.2, Adopt Sections 1081.3 and 1081.4, and Repeal Sections 1080.1, 1080.2, 1081.1, 1082, 1082.1, 1082.3, and 1083 Related to Dental Assisting Examinations

Mr. Bruggeman provided the report, which is available in the meeting materials.

Ms. Schiedge expressed that this proposal would largely clean up the entire article relating to dental assisting examination and procedures and would add specificity to exam content, which does not currently exist for all of the dental assisting examinations, and update procedures consistent with current test exam administrator, Psychological Services Incorporated (PSI) procedures for administering exams and exam security. She noted that the Board will see that a lot of the exam security issues have been added to the regulations to make clear what requirements the Board will have to make sure that an individual is who they say they are, and a candidate's identity is established before administration of the exam so that exam security is maintained. Each time there is a new exam outline, the Board will need to update the regulation to make it consistent with what will be provided to exam candidates.

(M/S/C) (Pacheco/Larin) to direct staff to submit the text in Attachment A to the Director of the Department of Consumer Affairs and the Business, Consumer Services, and Housing Agency for review and if no adverse comments are received, authorize the Executive Officer to take all steps necessary to initiate the rulemaking process, make any non-substantive changes to the package, and set the matter for a hearing if requested. If no adverse comments are received during the 45-day comment period and no hearing is requested, authorize the Executive Officer to take all steps necessary to complete the rulemaking and adopt the proposed regulations as noticed for title 16, California Code of Regulations sections 1080, 1080.3, 1081, 1081.2, 1081.3, and 1081.4, and repeal Sections 1080.1, 1080.2, 1081.1, 1082, 1082.1, 1082.3, and 1083.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco, Thakur, Yu.
Nays: None.

Abstentions: None.

Absent: Medina.

Recusals: None.

The motion passed.

Agenda Item 25.a.: Discussion and Possible Action to Revise Previously Approved Legislative Proposal to Amend Business and Professions Code Sections 1750.2, 1750.4, and 1752.1 Regarding Course Requirements for Orthodontic Assistant Permit, Dental Sedation Assistant Permit, and Registered Dental Assistant License

Mr. Bruggeman provided the report, which is available in the meeting materials.

Dr. Montez stated that this issue was brought to the Board's attention during the October 2023 Board meeting where the Board reviewed the sunset review report. She conveyed that it is important that the Board has the participation of its stakeholders and the public to help the Board with these proposals and identify any areas that may need changes.

(M/S/C) (Pacheco/Olague) to move to withdraw the previously approved legislative proposal that was recommended for inclusion in the Board's Sunset Review Report to amend Business and Professions Code sections 1750.2, 1750.4, and 1752.1.

President Felsenfeld requested public comment before the Board acted on the motion. The Board received public comment.

Ms. Becker, representing herself, noted that on page 259 of the meeting materials, BPC section 1750.2, subdivision (a)(2), states "Successful completion within five years prior to application of a two-hour board-approved course in the Dental Practice Act and an eight-hour board-approved course in infection control". She voiced that she believes the Board had changed that to be something different. Additionally, she asked for clarification regarding the "within five years prior to application" in BPC section 1750.4 (a)(2).

At 10:09 a.m., the Board recessed for a break.

At 10:15 a.m., the Board reconvened.

President Felsenfeld responded that the text that Ms. Becker is concerned about is the way it is and that the only thing that has been modified is that which is in blue italic text for the changes that the Board is proposing to act on for this meeting.

DRAFT - Dental Board of California
November 9, 2023 Meeting Minutes

Page 27 of 33

Tara Welch stated that at the February 2022 Board meeting, in meeting materials agenda item 30 shows the text that adds the “within five years prior to application” to BPC section 1750.2, subdivision (a)(2). Whether or not that was changed by the Board, the Board adopted that language at the February 2022 Board meeting, which is reflected in the meeting minutes for that meeting. She stated that Board staff is merely trying to clarify that Basic Life Support (BLS) courses have to be current in certification and not taken within five years. Additionally, Board staff is using the same text approved by the Board in February 2022 and are making a modification for the BLS course certification.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco, Thakur, Yu.

Nays: None.

Abstentions: None.

Absent: Medina.

Recusals: None.

The motion passed.

(M/S/C) (Pacheco/Chan) to move to include in the Board’s Sunset Review Report a revised recommendation to amend Business and Professions Code sections 1750.2, 1750.4, and 1752.1 to clarify the RDA, OA, and DSA course completion requirements for license and permit applicants.

President Felsenfeld requested public comment before the Board acted on the motion. The Board received public comment.

Dr. Lori Gagliardi, representing the Foundation for Allied Dental Education (FADE), asked for clarification on page 259 of the meeting materials of whether an RDA can take the Orthodontic Assistant (OA) exam but would have to take the eight-hour board infection control course, because it says they need the two-hour Dental Practice Act (DPA) course.

For the sake of moving the motion forward, Ms. Welch responded that is existing law, and the Board is not making any changes to the two-hour DPA requirement and eight-hour board-approved course in infection control. She stated that what the Board approved in February of 2022 was requiring successful completion of those courses within five years of the application.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco, Thakur, Yu.
Nays: None.
Abstentions: None.
Absent: Medina.
Recusals: None.

The motion passed.

Agenda Item 26: Update, Discussion, and Possible Action on 2023/2024 Legislation Impacting the Board, the Department of Consumer Affairs, and/or the Dental Profession
Agenda Item 26.a.: 2024 Tentative Legislative Calendar – Information Only

Mr. Bruggeman provided an overview of the 2024 Tentative Legislative Calendar, which is available in the meeting materials. Mr. Bruggeman stated that the tentative legislative calendars for 2024 for both the State Senate and State Assembly is a bit more compressed compared to odd-numbered years as 2024 is an election year. In 2024, the target date for adjournment is at the end of August. Therefore, the Board's legislative activity will be slightly accelerated, and Board staff anticipate that the opportunity for the Board to address and take positions on any legislation is likely to be at the May 2024 Board meeting, with the possibility of it being at the February 2024 Board meeting depending on when legislation is introduced.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 26.b.: 2023 End of Session Legislative Summary Report

Mr. Bruggeman provided the report, which is available in the meeting materials, and went over the five bills, AB 481, AB 936, AB 1552, SB 372, and SB 544, that the Board took a position on in 2023.

(M/S/C) (Pacheco/Felsenfeld) to adopt the Legislative Summary for 2023 Legislative Session and direct staff to post the report on the Board's website.

President Felsenfeld requested public comment before the Board acted on the motion. There were no public comments made on the motion.

President Felsenfeld called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco, Thakur, Yu.
Nays: None.
Abstentions: None.
Absent: Medina.
Recusals: None.

The motion passed.

DRAFT - Dental Board of California
November 9, 2023 Meeting Minutes

Agenda Item 27: Election of 2024 Board Officers

Dr. Montez facilitated the election. She opened the floor for nominations for the position of Board Secretary. Dr. Montez received one nomination to appoint Secretary Larin to the position of 2024 Board Secretary. Secretary Larin accepted the nomination. There were no other nominations for the position of 2024 Board Secretary.

(M/S/C) (Chan/Felsenfeld) to elect Secretary Larin as 2024 Board Secretary.

Dr. Montez requested public comment before the Board acted on the motion. There were no public comments made on the motion.

Dr. Montez called for the vote on motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco, Thakur, Yu.

Nays: None.

Abstentions: None.

Absent: Medina.

Recusals: None.

The motion passed. Secretary Larin was elected as 2024 Board Secretary.

Dr. Montez opened the floor for nominations for the position of 2024 Board Vice President. Dr. Montez received one nomination to appoint Vice President Pacheco to the position of 2024 Board Vice President. Vice President Pacheco accepted the nomination. There were no other nominations for the position of 2024 Board Vice President.

(M/S/C) (Felsenfeld/Larin) to elect Vice President Pacheco as 2024 Board Vice President.

Dr. Montez requested public comment before the Board acted on the motion. There were no public comments made on the motion.

Dr. Montez called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Felsenfeld, Forge, Larin, McKenzie, Molina, Olague, Pacheco, Thakur, Yu.

Nays: None.

Abstentions: Medina.

Absent: None.

Recusals: None.

The motion passed. Vice President Pacheco was elected as 2024 Board Vice President.

Dr. Montez opened the floor for nominations for the position of 2024 Board President. Dr. Montez received two nominations for 2024 Board President: Board Member Chan, who accepted the nomination; and President Felsenfeld, who accepted the nomination. There were no other nominations for the position of 2024 Board President.

(M/S/C) (Pacheco/McKenzie) to elect President Felsenfeld as 2024 Board President.

Dr. Montez requested public comment before the Board acted on the motion. There were no public comments made on the motion.

Dr. Montez called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Felsenfeld, McKenzie, Molina, Pacheco, Thakur.

Nays: None.

Abstentions: Chan, Forge, Larin, Olague, Yu.

Absent: Medina.

Recusals: None.

The motion failed.

(M/S/C) (Larin/Olague) to elect Board Member Chan as 2024 Board President.

Dr. Montez requested public comment before the Board acted on the motion. There were no public comments made on the motion.

Dr. Montez called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Chan, Forge, Larin, Olague, Yu.

Nays: None.

Abstentions: Felsenfeld, McKenzie, Molina, Pacheco, Thakur.

Absent: Medina.

Recusals: None.

The motion failed.

(M/S/C) (McKenzie/Pacheco) to elect President Felsenfeld as 2024 Board President.

Dr. Montez requested public comment before the Board acted on the motion. There were no public comments made on the motion.

Dr. Montez called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Felsenfeld, McKenzie, Molina, Pacheco, Thakur.

Nays: None.

Abstentions: Chan, Forge, Larin, Olague, Yu.

Absent: Medina.

Recusals: None.

The motion failed.

At 10:45 a.m., the Board recessed for a break.

At 10:55 a.m., the Board reconvened.

Ms. Welch clarified the requirements for passing a motion. She stated that a motion requires a majority of the members present and voting. She gave an example using the prior motions – if there were five members voting in favor of the motion and five members abstaining, the five abstaining would not count. With five members voting in favor of the motion, the motion would pass. She suggested that with this understanding, the Board Members should make another motion and take a vote on that motion.

(M/S/C) (McKenzie/Pacheco) to elect President Felsenfeld as 2024 Board President.

Board Member Forge requested clarification on the motion requirements. Ms. Welch explained that at that meeting, the Board had 10 members present. If all 10 members were present and voting, a majority of six members voting in favor of a motion would be required to pass the motion. Using the prior example, with only five members participating in the vote, and five members abstaining, only the five members participating in the vote would be counted. With all five members voting in favor of the motion, the motion would pass.

Dr. Montez requested public comment before the Board acted on the motion. There were no public comments made on the motion.

Dr. Montez called for the vote on the motion. Secretary Larin took a roll call vote on the motion.

Ayes: Felsenfeld, McKenzie, Molina, Olague, Pacheco, Thakur.

Nays: Chan, Larin.

Abstentions: Forge, Yu.

Absent: Medina.

Recusals: None.

The motion passed. President Felsenfeld was elected as 2024 Board President.

DRAFT - Dental Board of California
November 9, 2023 Meeting Minutes

Agenda Item 28: Public Comment on Future Agenda Items

Mr. Bruggeman introduced the report, which is available in the meeting materials.

Dr. Montez commented that this item use to merely reference future legislative proposals and voiced that Board stakeholders asked to widen this item. Therefore, Board staff have now included future agenda items in the agenda.

President Felsenfeld requested public comment on this item. There were no public comments made on this item.

Agenda Item 29: Adjournment

President Felsenfeld adjourned the meeting at 11:05 a.m.

*Due to audio connectivity issues, Board Member James Yu was not able to verbally vote on various motions.



**DENTAL BOARD OF CALIFORNIA
MEETING MINUTES
December 15, 2023**

The Dental Board of California (Board) met by teleconference/WebEx Events on December 15, 2023, and, in accordance with Government Code section 11133, no physical public locations were provided.

Members Present:

Alan Felsenfeld, MA, DDS, President
Joanne Pacheco, RDH, MAOB, Vice President
Lilia Larin, DDS, Secretary
Steven Chan, DDS
Joni Forge, DDS
Meredith McKenzie, Esq., Public Member
Angelita Medina, MHS, Public Member
Sonia Molina, DMD, MPH
Rosalinda Olague, RDA, BA
Yogita Thakur, DDS, MS
James Yu, DDS, MS

Staff Present:

Tracy A. Montez, Ph.D., Executive Officer
Wilbert Rumbaoa, Administrative Services Unit Manager
Mirela Taran, Administrative Analyst
Alex Cristescu, Television Specialist, Office of Public Affairs, Department of Consumer Affairs (DCA)
Ann Fisher, Moderator, Strategic Organizational Leadership and Individual Development (SOLID), DCA
Tara Welch, Board Counsel, Attorney IV, Legal Affairs Division, DCA

9:00 a.m., Friday, December 15, 2023

Agenda Item 1: Call to Order/Roll Call/Establishment of a Quorum

The Board President, Dr. Alan Felsenfeld, called the meeting to order at 9:04 a.m. The Board Secretary, Dr. Lilia Larin, called the roll; 11 Board Members were present, and a quorum was established.

Agenda Item 2: Public Comment on Items Not on the Agenda

There were no public comments made on items not on the agenda.

Agenda Item 3: Recess Open Session

President Felsenfeld recessed Open Session at 9:08 a.m.

Agenda Item 4: Convene Closed Session

At 9:11 a.m., the Board convened Closed Session.

Agenda Item 5: Pursuant to Government Code Section 11126(c)(3), the Board will Meet in Closed Session to Deliberate and Vote on Disciplinary Matters, Including Stipulations and Proposed Decisions

The Board convened in Closed Session to discuss disciplinary matters.

Agenda Item 6: Adjourn Closed Session

President Felsenfeld adjourned Closed Session at 11:06 a.m.

Agenda Item 7: Reconvene Open Session

At 11:06 a.m., the Board reconvened Open Session.

Agenda Item 8: Adjournment

President Felsenfeld adjourned the meeting at 11:06 a.m.



MEMORANDUM

DATE	January 16, 2024
TO	Members of the Dental Board of California
FROM	Mirela Taran, Administrative Analyst Dental Board of California
SUBJECT	Agenda Item 4.: Board President Report

Background

Dr. Alan Felsenfeld, President of the Dental Board of California, will provide a verbal report regarding 2024 Board Member Committee Assignments.

Pursuant to Business and Professions Code (BPC) section 1601.1 and the Dental Board of California (Board) Administrative Policy and Procedure Manual, the Board shall be organized into standing committees pertaining to examinations, enforcement, and other subjects the Board deems appropriate.

Committees meet when they have issues to be considered and make recommendations to the full Board.

The Board President and/or Committee Chair, in consultation with the Executive Officer, may appoint a two-person subcommittee at any time as deemed necessary.

The statutory and standing committees are as follows:

- Diversion Evaluation Committees (Northern and Southern) (BPC section 1695.2)
- Elective Facial Cosmetic Surgery Permit Credentialing Committee (BPC section 1638.1)
- Enforcement Committee (BPC section 1601.1)
- Examination Committee (BPC section 1601.1)

Former specific needs committees are as follows:

- Access to Care Committee
- Anesthesia Committee
- Executive Committee
- Legislative and Regulatory Committee
- Licensing, Certification, and Permits Committee
- Substance Use Awareness Committee

Agenda Item 4.: Board President Report
Dental Board of California Meeting
February 9, 2024

Update

After consideration by the Board President, Dr. Alan Felsenfeld, it was determined that Board Members will serve on the same committees as they did the previous year.

The following committees are in place for 2024:

- Access to Care Committee – Dr. Larin (chair) and Dr. Thakur
- Anesthesia Committee – Dr. Felsenfeld (chair) and Dr. Chan
- Enforcement Committee – Ms. Pacheco (liaison to the Enlighten Enforcement Project)
- Licensing Examination, Certification and Permits Committee – Dr. Yu (chair) and Dr. Forge
- Legislative and Regulatory Committee – Ms. McKenzie (chair) and Dr. Molina
- Substance Use Awareness Committee – Ms. Olague (chair) and Ms. Medina
- Sunset Review Report Committee – Ms. Pacheco (chair) and Dr. Chan

Action Requested

No action is requested.



DENTAL BOARD OF CALIFORNIA

2005 Evergreen St., Suite 1550, Sacramento, CA 95815

P (916) 263-2300 | F (916) 263-2140 | www.dbc.ca.gov



MEMORANDUM

DATE	January 16, 2024
TO	Members of the Dental Board of California
FROM	Mirela Taran, Administrative Analyst Dental Board of California
SUBJECT	Agenda Item 5.: Executive Officer Report

Background

Dr. Tracy Montez, Executive Officer of the Dental Board of California, will provide a verbal report.

Action Requested

No action requested.

MEMORANDUM

DATE	January 16, 2024
TO	Members of the Dental Board of California
FROM	Mirela Taran, Administrative Analyst Dental Board of California
SUBJECT	Agenda Item 6.: Report on Department of Consumer Affairs Activities, which may include updates on the Department's Administrative Services, Human Resources, Enforcement, Information Technology, Communications and Outreach, as well as Legislative, Regulatory, and Policy Matters

Background

Ms. Yvonne Dorantes, Assistant Deputy Director of Board and Bureau Relations of the Department of Consumer Affairs, will provide a verbal report.

Action Requested

No action requested.

Agenda Item 6.: Report on Department of Consumer Affairs Activities, which may include updates on the Department's Administrative Services, Human Resources, Enforcement, Information Technology, Communications and Outreach, as well as Legislative, Regulatory, and Policy Matters
Dental Board of California Meeting
February 9, 2024



DENTAL BOARD OF CALIFORNIA

2005 Evergreen St., Suite 1550, Sacramento, CA 95815

P (916) 263-2300 | F (916) 263-2140 | www.dbc.ca.gov



MEMORANDUM

DATE	January 17, 2024
TO	Members of the Dental Board of California
FROM	Wilbert Rumbaoa, Administrative Services Unit Manager Dental Board of California
SUBJECT	Agenda Item 7.: Budget Report

Background

In order to provide the most up-to-date budget information, meeting materials will be provided at the Board meeting.

MEMORANDUM

DATE	January 16, 2024
TO	Members of the Dental Board of California
FROM	Mirela Taran, Administrative Analyst Dental Board of California
SUBJECT	Agenda Item 8.a.: Update on “Attorney General’s Annual Report on Accusations Prosecuted for Department of Consumer Affairs Client Agencies, Business and Professions Code Section 312.2, January 1, 2024”

Background

Carl Sonne, Senior Assistant Attorney General, will provide an update and presentation on the Attorney General's Annual Report on Accusations Prosecuted for Department of Consumer Affairs Client Agencies Business and Professions Code Section 312.2 January 1, 2024. The Attorney General's Annual Report is attached. Please refer to page 22 of the attachment for the report on the Dental Board of California.

Action Requested

No action requested.



C A L I F O R N I A

DEPARTMENT OF JUSTICE

ATTORNEY GENERAL'S ANNUAL REPORT
ON
ACCUSATIONS PROSECUTED FOR DEPARTMENT
OF CONSUMER AFFAIRS CLIENT AGENCIES

BUSINESS AND PROFESSIONS CODE SECTION 312.2

JANUARY 1, 2024

Table of Contents

EXECUTIVE SUMMARY	1
BACKGROUND.....	1
Licensing Section and Health Quality Enforcement Section	1
Department of Consumer Affairs Client Agencies.....	2
Investigation Process	3
Administrative Adjudication Process.....	3
MEASURES REPORTED	4
METHODOLOGY	9
Case Management System	9
Data Presentation	9
CALIFORNIA BOARD OF ACCOUNTANCY	11
CALIFORNIA ACUPUNCTURE BOARD	12
CALIFORNIA ARCHITECTS BOARD	13
CALIFORNIA STATE ATHLETIC COMMISSION	14
BUREAU OF AUTOMOTIVE REPAIR	15
BOARD OF BARBERING AND COSMETOLOGY.....	16
BOARD OF BEHAVIORAL SCIENCES.....	17
CEMETERY AND FUNERAL BUREAU	18
BOARD OF CHIROPRACTIC EXAMINERS.....	19
CONTRACTORS STATE LICENSE BOARD	20
COURT REPORTERS BOARD OF CALIFORNIA	21
DENTAL BOARD OF CALIFORNIA.....	22
DENTAL HYGIENE BOARD OF CALIFORNIA	23
BUREAU OF HOUSEHOLD GOODS AND SERVICES	24
LANDSCAPE ARCHITECTS TECHNICAL COMMITTEE.....	25
LICENSED MIDWIVES PROGRAM (MEDICAL BOARD OF CALIFORNIA)	26
MEDICAL BOARD OF CALIFORNIA.....	27
CALIFORNIA BOARD OF NATUROPATHIC MEDICINE	28
CALIFORNIA BOARD OF OCCUPATIONAL THERAPY	29

CALIFORNIA STATE BOARD OF OPTOMETRY	30
OSTEOPATHIC MEDICAL BOARD OF CALIFORNIA.....	31
CALIFORNIA STATE BOARD OF PHARMACY.....	32
PHYSICAL THERAPY BOARD OF CALIFORNIA	33
PHYSICIAN ASSISTANT BOARD OF CALIFORNIA.....	34
PODIATRIC MEDICAL BOARD OF CALIFORNIA.....	35
BUREAU FOR PRIVATE POSTSECONDARY EDUCATION	36
BOARD FOR PROFESSIONAL ENGINEERS, LAND SURVEYORS, AND GEOLOGISTS	37
PROFESSIONAL FIDUCIARIES BUREAU.....	38
CALIFORNIA BOARD OF PSYCHOLOGY.....	39
BUREAU OF REAL ESTATE APPRAISERS.....	40
BOARD OF REGISTERED NURSING	41
RESPIRATORY CARE BOARD OF CALIFORNIA.....	42
BUREAU OF SECURITY AND INVESTIGATIVE SERVICES.....	43
SPEECH-LANGUAGE PATHOLOGY & AUDIOLOGY & HEARING AID DISPENSERS BOARD	44
STRUCTURAL PEST CONTROL BOARD	45
VETERINARY MEDICAL BOARD.....	46
BOARD OF VOCATIONAL NURSING AND PSYCHIATRIC TECHNICIANS	47
CONCLUSION.....	48
APPENDIX.....	49

EXECUTIVE SUMMARY

The Office of the Attorney General enforces laws that safeguard California consumers for our Department of Consumer Affairs licensing clients. This public protection mission includes the fair and impartial enforcement of laws to ensure justice, safety, and liberty for all. Pursuant to Business and Professions Code section 312.2, the Office of the Attorney General reports annually by January 1 on the public protection work of the Licensing Section and Health Quality Enforcement Section's representation for agencies within the Department of Consumer Affairs. This is the seventh annual report by the Office of the Attorney General covering Fiscal Year 2022-23. It provides information concerning disciplinary accusation referrals received and adjudicated for each Department of Consumer Affairs client agency represented by the Licensing Section and the Health Quality Enforcement Section of the Office of the Attorney General.

In Fiscal Year 2022-23, 57% of the legal work performed by the Licensing Section and Health Quality Enforcement Section was for the prosecution of accusations, which are the focus of this report. During the fiscal year, 2,551 accusation referrals were received from client agencies. All matters were adjudicated. However, 5% of accusation referrals to the Office of the Attorney General were rejected, and 11% required further investigation.

The Office of the Attorney General adjudicated 2,352 accusation referrals during Fiscal Year 2022-23. The accusations adjudicated were referred to this office in Fiscal Year 2022-23 or in a prior fiscal year. Multiple adjudications can occur when more than one licensee is included within one matter, each with different adjudication dates and types. Alternatively, multiple adjudications may occur when a client agency exercises its discretion to reject an original adjudication. Of the total adjudications, 58% were by stipulated settlement, 26% by default, 13% by administrative hearing, and 3% resulted from the withdrawal of accusations by the agencies.¹

BACKGROUND

Licensing Section and Health Quality Enforcement Section

The Licensing Section and the Health Quality Enforcement Section of the Office of the Attorney General's Civil Law Division specialize in California professional and vocational licensing law. The two sections represent 36 Department of Consumer Affairs licensing oversight agencies that issue multiple types of professional and vocational licenses. The Licensing Section and the Health Quality Enforcement Section provide legal representation to these agencies in many kinds of licensing matters to protect California consumers and enhance the quality of the professions and vocations. Liaison deputies also regularly consult with agency staff to advise them on jurisdictional, legal, and programmatic issues. Each section's legal staff also provide training for the Department of Consumer Affairs Division of Investigation, agency investigators, and agency staff.

Both sections prosecute licensing matters, including accusations (license disciplinary charges), which comprise 57% of their combined caseload. The balance of matters consists of:

- Statements of issues — appeal hearings when a license application has been denied.

¹ This report's information is provided against the backdrop of the COVID-19 pandemic in Fiscal Years 19-20, 20-21, and 21-22.

- Interim suspension petitions — hearings before the Office of Administrative Hearings for immediate suspension of a license.
- Injunction proceedings — brought in superior court to stop unlicensed practice.
- Post-discipline matters — when a licensee petitions for reduction of penalty or reinstatement of a revoked license.
- Citations — appeal hearings when a citation and/or fine has been issued.
- Penal Code section 23 petitions — seeking a license restriction during the pendency of a criminal proceeding.
- Subpoena enforcement actions — to obtain records needed for the investigation of complaints.
- Judicial review proceedings — superior court review of final administrative decisions.
- Appeals — usually from superior court review proceedings.
- Civil litigation related to license discipline — defending agencies in civil lawsuits brought in state or federal courts.
- Third-party subpoenas — to obtain records in litigation from non-party client agencies.

Business and Professions Code section 312.2 requests data only for the prosecution of accusation matters by the two sections. Accusations are the primary component of the enforcement program for each licensing agency. The legal services in other types of licensing matters handled by the sections are not included in this report, except where accusations are combined with petitions to revoke probation or statements of issues.

Department of Consumer Affairs Client Agencies

The 36 Department of Consumer Affairs agencies represented by the Licensing Section and the Health Quality Enforcement Section each have different licensing laws, programs, and processes unique to their practice areas. A few agencies issue only one type of license, but most issue multiple license types. As a result, agencies differ in how they refer accusation matters to the Office of the Attorney General. Some agencies refer one matter for each licensee. Others refer multiple licensees involved in the same or related acts for which discipline will be sought in a single accusation. Nearly half of client agencies represented by the Licensing Section file a single accusation naming all licensees involved in the events underlying the disciplinary action. None of the agencies represented by the Health Quality Enforcement Section file a single accusation against multiple licensees. Instead, a separate accusation is filed against each licensee. When multiple licensees are involved in the same events, the accusations may be consolidated for hearing. Any agency may also refer additional investigations to this office for prosecution while an initial accusation matter is pending, and these subsequent investigations are counted as additional *accusation referrals* in this report.

There are also other differences in how client agencies respond to and participate in legal matters. Some agencies have higher default rates, and some have higher rates of representation by counsel in their accusation matters. The applicable burden of proof varies based on the type of professional, vocational, or business license. Generally, when there are specific educational and testing requirements to obtain a license, disciplinary charges must be proved by clear and convincing evidence to a reasonable certainty. Most accusation matters brought by Department of Consumer Affairs licensing agencies are subject to this burden of proof, but a few license types are subject to a lower burden of proof, i.e., preponderance of evidence. Generally, these are licenses that permit operation of a business at a specific location, such as an automotive repair dealership or pharmacy.

Currently, 19 Department of Consumer Affairs agencies are required to file their accusations within a prescribed statute of limitations, which generally ranges from one to five years, but may be longer in specific circumstances. All Department of Consumer Affairs client agencies are entitled to recover their costs of investigation and prosecution from respondents. The data included in this report are consistent with each client's licensing programs and practices to the extent possible. However, as a result of variances among agencies, data are not typically comparable to each other in any meaningful way.

Investigation Process

Agencies also differ in how they investigate their cases. Most commonly, agencies investigate using their own staff, including inspectors, sworn and unsworn investigators, investigator assistants, or analysts. Certain kinds of cases must be referred to the Department of Consumer Affairs Division of Investigation, consistent with Complaint Prioritization Guidelines developed pursuant to Business and Professions Code section 328. The Medical Board and the Board of Podiatry prioritize their complaints under Business and Professions Code section 2220.05 and are excluded from the requirements of section 328. All agencies strive to investigate complaints efficiently and rely on the Attorney General's staff for counsel, as needed.

Administrative Adjudication Process

If the investigation reveals evidence that a licensee has violated the agency's practice act, the agency refers the matter to the Office of the Attorney General to initiate a legal proceeding to revoke, suspend, limit, or condition the license, which is called an *accusation*. (Gov. Code, § 11503.)

Upon receipt, a deputy attorney general reviews the transmitted evidence to determine its sufficiency to meet the requisite burden of proof and for any jurisdictional issues. If the evidence is insufficient and circumstances suggest additional avenues for evidentiary development, the deputy may request further investigation from the agency. When evidence is insufficient and further investigation is not recommended, and/or legal issues prevent prosecution, the Office of the Attorney General declines prosecution and the case is rejected.

Based on sufficient evidentiary support, a deputy attorney general prepares an accusation to initiate the agency's adjudicative proceeding. In some cases, when the accusation is being prepared, a deputy attorney general may request supplemental investigation. The accusation pleading is sent to the agency for signature by the executive director, executive officer, or other designated *complainant* for the agency. The accusation is *filed* when the complainant signs it. When charged in an accusation, a respondent has a right to an adjudicative hearing under the California Administrative Procedure Act (Gov. Code, §11500 et seq.). Once served with the accusation, the respondent must file a *notice of defense* within fifteen days, or is in default. Once the notice of defense has been received, a hearing is scheduled with the Office of Administrative Hearings. If no notice of defense is received or a respondent fails to appear at their hearing, then a default is prepared for presentation to the client agency.

The deputy attorney general prosecutes the accusation case before the Office of Administrative Hearings. Upon conclusion of the hearing, the case is submitted to the administrative law judge who presided over the hearing. The administrative law judge prepares a proposed decision and sends it to the agency for its board or committee's voting and decision. A stipulated settlement, which can

include a public reprimand, probation, stipulated license surrender, or revocation, can occur at any time and is the most common method of adjudication of accusation matters.

The agency itself, through the board or committee, makes its decision in each accusation case. The agency can accept or reject a settlement, and if rejected, the proceedings will continue. After an administrative hearing, the agency can accept the proposed decision issued by the administrative law judge. However, the agency may opt to reduce or increase the penalty or reject the proposed decision and order the hearing transcript. After review of the transcript and the evidence, the agency can then adopt the proposed decision or issue its own decision. Most cases are resolved when the agency accepts a stipulated settlement or proposed decision. But if not, additional proceedings ensue, which take more time.

Even after an agency's decision is issued, it may not be final. A respondent may exercise the right to petition for reconsideration and, if granted by the agency, the decision will be reconsidered. This can also happen if an agency decides a case based upon the default of a respondent for failure to file a timely notice of defense or failure to appear at a duly noticed hearing. Upon petition by the respondent, the agency can vacate the default decision and additional proceedings are conducted. Each of these types of *post-submission* events will lengthen the processing of a case and require further adjudication.

Once the agency's decision has been rendered, it is still subject to judicial review in administrative mandamus and appellate proceedings. In very few cases, judicial review under Civil Procedure Code section 1094.5 results in remand to the agency to conduct further administrative proceedings or reconsider its decision. In these cases, the final decision of the agency may be delayed by months or even years.

MEASURES REPORTED

The text of Business and Professions Code section 312.2 is set forth in its entirety in the attached appendix. We provide the following interpretation of terms and description of the manner in which data were gathered for each of the reporting metrics in subdivisions (a)(1)--(a)(7) and (b)(1)--(b)(6).

(a)(1) The number of accusation matters referred to the Attorney General.

Accusation matter means an investigation of one or more complaints that an agency has referred to the Office of the Attorney General. This office will review evidence and, if appropriate, prosecute the matter through the disciplinary process as an accusation.

Accusation matters are counted by each investigation report received that bears a distinct investigation number. Some agencies represented by the Licensing Section request that more than one respondent be named and prosecuted in a single accusation, in which case the investigation number is counted as an accusation matter for each respondent. Multiple investigations may be referred during the time that the Office of the Attorney General is prosecuting the agency's initial accusation referral, which can span different fiscal years. Each investigation received during the reporting period is counted for each respondent to which it pertains. Each accusation matter referred is counted in the fiscal year it is received. Multiple accusation matters may be consolidated, amended into, and combined into one accusation signed by a client.

(a)(2) The number of accusation matters rejected for filing by the Attorney General.

Rejected for filing describes the determination, made by a deputy attorney general with a supervisor's approval, that an accusation should not be filed. An accusation can be rejected for many reasons, including: (1) the evidence submitted is insufficient to meet the burden of proof to sustain a cause for discipline under the agency's applicable practice act; (2) the events in question are not within the statute of limitations; and (3) disciplinary action is not supported by law or public policy. When prosecution is declined, the investigative file is returned to the client agency and the case is closed in the Office of the Attorney General.

A rejection for filing during the reporting period is counted once for each respondent to which the rejection pertains, without regard to the number of investigations referred to the Office of the Attorney General for consideration.

(a)(3) The number of accusation matters for which further investigation was requested by the Attorney General.

Further investigation requested describes an instance in which a deputy attorney general determines that the evidence in the investigation is insufficient to meet the burden of proof, but that there are avenues available to augment the evidence and support a cause for discipline under the agency's applicable practice act. With supervisory approval, the deputy may request further investigation from the agency, the Division of Investigation, or internally at the Office of the Attorney General. When further investigation is requested in a matter handled by the Licensing Section, the file remains open pending receipt of supplemental investigation and is documented accordingly. In the Health Quality Enforcement Section, the file is returned to the client agency and the matter is closed. The file is reopened if the matter is rereferred to the Office of the Attorney General with additional evidence.

Each request for further investigation made during the reporting period is counted in each matter, and is not necessarily associated with the number of referrals received in the matter, or the number of respondents to which the further investigation may pertain. There may be only one request for further investigation in a matter that contains more than one respondent or more than one investigation. There may also be more than one further investigation request made pertaining to a single respondent in a matter with only one referral.

(a)(4) The number of accusation matters for which further investigation was received by the Attorney General.

Further investigation received describes the additional investigation received as a result of further investigation requested, as described above. Very rarely will an agency refer a matter back to the Office of the Attorney General with an *additional* investigation and request reconsideration of a previous decision not to prosecute (i.e., rejection). If the matter is accepted for prosecution, this is also recorded as further investigation received. *Additional investigation received* is distinguished from a *new* referral of an accusation matter from a client agency, which is counted in subdivision (a)(1), but is not counted in (a)(4).

Each supplemental investigation received during the reporting period is counted in each matter and is not necessarily associated with the number of referrals received in the matter or the number of respondents to which the further investigation may pertain.

(a)(5) The number of accusations filed by each constituent entity.

Accusation means the initial accusation filed in a matter to initiate proceedings to revoke or suspend a license against one or more respondents, and any subsequent amended accusation filed in the matter. Accusations may be amended during the pendency of a case for a variety of reasons, most commonly because the client agency refers an additional investigation of a new complaint and the accusation is amended to add new causes for discipline based on the new investigation. *Filed* means the accusation or amended accusation is signed by the agency's designee, known as the complainant, who is usually the executive officer or executive director of the agency. The accusation is filed on the date the document is signed.

Each accusation or amended accusation filed during the reporting period is counted and reported under subdivision (a)(5).

(a)(6) The number of accusations a constituent entity withdraws.

On occasion, the complainant *withdraws* the accusation after it has been filed, terminating the prosecution of the accusation matter. A common reason for an accusation to be withdrawn is the death of the respondent against whom the accusation is filed. In other cases, the evidentiary basis for the matter may change during litigation, evidence received from a respondent in the course of discovery may lead to re-evaluation of the merits of the case, or the client agency may direct the complainant to withdraw the accusation after a board vote.

A withdrawal of an accusation is counted once for each respondent named in an accusation.

(a)(7) The number of accusation matters adjudicated by the Attorney General.

Adjudication means that the work of the Office of the Attorney General has been completed and the case will be brought before the agency's decision maker for its final decision. There are four types of adjudicative events: (1) a default decision and order is prepared and sent to the agency because a respondent did not file a notice of defense or failed to appear at a duly noticed administrative hearing;

(2) a stipulated settlement is signed by a respondent and sent to the agency, which considers the acceptance of the disposition of the matter for that respondent; (3) the submission of the case at the conclusion of an administrative hearing to an administrative law judge to prepare a proposed decision, and the decision is sent to the agency for its consideration; and (4) withdrawal of an accusation by the complainant, which terminates the matter. An adjudicative event for each respondent named in an accusation is necessary before the matter is fully adjudicated. Every adjudicative event that occurs during the reporting period is counted.

Multiple adjudicative events can also occur in cases with only a single respondent. This happens when an agency does not accept a stipulated settlement, does not adopt a proposed decision submitted by an administrative law judge, grants reconsideration of its decision, or when a superior court judge remands the matter to the agency for further consideration and the Attorney General's Office reopens the matter for additional handling consistent with the court order.

(b)(1) The average number of days from the Attorney General receiving an accusation referral to when an accusation is filed by the constituent entity.

The date that each accusation referral is received in the Office of the Attorney General is documented. The calculation of the average reported for subdivision (b)(1) begins on the date of receipt of the first accusation referral in each matter and ends on the date the complainant signs the initial accusation. Amended accusations received after the client agency's initial referral are not included in the average.

(b)(2) The average number of days to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received by the Attorney General from a constituent entity or the Division of Investigation.

Prepare an accusation in subdivision (b)(2) is different from *filing an accusation* in subdivision (b)(1). An accusation is *prepared* (i.e., the preparation is based on a deputy attorney general's familiarization with the technical subject matter issues, thorough review of the evidence and expert reports to determine chargeable causes for discipline, then drafting, and supervisory review of the accusation) by the assigned deputy and then sent to the complainant at the agency to be reviewed, approved, and signed.

Rereferred means the date when supplemental investigation has been received by the Office of the Attorney General in response to a request for further investigation, or, in rare cases, following rejection of an accusation matter.

The calculation of the average reported for subdivision (b)(2) begins on the date each initial accusation referral was received in the Office of the Attorney General – including time for initial review of the matter, request for further investigation, further investigation conducted, receipt of the supplemental investigation by the Office of the Attorney General from the agency, re-review by the deputy, and the deputy preparing the accusation – and ends on the date the deputy sends the prepared accusation to the complainant for review and filing in each matter. The average may also include the review of additional referrals received while further investigation is being conducted on the initial referral.

Notably, the matters that required further investigation before preparation of an accusation reported in subdivision (b)(2) are included in the average number of days to file accusations reported in subdivision (b)(1). As a consequence, delays in *preparing* accusations for cases that required further investigation generally will increase the average number of days to *file* the agency's accusations (reported in subdivision (b)(1)).

(b)(3) The average number of days from an agency filing an accusation to the Attorney General transmitting a stipulated settlement to the constituent entity.

Settlements are negotiated according to authorization provided by the complainant based on the agency's published disciplinary guidelines. A stipulated settlement is provided to the agency's decision maker who decides whether to accept the settlement as its disposition of the case against the respondent.

The calculation of the average reported for subdivision (b)(3) begins on the date of filing for the initial accusation in each matter, and ends on the date the stipulated settlement for each respondent is sent to the agency for its consideration.

(b)(4) The average number of days from an agency filing an accusation to the Attorney General transmitting a default decision to the constituent entity.

If a respondent fails to send a notice of defense to the assigned deputy attorney general or agency within 15 days after service of the accusation, or fails to appear at a duly noticed administrative hearing on the accusation, the respondent is in default. The agency can opt to present the case to an administrative law judge without participation by the respondent, who has defaulted. However, most often the agency requests that the deputy prepare a default decision and order for the agency's decision maker to consider issuing as its final decision against the respondent. Many agencies have delegated authority to their executive officers to adopt default decisions as a matter of course, without consideration by the board itself.

The calculation of the average reported for subdivision (b)(4) begins on the date each initial accusation in a matter is filed, and ends on the date of transmission of the default decision and order to the agency for each respondent.

(b)(5) The average number of days from an agency filing an accusation to the Attorney General requesting a hearing date from the Office of Administrative Hearings.

After a notice of defense has been received from each respondent named in an accusation, the deputy attorney general assigned to the matter is responsible for coordinating with opposing counsel, unrepresented respondents, prosecution witnesses, and the Office of Administrative Hearings to determine a hearing date when everyone is available. The deputy attorney general prepares a request to set the hearing based on this coordination and sends it to the Office of Administrative Hearings to calendar the hearing.

The calculation of the average reported for subdivision (b)(5) begins on the date the initial accusation in each matter is filed, and ends on the date the request to set a hearing is sent to the Office of Administrative Hearings. Infrequently, a request to set a hearing is done more than once in a case,

usually because a continuance has been granted. Only the first request to set a hearing in a case is included in calculating the average.

(b)(6) The average number of days from the Attorney General's receipt of a hearing date from the Office of Administrative Hearings to the commencement of a hearing.

When the Office of Administrative Hearings receives the request to set hearing sent by the deputy attorney general, the hearing date is set on its calendar and the parties are informed of the hearing date. Unless an intervening motion for a continuance is granted by an administrative law judge, the hearing will commence on that date and, depending on the length of the hearing and intervening factors, may conclude on the same day or at a later date.

The calculation of the average reported for subdivision (b)(6) begins on the date the deputy attorney general receives notice from the Office of Administrative Hearings that the hearing date has been set, and ends on the date the hearing actually commences. When motions to continue hearings are granted, the commencement of hearings are delayed, and the average number of days will increase as a consequence.

METHODOLOGY

Case Management System

This report is based on data entered by legal professionals in ProLaw, the case management system of the Office of the Attorney General. Each matter received from a client by the Licensing Section and the Health Quality Enforcement Section is opened in this system. Rules for data entry have been created by the sections and are managed by the Case Management Section of the Office of the Attorney General, which dictates the definitions, dating, entry, and documentation for each data point. Section-specific protocols, business processes, and uniform standards across all professionals responsible for data entry ensure the consistency, veracity, and quality of the reported data. The data entered has been verified to comply with established standards. The data markers in administrative cases have been used to generate the counts and averages in this report. Every effort has been made to report data in a transparent, accurate, and verifiable manner. The Office of the Attorney General continues to improve its technology, systems, and protocols, and to integrate these improvements into its business routines and operations.

Data Presentation

The information required to be reported by Business and Professions Code section 312.2 has been organized separately for each constituent entity in the Department of Consumer Affairs represented by the Licensing Section and the Health Quality Enforcement Section of the Office of the Attorney General.

Each entry includes the number and types of licenses issued by the agency, which were taken from the 2022 Annual Report of the California Department of Consumer Affairs, containing data from Fiscal Year 2021-22, or otherwise verified by the licensing agency. The report can be found online at: www.dca.ca.gov/publications/annual_reports.shtml.

Each client agency is unique and should not be compared to others. The following DCA website contains links for further information: www.dca.ca.gov/about_us/entities.shtml.

Any applicable statute of limitations has been included for each client agency's entry, as well as the frequency of agency accusations naming more than one respondent.

Table 1 on the entry for each agency provides the *counts* for various aspects of accusation matters as requested under subdivision (a) of Business and Professions Code section 312.2, such as the number of accusation referrals received and the number of accusations filed [subds. (a)(1) and (a)(5)]. The numbers listed are related to the number of captured events and do not reflect distinct accusation matters or respondents.

Table 2 provides metrics required under Business and Professions Code subdivision (b) of section 312.2, which are based on accusation matters adjudicated during the year as reported under subdivision (a)(7). We have included the mean, median, standard deviation, and number of values in the data set. The average expresses the central or typical value in a set of data, which is most commonly known as the arithmetic mean. The central value in an ordered set of data is the median. Compared to the median, the mean is more sensitive to extreme values, or *outliers*, and the number of values. When the mean and median are nearly equivalent, that is a likely indicator that there are few extreme values in the data set. However, when there is a large difference between the mean and median, it is likely that extreme values are skewing the data. The standard deviation (SD) for a data set reflects dispersion. A low SD indicates that data points tend to be close to the mean, while a high SD indicates that data points are spread out over a wider range of values.

The individual client agency entries that follow have been organized in alphabetical order for convenience.

CALIFORNIA BOARD OF ACCOUNTANCY

The California Board of Accountancy regulated 75,171 licensees in Fiscal Year 2021-22, with six license types. Most complaints received by the board are investigated by the board's own investigators, who are either certified public accountants or analysts. Some investigations are assisted by the Office of the Attorney General and the board's Enforcement Advisory Committee through the taking of testimony under oath of licensees under investigation. There were multiple respondents in about 18% of the board's accusation cases referred to the Office of the Attorney General in Fiscal Year 2022-23. There is no statute of limitations within which to file accusations for this agency.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	37
(2) accusation matters rejected for filing by the Attorney General.	0
(3) accusation matters for which further investigation was requested by the Attorney General.	4
(4) accusation matters for which further investigation was received by the Attorney General.	3
(5) accusations filed.	30
(6) accusations withdrawn.	0
(7) accusation matters adjudicated by the Attorney General.	37

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	115	125	56	32
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	109	105	15	3
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	145	84	138	29
(4) from the filing of an accusation to when a default decision is sent to the agency.	39	42	4	3
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	69	61	25	9
(6) from the Attorney General's receipt of a hearing date to the commencement of a hearing.	180	177	63	6

CALIFORNIA ACUPUNCTURE BOARD

The California Acupuncture Board regulated 14,908 licensees in Fiscal Year 2021-22, with one license type — Licensed Acupuncturist. Complaints received by the board are investigated by the Department of Consumer Affairs Division of Investigation, Investigations and Enforcement Unit. There is no statute of limitations within which to file accusations for this agency.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	1
(2) accusation matters rejected for filing by the Attorney General.	0
(3) accusation matters for which further investigation was requested by the Attorney General.	0
(4) accusation matters for which further investigation was received by the Attorney General.	0
(5) accusations filed.	4
(6) accusations withdrawn.	0
(7) accusation matters adjudicated by the Attorney General.	8

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	207	244	95	8
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	0	0	0	0
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	277	250	164	6
(4) from the filing of an accusation to when a default decision is sent to the agency.	162	162	0	1
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	18	18	0	1
(6) from the Attorney General's receipt of a hearing date to the commencement of a hearing.	201	201	0	1

CALIFORNIA ARCHITECTS BOARD

The California Architects Board regulated 22,070 licensees in Fiscal Year 2021-22, with one license type — Architect. Most complaints received by the board are investigated by the board’s own staff and architect consultants and, when appropriate, referred to the Department of Consumer Affairs Division of Investigation, Investigations and Enforcement Unit. The statute of limitations to file an accusation is generally five years from discovery of the act or omission charged in the accusation.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	2
(2) accusation matters rejected for filing by the Attorney General.	0
(3) accusation matters for which further investigation was requested by the Attorney General.	0
(4) accusation matters for which further investigation was received by the Attorney General.	0
(5) accusations filed.	2
(6) accusations withdrawn.	0
(7) accusation matters adjudicated by the Attorney General.	2

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	91	91	34	2
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	0	0	0	0
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	456	456	0	1
(4) from the filing of an accusation to when a default decision is sent to the agency.	37	37	0	1
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	0	0	0	0
(6) from the Attorney General’s receipt of a hearing date to the commencement of a hearing.	0	0	0	0

CALIFORNIA STATE ATHLETIC COMMISSION

The California State Athletic Commission regulated 2,918 licensees in Fiscal Year 2021-22 with eight license types. There is no statute of limitations within which to file accusations for this agency.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	1
(2) accusation matters rejected for filing by the Attorney General.	0
(3) accusation matters for which further investigation was requested by the Attorney General.	0
(4) accusation matters for which further investigation was received by the Attorney General.	0
(5) accusations filed.	0
(6) accusations withdrawn.	0
(7) accusation matters adjudicated by the Attorney General.	0

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	0	0	0	0
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	0	0	0	0
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	0	0	0	0
(4) from the filing of an accusation to when a default decision is sent to the agency.	0	0	0	0
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	0	0	0	0
(6) from the Attorney General’s receipt of a hearing date to the commencement of a hearing.	0	0	0	0

BUREAU OF AUTOMOTIVE REPAIR

The Bureau of Automotive Repair regulated 66,584 licensees in Fiscal Year 2021-22, with nine license types. Complaints and other matters are investigated by the bureau’s own program representatives. There were multiple respondents in approximately 34% of the bureau’s accusation cases referred to the Office of the Attorney General in Fiscal Year 2022-23. The statute of limitations to file an accusation is generally three years from the act or omission charged in the accusation. However, the bureau may file an accusation alleging fraud or misrepresentation within two years after the discovery, by the bureau, of the alleged facts constituting the fraud or misrepresentation.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	127
(2) accusation matters rejected for filing by the Attorney General.	0
(3) accusation matters for which further investigation was requested by the Attorney General.	1
(4) accusation matters for which further investigation was received by the Attorney General.	4
(5) accusations filed.	104
(6) accusations withdrawn.	13
(7) accusation matters adjudicated by the Attorney General.	168

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	110	106	68	133
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	114	126	44	4
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	270	265	119	63
(4) from the filing of an accusation to when a default decision is sent to the agency.	125	81	162	38
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	154	116	139	42
(6) from the Attorney General’s receipt of a hearing date to the commencement of a hearing.	203	157	144	33

BOARD OF BARBERING AND COSMETOLOGY

The Board of Barbering and Cosmetology regulated 622,448 licensees in Fiscal Year 2021-22 with 12 license types. The board receives consumer complaints and routinely inspects establishments for health and safety. The board's cases are investigated by the board's own inspectors or other staff, and when appropriate, may also be referred to the Department of Consumer Affairs Division of Investigation, Investigations and Enforcement Unit. Approximately 6% of the board's accusation cases referred to the Office of the Attorney General in Fiscal Year 2022-23 had multiple respondents. There is no statute of limitations within which to file accusations for this agency.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	66
(2) accusation matters rejected for filing by the Attorney General.	0
(3) accusation matters for which further investigation was requested by the Attorney General.	5
(4) accusation matters for which further investigation was received by the Attorney General.	4
(5) accusations filed.	45
(6) accusations withdrawn.	0
(7) accusation matters adjudicated by the Attorney General.	36

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	102	95	51	34
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	0	0	0	0
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	152	120	69	18
(4) from the filing of an accusation to when a default decision is sent to the agency.	81	63	53	13
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	82	77	37	13
(6) from the Attorney General's receipt of a hearing date to the commencement of a hearing.	119	122	10	5

BOARD OF BEHAVIORAL SCIENCES

The Board of Behavioral Sciences regulated 130,343 licensees in Fiscal Year 2021-22 with seven license types. Most complaints received by the board are investigated by the board's own investigators or staff, or referred to the Department of Consumer Affairs Division of Investigation, Investigations and Enforcement Unit, when appropriate. The statute of limitations to file an accusation is generally three years from discovery of the act or omission charged in the accusation.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	62
(2) accusation matters rejected for filing by the Attorney General.	0
(3) accusation matters for which further investigation was requested by the Attorney General.	4
(4) accusation matters for which further investigation was received by the Attorney General.	3
(5) accusations filed.	57
(6) accusations withdrawn.	1
(7) accusation matters adjudicated by the Attorney General.	48

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	66	57	52	47
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	190	205	97	3
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	152	153	95	30
(4) from the filing of an accusation to when a default decision is sent to the agency.	47	48	17	12
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	86	82	34	13
(6) from the Attorney General's receipt of a hearing date to the commencement of a hearing.	119	106	96	4

CEMETERY AND FUNERAL BUREAU

The Cemetery and Funeral Bureau regulated 13,157 licensees in Fiscal Year 2021-22 with 13 license types. Most complaints received by the bureau are investigated by the bureau’s field representatives or staff or referred to the Department of Consumer Affairs Division of Investigation, Investigations and Enforcement Unit, when appropriate. Approximately 43% of the bureau’s accusation cases referred to the Office of the Attorney General in Fiscal Year 2022-23 had multiple respondents. The statute of limitations to file an accusation is generally three years from the act or omission for cemetery licensees and two years for funeral licensees charged in the accusation.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	14
(2) accusation matters rejected for filing by the Attorney General.	0
(3) accusation matters for which further investigation was requested by the Attorney General.	1
(4) accusation matters for which further investigation was received by the Attorney General.	1
(5) accusations filed.	5
(6) accusations withdrawn.	1
(7) accusation matters adjudicated by the Attorney General.	5

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	86	85	29	4
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	0	0	0	0
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	256	248	36	4
(4) from the filing of an accusation to when a default decision is sent to the agency.	0	0	0	0
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	232	232	0	1
(6) from the Attorney General’s receipt of a hearing date to the commencement of a hearing.	0	0	0	0

BOARD OF CHIROPRACTIC EXAMINERS

The Board of Chiropractic Examiners regulated 18,131 licensees in Fiscal Year 2021-22 with four license types. Most complaints received by the board are investigated by the board's own investigators or staff, or referred to the Department of Consumer Affairs Division of Investigation, Investigations and Enforcement Unit, when appropriate. There is no statute of limitations within which to file accusations for this agency. All licensees subject to an order of probation issued on or after July 1, 2019, must provide a probation disclosure to their patients or their patients' guardians or health care surrogates prior to their first visit.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	16
(2) accusation matters rejected for filing by the Attorney General.	3
(3) accusation matters for which further investigation was requested by the Attorney General.	5
(4) accusation matters for which further investigation was received by the Attorney General.	6
(5) accusations filed.	21
(6) accusations withdrawn.	3
(7) accusation matters adjudicated by the Attorney General.	34

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	99	107	53	33
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	108	113	41	6
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	233	213	123	26
(4) from the filing of an accusation to when a default decision is sent to the agency.	108	71	84	4
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	88	54	63	11
(6) from the Attorney General's receipt of a hearing date to the commencement of a hearing.	195	195	0	1

CONTRACTORS STATE LICENSE BOARD

The Contractors State License Board regulated 315,204 licensees in Fiscal Year 2021-22 with two license types and many classifications, including Original Contractor. Most complaints received by the board are investigated by the board’s own enforcement representatives, some of whom are sworn investigators. Approximately 32% of the board’s accusation cases referred to the Office of the Attorney General in Fiscal Year 2022-23 had multiple respondents, including licensees affiliated with respondents that are entities. The statute of limitations to file an accusation is generally four years from an act or omission charged in the accusation.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	344
(2) accusation matters rejected for filing by the Attorney General.	1
(3) accusation matters for which further investigation was requested by the Attorney General.	25
(4) accusation matters for which further investigation was received by the Attorney General.	23
(5) accusations filed.	216
(6) accusations withdrawn.	5
(7) accusation matters adjudicated by the Attorney General.	236

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	99	75	105	192
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	177	114	175	17
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	251	239	144	72
(4) from the filing of an accusation to when a default decision is sent to the agency.	81	42	102	119
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	133	106	103	55
(6) from the Attorney General’s receipt of a hearing date to the commencement of a hearing.	169	132	175	29

COURT REPORTERS BOARD OF CALIFORNIA

The Court Reporters Board of California regulated 5,703 licensees in Fiscal Year 2021-22, with one license type — Certified Shorthand Reporter. Most complaints received by the board are investigated by the board’s own staff, or are referred to the Department of Consumer Affairs Division of Investigation, Investigations and Enforcement Unit when appropriate. There is no statute of limitations within which to file accusations for this agency.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	2
(2) accusation matters rejected for filing by the Attorney General.	0
(3) accusation matters for which further investigation was requested by the Attorney General.	0
(4) accusation matters for which further investigation was received by the Attorney General.	0
(5) accusations filed.	2
(6) accusations withdrawn.	0
(7) accusation matters adjudicated by the Attorney General.	1

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	58	58	0	1
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	0	0	0	0
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	0	0	0	0
(4) from the filing of an accusation to when a default decision is sent to the agency.	42	42	0	1
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	0	0	0	0
(6) from the Attorney General’s receipt of a hearing date to the commencement of a hearing.	0	0	0	0

DENTAL BOARD OF CALIFORNIA

The Dental Board of California regulated 82,001 licensees in Fiscal Year 2021-22, with 16 license types. Most complaints received by the board are investigated by the board’s own staff or investigators, some of whom are sworn investigators. The statute of limitations to file an accusation is generally three years from discovery of the act or omission charged in the accusation.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	69
(2) accusation matters rejected for filing by the Attorney General.	0
(3) accusation matters for which further investigation was requested by the Attorney General.	7
(4) accusation matters for which further investigation was received by the Attorney General.	3
(5) accusations filed.	48
(6) accusations withdrawn.	4
(7) accusation matters adjudicated by the Attorney General.	87

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	78	54	95	84
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	228	172	183	9
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	380	328	280	53
(4) from the filing of an accusation to when a default decision is sent to the agency.	165	179	77	14
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	150	109	114	32
(6) from the Attorney General’s receipt of a hearing date to the commencement of a hearing.	228	227	119	15

DENTAL HYGIENE BOARD OF CALIFORNIA

The Dental Hygiene Board of California regulated 20,623 licensees in Fiscal Year 2021-22, with four license types. Most complaints received by the board are investigated by board staff: an enforcement analyst and a non-sworn special investigator. However, some complaints require assistance from Dental Board Investigators, who are sworn officers and have jurisdiction over a dental office. There is no statute of limitations within which to file accusations for this agency.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	4
(2) accusation matters rejected for filing by the Attorney General.	0
(3) accusation matters for which further investigation was requested by the Attorney General.	0
(4) accusation matters for which further investigation was received by the Attorney General.	0
(5) accusations filed.	6
(6) accusations withdrawn.	0
(7) accusation matters adjudicated by the Attorney General.	11

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	60	49	26	11
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	0	0	0	0
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	171	141	90	6
(4) from the filing of an accusation to when a default decision is sent to the agency.	63	63	0	1
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	79	65	34	3
(6) from the Attorney General's receipt of a hearing date to the commencement of a hearing.	96	92	14	4

BUREAU OF HOUSEHOLD GOODS AND SERVICES

The Bureau of Household Goods and Services regulated 41,285 licensees in Fiscal Year 2021-22 with 16 license types. Most complaints received by the bureau are investigated by the bureau's own investigators or staff, or are referred to the Department of Consumer Affairs Division of Investigation, Investigations and Enforcement Unit when appropriate. There is no statute of limitations within which to file accusations for this agency.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	3
(2) accusation matters rejected for filing by the Attorney General.	0
(3) accusation matters for which further investigation was requested by the Attorney General.	0
(4) accusation matters for which further investigation was received by the Attorney General.	0
(5) accusations filed.	1
(6) accusations withdrawn.	0
(7) accusation matters adjudicated by the Attorney General.	0

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	0	0	0	0
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	0	0	0	0
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	0	0	0	0
(4) from the filing of an accusation to when a default decision is sent to the agency.	0	0	0	0
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	0	0	0	0
(6) from the Attorney General's receipt of a hearing date to the commencement of a hearing.	0	0	0	0

LANDSCAPE ARCHITECTS TECHNICAL COMMITTEE

The Landscape Architects Technical Committee regulated 3,665 licensees in Fiscal Year 2021-22, with one license type — Landscape Architect. Most complaints received by the committee are investigated by the committee's own enforcement staff, and some are reviewed by the committee's subject matter experts. When appropriate, complaints may be referred to the Department of Consumer Affairs Division of Investigation, Investigations and Enforcement Unit. The statute of limitations to file an accusation is generally three years from discovery of the act or omission charged in the accusation.

There were no accusation prosecution data for this agency in Fiscal Year 2022-23.

LICENSED MIDWIVES PROGRAM (MEDICAL BOARD OF CALIFORNIA)

The Medical Board of California regulated 477 licensees in Fiscal Year 2021-22, with one license type — Licensed Midwife. Complaints received by the Midwives Program are investigated by the Department of Consumer Affairs Division of Investigation, Health Quality Investigation Unit. There is no specific statute of limitations within which to file accusations for this program. However, because licensed midwives are within the jurisdiction of the Medical Board of California, accusations are filed within the same limitations period pertaining to the Medical Board, which is generally three years from the discovery of the act or omission charged in the accusation.

The tables below show data for Fiscal Year 2022–23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	2
(2) accusation matters rejected for filing by the Attorney General.	1
(3) accusation matters for which further investigation was requested by the Attorney General.	0
(4) accusation matters for which further investigation was received by the Attorney General.	0
(5) accusations filed.	2
(6) accusations withdrawn.	0
(7) accusation matters adjudicated by the Attorney General.	5

Table 2 are based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	93	99	63	5
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	0	0	0	0
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	374	319	76	5
(4) from the filing of an accusation to when a default decision is sent to the agency.	0	0	0	0
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	0	0	0	0
(6) from the Attorney General’s receipt of a hearing date to the commencement of a hearing.	0	0	0	0

MEDICAL BOARD OF CALIFORNIA

The Medical Board of California regulated 174,705 licenses, registrations, and permits of ten types in Fiscal Year 2021-22 (excluding Licensed Midwives, data for which is set forth on the preceding page). Data for Physicians and Surgeons, Research Psychoanalysts, and Polysomnographic Program are consolidated below. Complaints received by the board are investigated by its in-house Complaint Investigation Office or by the Department of Consumer Affairs Division of Investigation, Health Quality Investigation Unit. The statute of limitations to file an accusation is generally three years from discovery of the act or omission charged in the accusation.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	397
(2) accusation matters rejected for filing by the Attorney General.	68
(3) accusation matters for which further investigation was requested by the Attorney General.	61
(4) accusation matters for which further investigation was received by the Attorney General.	114
(5) accusations filed.	318
(6) accusations withdrawn.	6
(7) accusation matters adjudicated by the Attorney General.	299

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	108	69	114	295
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	319	313	171	25
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	389	320	313	247
(4) from the filing of an accusation to when a default decision is sent to the agency.	113	100	61	10
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	173	86	267	88
(6) from the Attorney General's receipt of a hearing date to the commencement of a hearing.	234	202	139	37

CALIFORNIA BOARD OF NATUROPATHIC MEDICINE

The California Board of Naturopathic Medicine regulated 1,124 licensees in Fiscal Year 2021–22, with one type of license — Naturopathic Doctor. Complaints received by the board are investigated by the Department of Consumer Affairs Division of Investigation, Investigations and Enforcement Unit. There is no statute of limitations within which to file accusations for this agency.

The tables below show data for Fiscal Year 2022–23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	1
(2) accusation matters rejected for filing by the Attorney General.	0
(3) accusation matters for which further investigation was requested by the Attorney General.	0
(4) accusation matters for which further investigation was received by the Attorney General.	0
(5) accusations filed.	0
(6) accusations withdrawn.	0
(7) accusation matters adjudicated by the Attorney General.	1

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	208	208	0	1
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	0	0	0	0
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	0	0	0	0
(4) from the filing of an accusation to when a default decision is sent to the agency.	0	0	0	0
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	197	197	0	1
(6) from the Attorney General's receipt of a hearing date to the commencement of a hearing.	20	20	0	1

CALIFORNIA BOARD OF OCCUPATIONAL THERAPY

The California Board of Occupational Therapy regulated 19,483 licensees in Fiscal Year 2021-22, with four license types. Most complaints received by the board are investigated by the board's own investigators or staff, or are referred to the Department of Consumer Affairs Division of Investigation, Investigations and Enforcement Unit when appropriate. There is no statute of limitations within which to file accusations for this agency.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	12
(2) accusation matters rejected for filing by the Attorney General.	0
(3) accusation matters for which further investigation was requested by the Attorney General.	1
(4) accusation matters for which further investigation was received by the Attorney General.	1
(5) accusations filed.	15
(6) accusations withdrawn.	0
(7) accusation matters adjudicated by the Attorney General.	9

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	127	133	90	9
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	252	252	0	1
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	166	166	82	2
(4) from the filing of an accusation to when a default decision is sent to the agency.	36	37	4	4
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	138	102	91	3
(6) from the Attorney General's receipt of a hearing date to the commencement of a hearing.	108	94	56	3

CALIFORNIA STATE BOARD OF OPTOMETRY

The California State Board of Optometry includes the Dispensing Optician Committee. The board regulated 15,960 licensees in Fiscal Year 2021-22, with seven types of licenses, including those for Optometrist and Registered Dispensing Optician. Most complaints received by the board are investigated by the board’s own staff, or are referred to the Department of Consumer Affairs Division of Investigation, Investigations and Enforcement Unit when appropriate. The board does not employ its own investigators. The statute of limitations to file an accusation is generally three years from discovery of the act or omission charged in the accusation.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	8
(2) accusation matters rejected for filing by the Attorney General.	0
(3) accusation matters for which further investigation was requested by the Attorney General.	0
(4) accusation matters for which further investigation was received by the Attorney General.	0
(5) accusations filed.	6
(6) accusations withdrawn.	0
(7) accusation matters adjudicated by the Attorney General.	7

Table 2 are based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	105	80	78	7
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	0	0	0	0
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	338	275	134	4
(4) from the filing of an accusation to when a default decision is sent to the agency.	44	44	22	2
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	0	0	0	0
(6) from the Attorney General’s receipt of a hearing date to the commencement of a hearing.	215	215	0	1

OSTEOPATHIC MEDICAL BOARD OF CALIFORNIA

The Osteopathic Medical Board of California regulated 15,583 licenses and permits in Fiscal Year 2021-22, with two types of licenses — Osteopathic Physician and Surgeon, and Postgraduate Training License. Complaints received by the board are investigated by the Department of Consumer Affairs Division of Investigation, Health Quality Investigation Unit. The statute of limitations to file an accusation is generally three years from discovery of the act or omission charged in the accusation.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	23
(2) accusation matters rejected for filing by the Attorney General.	0
(3) accusation matters for which further investigation was requested by the Attorney General.	4
(4) accusation matters for which further investigation was received by the Attorney General.	7
(5) accusations filed.	22
(6) accusations withdrawn.	2
(7) accusation matters adjudicated by the Attorney General.	22

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	101	62	126	22
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	299	294	212	3
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	307	258	138	16
(4) from the filing of an accusation to when a default decision is sent to the agency.	88	70	46	3
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	164	118	106	9
(6) from the Attorney General's receipt of a hearing date to the commencement of a hearing.	313	313	0	1

CALIFORNIA STATE BOARD OF PHARMACY

The California State Board of Pharmacy regulated 141,171 licensees in Fiscal Year 2021-22, with 20 license types. The board receives consumer complaints and routinely inspects pharmacies for compliance. Most complaints received by the board are investigated by the board’s own inspectors, who are licensed pharmacists themselves. There were multiple respondents in about 26% of the board’s accusation cases referred to the Office of the Attorney General in Fiscal Year 2022–23. There is no statute of limitations within which to file accusations for this agency.

The tables below show data for Fiscal Year 2022–23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	260
(2) accusation matters rejected for filing by the Attorney General.	4
(3) accusation matters for which further investigation was requested by the Attorney General.	22
(4) accusation matters for which further investigation was received by the Attorney General.	10
(5) accusations filed.	146
(6) accusations withdrawn.	5
(7) accusation matters adjudicated by the Attorney General.	214

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	150	109	137	141
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	213	154	183	16
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	403	382	293	126
(4) from the filing of an accusation to when a default decision is sent to the agency.	69	56	47	48
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	120	80	102	38
(6) from the Attorney General’s receipt of a hearing date to the commencement of a hearing.	118	122	66	22

PHYSICAL THERAPY BOARD OF CALIFORNIA

The Physical Therapy Board of California regulated 36,888 licenses and certificates in Fiscal Year 2021-22, with two license types — Physical Therapist and Physical Therapist Assistant. Complaints received by the board are investigated by the Department of Consumer Affairs Division of Investigation, Investigations and Enforcement Unit. There is no statute of limitations within which to file accusations for this agency.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	30
(2) accusation matters rejected for filing by the Attorney General.	2
(3) accusation matters for which further investigation was requested by the Attorney General.	5
(4) accusation matters for which further investigation was received by the Attorney General.	5
(5) accusations filed.	25
(6) accusations withdrawn.	1
(7) accusation matters adjudicated by the Attorney General.	26

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	120	75	96	26
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	262	262	0	1
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	221	212	107	22
(4) from the filing of an accusation to when a default decision is sent to the agency.	100	100	38	2
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	65	54	34	7
(6) from the Attorney General's receipt of a hearing date to the commencement of a hearing.	250	250	0	1

PHYSICIAN ASSISTANT BOARD OF CALIFORNIA

The Physician Assistant Board regulated 15,879 licensees in Fiscal Year 2021-22, with one license type — Physician Assistant. Complaints received by the board are investigated by the Department of Consumer Affairs Division of Investigation, Health Quality Investigation Unit. There is no statute of limitations within which to file accusations for this agency.

The tables below show data for Fiscal Year 2022-2.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	29
(2) accusation matters rejected for filing by the Attorney General.	5
(3) accusation matters for which further investigation was requested by the Attorney General.	2
(4) accusation matters for which further investigation was received by the Attorney General.	11
(5) accusations filed.	22
(6) accusations withdrawn.	0
(7) accusation matters adjudicated by the Attorney General.	21

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	138	72	151	21
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	254	182	161	5
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	340	282	259	15
(4) from the filing of an accusation to when a default decision is sent to the agency.	56	56	4	2
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	99	74	74	11
(6) from the Attorney General's receipt of a hearing date to the commencement of a hearing.	150	129	74	4

PODIATRIC MEDICAL BOARD OF CALIFORNIA

The Podiatric Medical Board regulated 2,373 licenses and permits in Fiscal Year 2021-22 with two license types, including Doctor of Podiatric Medicine. Complaints received by the board are investigated by the Department of Consumer Affairs Division of Investigation, Health Quality Investigation Unit. The statute of limitations generally requires accusations to be filed within three years after the discovery of the act or omission charged in the accusation.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	15
(2) accusation matters rejected for filing by the Attorney General.	2
(3) accusation matters for which further investigation was requested by the Attorney General.	1
(4) accusation matters for which further investigation was received by the Attorney General.	5
(5) accusations filed.	11
(6) accusations withdrawn.	0
(7) accusation matters adjudicated by the Attorney General.	8

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	103	80	86	8
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	274	274	0	1
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	432	274	444	8
(4) from the filing of an accusation to when a default decision is sent to the agency.	0	0	0	0
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	73	34	73	5
(6) from the Attorney General's receipt of a hearing date to the commencement of a hearing.	0	0	0	0

BUREAU FOR PRIVATE POSTSECONDARY EDUCATION

The Bureau for Private Postsecondary Education issues three types of approvals that authorize private postsecondary institutions to operate. It regulated 1,030 licensees in Fiscal Year 2021-22. The bureau does not employ investigators and most complaints are investigated by the board's own staff or are referred to the Department of Consumer Affairs Division of Investigation, Investigations and Enforcement Unit when appropriate. There is no statute of limitations within which to file accusations for this agency.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	8
(2) accusation matters rejected for filing by the Attorney General.	1
(3) accusation matters for which further investigation was requested by the Attorney General.	1
(4) accusation matters for which further investigation was received by the Attorney General.	0
(5) accusations filed.	11
(6) accusations withdrawn.	0
(7) accusation matters adjudicated by the Attorney General.	12

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	93	71	80	12
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	250	250	0	1
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	310	264	192	4
(4) from the filing of an accusation to when a default decision is sent to the agency.	91	43	95	4
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	90	56	54	3
(6) from the Attorney General's receipt of a hearing date to the commencement of a hearing.	188	202	35	3

BOARD FOR PROFESSIONAL ENGINEERS, LAND SURVEYORS, AND GEOLOGISTS

The Board for Professional Engineers, Land Surveyors, and Geologists regulated 183,178 licensees in Fiscal Year 2021-22 with 27 license types. The board does not employ investigators and most complaints are investigated by the board's own staff or are referred to the Department of Consumer Affairs Division of Investigation, Investigations and Enforcement Unit, when appropriate. There is no statute of limitations within which to file accusations for this agency.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	30
(2) accusation matters rejected for filing by the Attorney General.	0
(3) accusation matters for which further investigation was requested by the Attorney General.	5
(4) accusation matters for which further investigation was received by the Attorney General.	3
(5) accusations filed.	31
(6) accusations withdrawn.	2
(7) accusation matters adjudicated by the Attorney General.	15

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	107	99	67	15
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	85	85	0	1
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	248	281	136	6
(4) from the filing of an accusation to when a default decision is sent to the agency.	90	50	82	6
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	150	115	65	5
(6) from the Attorney General's receipt of a hearing date to the commencement of a hearing.	104	104	0	1

PROFESSIONAL FIDUCIARIES BUREAU

The Professional Fiduciaries Bureau regulated 844 licensees in Fiscal Year 2021-22, with one license type — Professional Fiduciary. Complaints received by the bureau are investigated by the bureau’s own staff, or are referred to the Department of Consumer Affairs Division of Investigation, Investigations and Enforcement Unit when appropriate. There is no statute of limitations within which to file accusations for this agency.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	8
(2) accusation matters rejected for filing by the Attorney General.	0
(3) accusation matters for which further investigation was requested by the Attorney General.	0
(4) accusation matters for which further investigation was received by the Attorney General.	0
(5) accusations filed.	5
(6) accusations withdrawn.	0
(7) accusation matters adjudicated by the Attorney General.	4

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	75	70	61	4
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	0	0	0	0
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	0	0	0	0
(4) from the filing of an accusation to when a default decision is sent to the agency.	46	40	12	4
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	0	0	0	0
(6) from the Attorney General’s receipt of a hearing date to the commencement of a hearing.	0	0	0	0

CALIFORNIA BOARD OF PSYCHOLOGY

The California Board of Psychology regulated 25,749 licensees in Fiscal Year 2021-22, with two license types — Psychologist and Psychological Assistant. The statute of limitations to file an accusation is generally three years from discovery of the act or omission charged in the accusation.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	28
(2) accusation matters rejected for filing by the Attorney General.	8
(3) accusation matters for which further investigation was requested by the Attorney General.	1
(4) accusation matters for which further investigation was received by the Attorney General.	1
(5) accusations filed.	23
(6) accusations withdrawn.	3
(7) accusation matters adjudicated by the Attorney General.	21

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	129	80	152	21
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	306	227	213	3
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	359	360	207	17
(4) from the filing of an accusation to when a default decision is sent to the agency.	139	139	0	1
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	88	88	53	7
(6) from the Attorney General’s receipt of a hearing date to the commencement of a hearing.	0	0	0	0

BUREAU OF REAL ESTATE APPRAISERS

The Bureau of Real Estate Appraisers regulated 10,039 licensees in Fiscal Year 2021-22, with six license types. Most complaints received by the bureau involved violations of the Uniform Standards of Professional Appraisal Practice and are investigated by the bureau's own staff of investigators who each hold a certified appraiser license. Federal law directs the resolution of administrative actions within one year after a complaint is filed with the bureau.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	4
(2) accusation matters rejected for filing by the Attorney General.	0
(3) accusation matters for which further investigation was requested by the Attorney General.	0
(4) accusation matters for which further investigation was received by the Attorney General.	0
(5) accusations filed.	3
(6) accusations withdrawn.	0
(7) accusation matters adjudicated by the Attorney General.	4

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	100	93	24	4
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	0	0	0	0
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	276	276	0	1
(4) from the filing of an accusation to when a default decision is sent to the agency.	29	24	16	3
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	0	0	0	0
(6) from the Attorney General's receipt of a hearing date to the commencement of a hearing.	0	0	0	0

BOARD OF REGISTERED NURSING

The Board of Registered Nursing regulated 598,939 licensees in Fiscal Year 2021-22, with 12 license types. Most complaints received by the board are investigated by the board's own staff of investigators, or are referred to the Department of Consumer Affairs Division of Investigation, Investigations and Enforcement Unit when appropriate. There is no statute of limitations within which to file accusations for this agency.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	962
(2) accusation matters rejected for filing by the Attorney General.	50
(3) accusation matters for which further investigation was requested by the Attorney General.	104
(4) accusation matters for which further investigation was received by the Attorney General.	76
(5) accusations filed.	796
(6) accusations withdrawn.	32
(7) accusation matters adjudicated by the Attorney General.	763

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	79	62	67	741
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	164	124	131	46
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	197	187	126	430
(4) from the filing of an accusation to when a default decision is sent to the agency.	56	42	38	212
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	107	96	62	198
(6) from the Attorney General's receipt of a hearing date to the commencement of a hearing.	162	153	92	73

RESPIRATORY CARE BOARD OF CALIFORNIA

The Respiratory Care Board of California regulated 24,128 licensees in Fiscal Year 2021-22, with one license type — Respiratory Care Practitioner. Complaints received by the board are investigated by board staff. The statute of limitations to file an accusation is generally three years from discovery of the act or omission charged in the accusation.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	31
(2) accusation matters rejected for filing by the Attorney General.	1
(3) accusation matters for which further investigation was requested by the Attorney General.	3
(4) accusation matters for which further investigation was received by the Attorney General.	1
(5) accusations filed.	27
(6) accusations withdrawn.	1
(7) accusation matters adjudicated by the Attorney General.	19

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	100	94	72	19
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	214	214	82	2
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	196	206	110	14
(4) from the filing of an accusation to when a default decision is sent to the agency.	84	84	28	4
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	51	47	23	7
(6) from the Attorney General's receipt of a hearing date to the commencement of a hearing.	0	0	0	0

BUREAU OF SECURITY AND INVESTIGATIVE SERVICES

The Bureau of Security and Investigative Services regulated 420,671 licensees in Fiscal Year 2021-22 with 23 license types. Most complaints received by the bureau are investigated by the bureau’s own staff, or are referred to the Department of Consumer Affairs Division of Investigation, Investigations and Enforcement Unit when appropriate. About 16% of the bureau’s accusation cases referred to the Office of the Attorney General in Fiscal Year 2022-23 had multiple respondents. There is no statute of limitations within which to file accusations for this agency.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	23
(2) accusation matters rejected for filing by the Attorney General.	1
(3) accusation matters for which further investigation was requested by the Attorney General.	3
(4) accusation matters for which further investigation was received by the Attorney General.	4
(5) accusations filed.	30
(6) accusations withdrawn.	2
(7) accusation matters adjudicated by the Attorney General.	33

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	91	94	84	32
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	126	77	142	8
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	225	273	114	8
(4) from the filing of an accusation to when a default decision is sent to the agency.	84	62	65	15
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	90	75	61	10
(6) from the Attorney General’s receipt of a hearing date to the commencement of a hearing.	130	141	66	8

SPEECH-LANGUAGE PATHOLOGY & AUDIOLOGY & HEARING AID DISPENSERS BOARD

The Speech-Language Pathology and Audiology and Hearing Aid Dispensers Board regulated 38,150 licenses, certificates, permits and registrations in Fiscal Year 2021-22 with 11 license types, including Speech and Language Pathologist, Audiologist, Dispensing Audiologist, Speech Language Pathology Assistant, and Hearing Aid Dispenser. Complaints received by the board are investigated by the Department of Consumer Affairs Division of Investigation, Investigations and Enforcement Unit. There is no generally applicable statute of limitations within which to file accusations for this agency, with the exception of certain kinds of violations for which an accusation must be filed within three or four years from the act or omission charged in the accusation.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	1
(2) accusation matters rejected for filing by the Attorney General.	1
(3) accusation matters for which further investigation was requested by the Attorney General.	0
(4) accusation matters for which further investigation was received by the Attorney General.	0
(5) accusations filed.	2
(6) accusations withdrawn.	0
(7) accusation matters adjudicated by the Attorney General.	4

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	85	78	41	4
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	0	0	0	0
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	176	154	86	4
(4) from the filing of an accusation to when a default decision is sent to the agency.	0	0	0	0
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	78	78	0	1
(6) from the Attorney General's receipt of a hearing date to the commencement of a hearing.	0	0	0	0

STRUCTURAL PEST CONTROL BOARD

The Structural Pest Control Board regulated 28,469 licensees in Fiscal Year 2021-22, with five license types. Most complaints received by the board are investigated by the board's own staff of investigators, or are referred to the Department of Consumer Affairs Division of Investigation, Investigations and Enforcement Unit when appropriate. There were multiple respondents in about 12% of the board's accusation cases referred to the Office of the Attorney General in Fiscal Year 2022-23. The statute of limitations requires a complaint to be received by the board within two years from an alleged act or omission, and generally the accusation must be filed within 18 months after the board's receipt of the complaint.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	17
(2) accusation matters rejected for filing by the Attorney General.	0
(3) accusation matters for which further investigation was requested by the Attorney General.	1
(4) accusation matters for which further investigation was received by the Attorney General.	1
(5) accusations filed.	15
(6) accusations withdrawn.	0
(7) accusation matters adjudicated by the Attorney General.	17

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	53	44	32	14
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	73	73	10	2
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	156	185	74	8
(4) from the filing of an accusation to when a default decision is sent to the agency.	94	56	82	6
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	45	42	21	4
(6) from the Attorney General's receipt of a hearing date to the commencement of a hearing.	100	93	18	4

VETERINARY MEDICAL BOARD

The Veterinary Medical Board regulated 41,000 licensees in Fiscal Year 2021-22, with seven license types. The board receives consumer complaints and routinely inspects veterinary hospital premises for compliance. The board's cases are investigated by the board's own inspectors or other staff and, when appropriate, may also be referred to the Department of Consumer Affairs Division of Investigation, Investigations and Enforcement Unit. There were multiple respondents in about 17% of the board's accusation cases referred to the Office of the Attorney General in Fiscal Year 2022-23. There is no statute of limitations within which to file accusations for this agency.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	38
(2) accusation matters rejected for filing by the Attorney General.	0
(3) accusation matters for which further investigation was requested by the Attorney General.	9
(4) accusation matters for which further investigation was received by the Attorney General.	7
(5) accusations filed.	27
(6) accusations withdrawn.	0
(7) accusation matters adjudicated by the Attorney General.	32

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	169	149	111	26
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	116	116	33	2
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	311	271	171	25
(4) from the filing of an accusation to when a default decision is sent to the agency.	43	43	0	1
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	129	105	82	12
(6) from the Attorney General's receipt of a hearing date to the commencement of a hearing.	131	131	34	2

BOARD OF VOCATIONAL NURSING AND PSYCHIATRIC TECHNICIANS

The Board of Vocational Nursing and Psychiatric Technicians regulated 143,121 licensees in Fiscal Year 2021-22 with two license types — Vocational Nurse and Psychiatric Technician. Most complaints received by the board are investigated by the board’s own staff or investigators, and are referred to the Department of Consumer Affairs Division of Investigation, Investigations and Enforcement Unit when appropriate. There is no statute of limitations within which to file accusations for this agency.

The tables below show data for Fiscal Year 2022-23.

Table 1 – Business and Professions Code Section 312.2, Subdivision (a)	
Number of –	Count
(1) accusation matters referred to the Attorney General.	221
(2) accusation matters rejected for filing by the Attorney General.	11
(3) accusation matters for which further investigation was requested by the Attorney General.	42
(4) accusation matters for which further investigation was received by the Attorney General.	29
(5) accusations filed.	204
(6) accusations withdrawn.	0
(7) accusation matters adjudicated by the Attorney General.	217

Table 2 is based on the adjudicated accusation matters reported under Business and Professions Code section 312.2, subdivision (a)(7) in Table 1.

Table 2 – Business and Professions Code Section 312.2, Subdivision (b)				
Average number of days for adjudicated accusation matters –	Mean	Median	SD	Count
(1) from receipt of referral by the Attorney General to when an accusation is filed.	73	56	55	207
(2) to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received.	126	119	75	34
(3) from the filing of an accusation to when a stipulated settlement is sent to the agency.	195	193	103	89
(4) from the filing of an accusation to when a default decision is sent to the agency.	72	55	67	78
(5) from the filing of an accusation to the Attorney General requesting a hearing date.	94	79	58	66
(6) from the Attorney General’s receipt of a hearing date to the commencement of a hearing.	151	143	64	41

CONCLUSION

This is the seventh annual report by the Office of the Attorney General pursuant to Business and Professions Code section 312.2, which became effective on January 1, 2016. The Attorney General's Annual Reports on Accusations Prosecuted for Department of Consumer Affairs Client Agencies, including the prior six reports, are available on the Attorney General's website oag.ca.gov/publications.

We anticipate that this historical accumulation of reports will continue to facilitate collaboration among the Office of the Attorney General, Office of Administrative Hearings, and Department of Consumer Affairs, all of which join in responsibility for protection of the public through efficiency in adjudicating accusation matters. If you have any questions regarding this report, or if you would like additional information, please contact Jonathan L. Wolff, Chief Assistant Attorney General, at (415) 510-3749.

APPENDIX

Business and Professions Code section 312.2 states:

- (a) The Attorney General shall submit a report to the department, the Governor, and the appropriate policy committees of the Legislature on or before January 1, 2018, and on or before January 1 of each subsequent year that includes, at a minimum, all of the following for the previous fiscal year for each constituent entity within the department represented by the Licensing Section and Health Quality Enforcement Section of the Office of the Attorney General:
 - (1) The number of accusation matters referred to the Attorney General.
 - (2) The number of accusation matters rejected for filing by the Attorney General.
 - (3) The number of accusation matters for which further investigation was requested by the Attorney General.
 - (4) The number of accusation matters for which further investigation was received by the Attorney General.
 - (5) The number of accusations filed by each constituent entity.
 - (6) The number of accusations a constituent entity withdraws.
 - (7) The number of accusation matters adjudicated by the Attorney General.
- (b) The Attorney General shall also report all of the following for accusation matters adjudicated within the previous fiscal year for each constituent entity of the department represented by the Licensing Section and Health Quality Enforcement Section:
 - (1) The average number of days from the Attorney General receiving an accusation referral to when an accusation is filed by the constituent entity.
 - (2) The average number of days to prepare an accusation for a case that is rereferred to the Attorney General after further investigation is received by the Attorney General from a constituent entity or the Division of Investigation.
 - (3) The average number of days from an agency filing an accusation to the Attorney General transmitting a stipulated settlement to the constituent entity.
 - (4) The average number of days from an agency filing an accusation to the Attorney General transmitting a default decision to the constituent entity.
 - (5) The average number of days from an agency filing an accusation to the Attorney General requesting a hearing date from the Office of Administrative Hearings.

- (6) The average number of days from the Attorney General's receipt of a hearing date from the Office of Administrative Hearings to the commencement of a hearing.
- (c) A report to be submitted pursuant to subdivision (a) shall be submitted in compliance with Section 9795 of the Government Code.

MEMORANDUM

DATE	January 5, 2024
TO	Members of the Dental Board of California
FROM	Carlos Alvarez, Chief, Southern California Enforcement Dental Board of California
SUBJECT	Agenda Item 8.b.: Enforcement – Review of Statistics and Trends

The following are the Enforcement Division statistics:

Complaint and Compliance Unit (CCU)

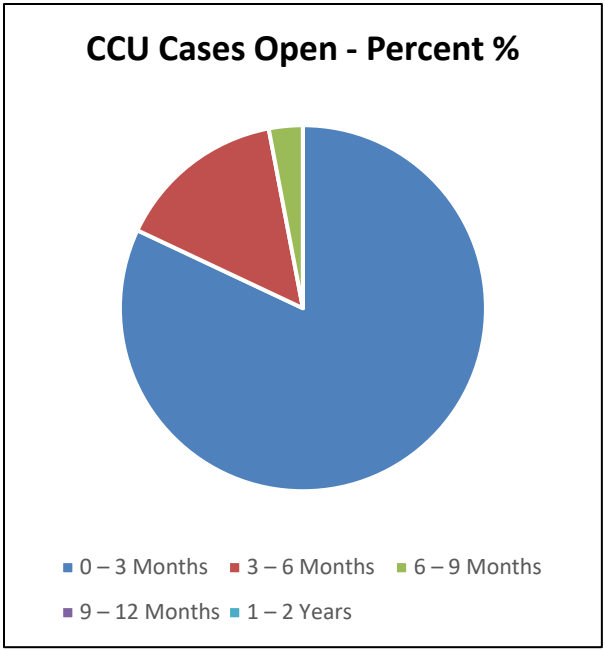
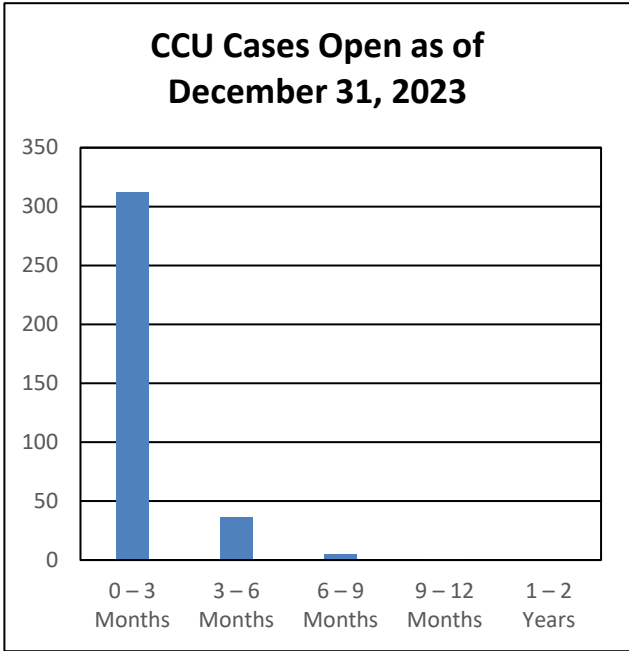
Number of Complaint Cases Received between October 1 and December 31, 2023

During this period, CCU received **1,158** complaints. The monthly average of complaints received was **386**.

Number of Complaint Cases Open

As of December 31, 2023, there are **354** complaint cases open in CCU. A breakdown of the case aging is as follows:

Complaint and Compliance Cases Open		
Complaint Age	As of December 31, 2023	Percent (%)
0 – 3 Months	312	88%
3 – 6 Months	36	10%
6 – 9 Months	5	2%
9 – 12 Months	1	0%
1 – 2 Years	0	0%
2 Plus Years	0	0%
Total	354	100%



Number of Complaint Cases Closed

Between October 1 and December 31, 2023, a total of **246** complaint cases were closed in CCU. The monthly average of complaints closed during this time was **82**.

Number of Complaint Cases Received

Complaints Received	
License Type	October 1, 2023, to December 31, 2023
Dentists	234
Registered Dental Assistants	2
Other*	77
Total	313

*All other types of Complaints

Sacramento Investigative Analysis Unit (IAU)

Number of Subsequent Arrest Report (SAR) Cases Open in IAU

As of December 31, 2023, there are **271** SAR cases are open in the IAU. A breakdown of the case aging is as follows:

SARS Cases Open		
SAR Age	As of December 31, 2023	Percent (%)
0 – 3 Months	78	29%
3 – 6 Months	61	23%
6 – 9 Months	37	14%
9 – 12 Months	23	8%
1 – 2 Years	54	20%
2 – 3 Years	13	5%
3+ Years	5	1%
Total	271	100%

***SARS are classified as investigative cases once all records requested are received and have been recommended for investigation by either Supervising Investigator or Enforcement Chief**

Number of SAR Cases Closed

Between October 1, 2023, and December 31, 2023, a total of **20** SAR cases were closed in the Investigative Analysis Unit.

Enforcement Units

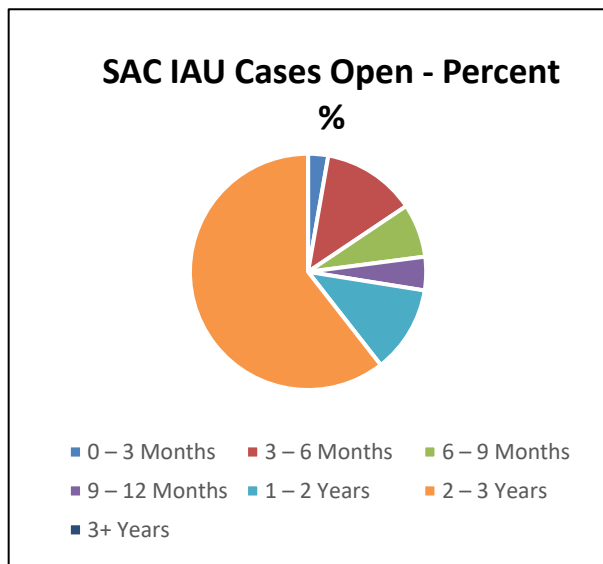
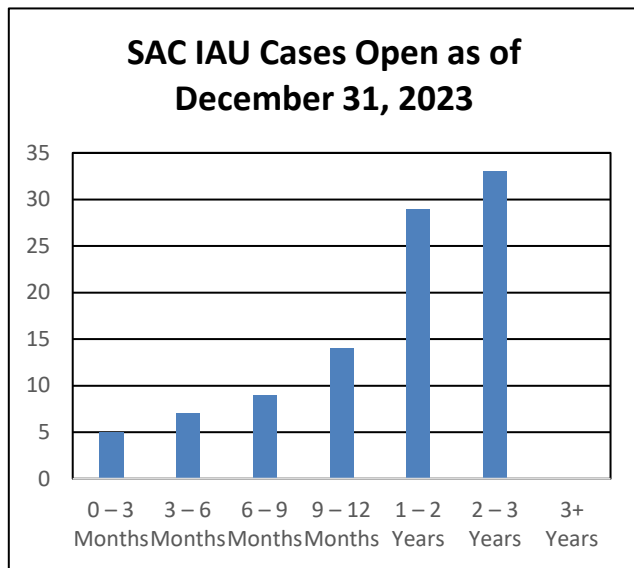
As of December 31, 2023, there **777** investigative cases open in the Board's Enforcement Units. A breakdown of the cases is as follows:

Enforcement Cases Open	
Enforcement Units	As of December 31, 2023
Sacramento IAU (Non-Sworn)	95
Orange IAU (Non-Sworn)	56
Sacramento Field Office (SFO; Sworn)	60
Orange Field Office (Sworn)	171
Pending Assignment	395
Total	777

Number of Investigative Cases Open in the Sacramento IAU

As of December 31, 2023, there are **95** investigative cases open in the Sacramento IAU. A breakdown of the cases is as follows:

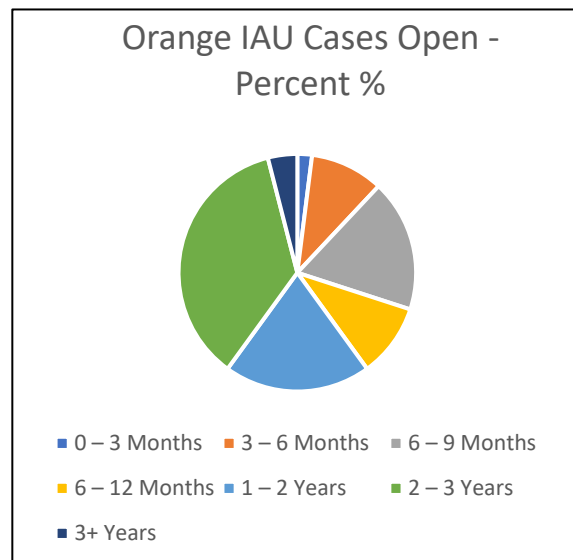
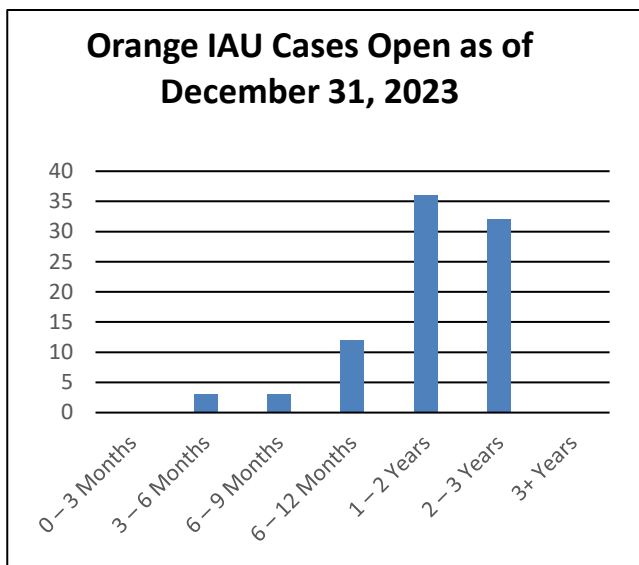
Sacramento IAU Cases Open		
Investigation Age	As of December 31, 2023	Percent (%)
0 – 3 Months	5	5%
3 – 6 Months	7	7%
6 – 9 Months	8	9%
9 – 12 Months	13	14%
1 – 2 Years	29	30%
2 – 3 Years	33	35%
3+ Years	0	0%
Total	95	100%



Number of Investigative Cases Open in the Orange IAU

As of December 31, 2023, there are **56** investigative cases open in the Orange IAU (Non-Sworn). A breakdown of the case aging is as follows:

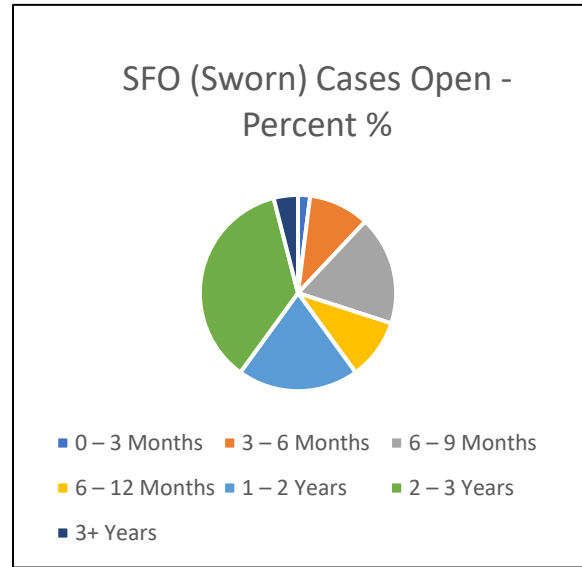
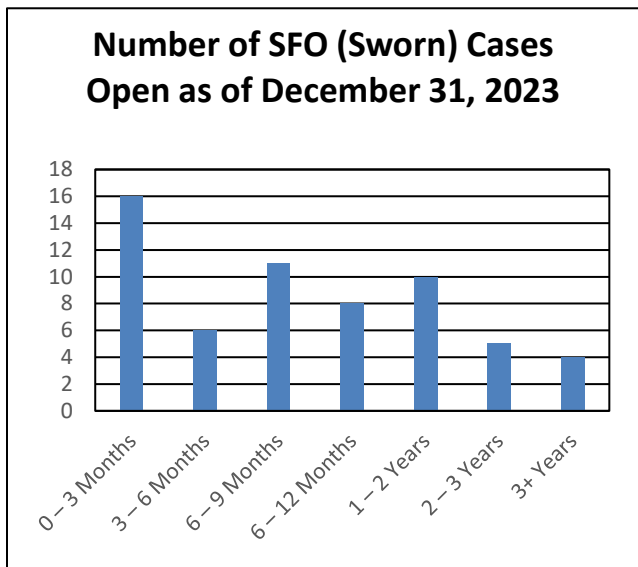
Orange IAU Cases Open		
Investigation Age	As of December 31, 2023	Percent (%)
0 – 3 Months	0	0%
3 – 6 Months	3	5%
6 – 9 Months	3	5%
9 – 12 Months	12	22%
1 – 2 Years	20	36%
2 – 3 Years	18	32%
3+ Years	0	0%
12Total	56	100%



Number of Investigative Cases Open in the Sacramento Field Office (Sworn)

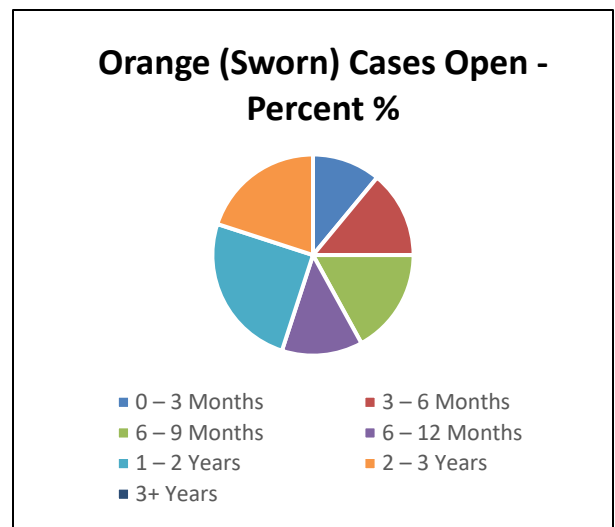
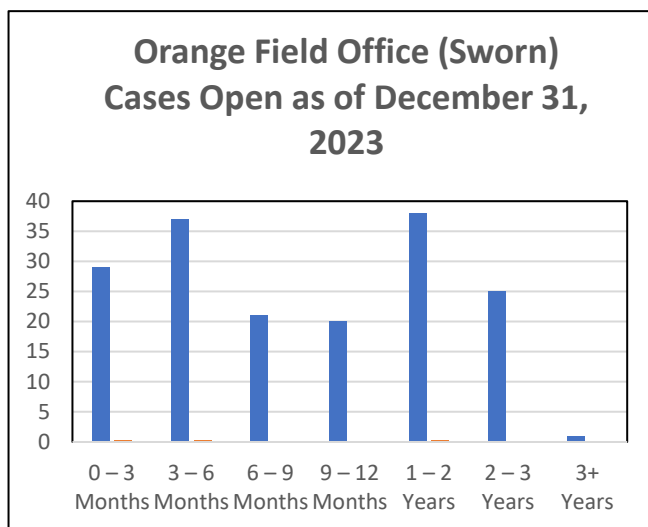
As of December 31, 2023, there are **60** investigative cases open in the Sacramento IAU (Non-Sworn). A breakdown of the case aging is as follows:

Sacramento Field Office (Sworn) Cases Open		
Investigation Age	As of December 31, 2023	Percent (%)
0 – 3 Months	16	26%
3 – 6 Months	6	10%
6 – 9 Months	11	18%
9 – 12 Months	8	13%
1 – 2 Years	10	17%
2 – 3 Years	5	9%
3+ Years	4	7%
Total	60	100%



As of December 31, 2023, there are **171** investigative cases open with the Sworn investigators, in the Orange Field Office. A breakdown of the case aging is as follows:

Orange Field Office (Sworn) Cases Open		
Investigation Age	As of December 31, 2023	Percent (%)
0 – 3 Months	29	17%
3 – 6 Months	37	21%
6 – 9 Months	21	12%
9 – 12 Months	20	12%
1 – 2 Years	38	22%
2 – 3 Years	25	15%
3+ Years	1	1%
Total	171	100%



Number of Investigation Cases Closed

Between October 1, 2023, and December 31, 2023, a total of **98** investigative cases were closed in IAU, the Sacramento Field Office, and the Orange Field Office.

Number of Inspection Cases Open

As of December 31, 2023, there are **49** Inspection Cases open in the Sacramento and Orange Field Offices. A breakdown is as follows:

Field Office	Number of Cases
Sac IAU	21
Orange IAU	28
Total	49

Number of Inspection Cases Closed

Between October 1, 2023, to December 31, 2023, a total of **37** inspection cases were closed in the Sacramento Field Office and the Orange Field Office.

Administrative and Disciplinary Action

As of December 31, 2023, there are **136** open cases in the Discipline Coordination Unit.

There is **1** case in which a Petition for Early Termination has been submitted and is pending referral to the Office of the Attorney General (AG).

There are **2** cases in which a WRIT has been filed and is pending.

The above-mentioned cases have not been referred to the AG for disciplinary action, therefore they are not counted in the total pending cases at the AG.

Accusations

Between October 1, 2023, and December 31, 2023, there were **17** accusations filed with the AG.

Cases Assigned to the Office of the Attorney General

Between October 1, 2023, and December 31, 2023, there were **33** cases transmitted to the AG. Of those 33 cases, 18 were referred for dentists and 15 were referred for dental auxiliaries.

As of December 31, 2023, there are **133** cases pending at the AG.

Citations

Between October 1, 2023, and December 31, 2023, there were **41** citations issued.

Number of Probation Cases Open

As of December 31, 2023, there are **127** probationer cases being monitored. Of those, **118** active probationers and **9** are tolling. A breakdown of the probation cases is as follows:

Field Office	Active Probationers	Tolling Probationers
Sacramento IAU	30	0
Sacramento Field Office	10	4
Orange IAU	52	4
Orange Field Office	26	1
Total	118	9



MEMORANDUM

DATE	January 18, 2024
TO	Members of the Dental Board of California
FROM	Christy Bell, Assistant Executive Officer Dental Board of California
SUBJECT	Agenda Item 9.a.: Diversion Program Report and Statistics

Background

The Diversion Evaluation Committee (DEC) program statistics for the quarter ending on December 31, 2023 are provided below. These statistics reflect the participant activity in the Diversion (Recovery) Program and are presented for informational purposes only.

These statistics were derived from reports received from MAXIMUS.

Diversion	FY 2023/2024						YTD Totals	FY 22/23	FY 21/22	FY 20/21
	Quarter 1			Quarter 2						
	Jul	Aug	Sep	Oct	Nov	Dec				
New Participants	0	0	0	1	0	0	1	3	3	3
Total Participants (Close of Qtr/FY)	5	5	5	5	5	5		7	7	9
Self-Referral	1	1	1	1	1	1		5	5	5
Enforcement Referral	1	1	1	1	1	1		2	2	2
Probation Referral	3	3	3	4	3	3		5	5	5
Total Completed Cases	1	0	0	1	0	0	2	0	1	2
Successful Completions	1	0	0	1	0	0	2	0	1	2
Terminations	1	0	0	0	0	0	1	2	3	1
Terminations for Public Threat	0	0	0	0	0	0	0	0	1	0
Withdrawn	1	0	0	0	0	0	1	1	2	0
Drug Tests Ordered	21	25	19	19	25	24	133	344	350	419
Positive Drug Tests	0	0	0	0	0	0	0	3	6	1
Prescription Positive Tests	0	0	0	0	0	0	0	6	5	4

Action Requested

No action requested.

Agenda Item 9.a.: Diversion Program Report and Statistics
Dental Board of California Meeting
February 9, 2024

Page 1 of 1



MEMORANDUM

DATE	January 17, 2024
TO	Members of the Dental Board of California
FROM	Carlos Alvarez, Chief, Southern California Enforcement Dental Board of California
SUBJECT	Agenda Item 9.b.: Controlled Substance Utilization Review and Evaluation System Report

Background

The Controlled Substance Utilization Review and Evaluation System (CURES 2.0) is a database of Schedule II, III, and IV controlled substance and prescriptions dispensed in California. The goal of the CURES 2.0 system is the reduction of prescription drug abuse and diversion without affecting the legitimate medical practice or patient care. Prescribers were required to apply before July 1, 2016, or upon receipt of a federal Drug Enforcement Administration (DEA) registration, whichever occurs later. Registration requirements are not based on dispensing, prescribing, or administering activities but on possession of a Drug Enforcement Administration Controlled Substance Registration Certificate and valid California licensure as a Dentist, or other prescribing medical provider.

The Dental Board of California (Board) currently has 35,069 licensed dentists as of December 31, 2023.

Registration statistics for the Board as of December 31, 2023 are:

Month 2023	Number of Registered DDS/DMD Users
January	17,396
February	17,451
March	17,518
April	17,554
May	17,618
June	17,656
July	17,711
August	17,778
September	17,841
October	17,900
November	17,940
December	17,985

Search statistics for the Board as of December 31, 2023 are:

Month 2023	Search Statistics
January	20,136
February	21,858
March	27,173
April	25,723
May	25,902
June	24,658
July	23,244
August	26,886
September	21,584
October	26,471
November	27,617
December	24,848

Number of Outbound Searches

Month 2023	Interstate Outbound Search Statistics
April	0
May	0
June	138
July	32
August	51
September	5
October	0
November	16
December	23

Number of Inbound Interstate Searches

Month 2023	Inbound Interstate Search Statistics
January	0
February	0
March	0
April	0
May	0
June	0
July	0
August	0
September	0
October	0
November	0
December	0

System accessed statistics for the Board as of March 2022 are:

Month 2022	Times System was Accessed (total number of web application and information exchange web services)
January	3,747
February	3,661
March	4,433

Note: This data has not been available since March 2022 due to a CURES software update. Statistics for **Times System was Accessed** is no longer being tracked.

Help Desk statistics for the Board as of December 31, 2023 are:

Month 2023	Help Desk Statistics (total number of email and telephone inquiries)
January	78
February	80
March	89
April	72
May	175
June	82
July	70
August	76
September	87
October	98
November	58
December	69

The number of prescriptions filled by schedule for the months of October, November, and December 2023 are:

DCA Number of Prescriptions Filled by Schedule for October – December 2023

	<u>October</u>	<u>November</u>	<u>December</u>
Schedule II	1,281,700	1,238,194	1,227,109
Schedule III	245,360	238,361	232,657
Schedule IV	1,089,121	1,048,563	1,032,511
Schedule V	149,363	156,414	173,224
R	16	5	3
Over-the-Counter Product	64,299	59,830	59,718
Total:	2,829,859	2,741,367	2,725,222

Notes:

1. Each component of a compound is submitted as a separate prescription record. The number of distinct prescriptions rolls compound prescriptions into a single count.
2. The number of distinct prescriptions and the number of prescriptions filled by schedule will not be equal because a compound can consist of multiple drugs with varying schedules.
3. R=Not classified under the Controlled Substances Act; includes all other prescription drugs.
4. Over-the-counter product.

Action Requested

No action requested.



November 2023 Statistics

Registered Users		November
Clinical Roles		
Prescribers		187,459
Non-DEA Practitioner		15,575
Pharmacists		52,153
Clinical Roles		255,187
License Type		
Doctor of Dental Surgery/Dental Medicine		17,940
Doctor of Optometry		714
Doctor of Podiatric Medicine		1,720
Doctor of Veterinary Medicine		3,881
Medical Doctor/Non-DEA		128,481
Naturopathic Doctor		545
Osteopathic Doctor/Non-DEA		10,386
Physician Assistant		14,420
Registered Nurse Practitioner/Nurse Midwife		24,311
(Out of State) Prescribers		636
Pharmacists		51,284
(Out of State) Pharmacists		869
License Type		255,187
Other Roles		
LEAs		1,732
Delegates		4,839
DOJ Administrators		67
DOJ Analysts		90
Regulatory Board		270
Other Roles		6,998
Total Registered Users		262,185

Note:

Clinical Roles = License Type

Total = Clinical Roles + License Type

Stats are from the 1st of the month to the last day of the month



November 2023 Statistics

Number of CURES Searches					November	
				App PAR Searches	IEWS PAR Searches	Totals
Clinical Roles		Delegate				
	Prescribers	980,789	70,916	8,111,879	9,163,584	
	Non-DEA Practitioner	1,102	41	5,136	6,279	
	Pharmacists	1,267,586	11,429	5,933,186	7,212,201	
	Clinical Roles	2,249,477	82,386	14,050,201	16,382,064	
License Type						
	Doctor of Dental Surgery/Dental Medicine	6,889	210	20,502	27,601	
	Doctor of Optometry	1	0	1,417	1,418	
	Doctor of Podiatric Medicine	1,263	16	26,817	28,096	
	Doctor of Veterinary Medicine	84	3	0	87	
	Medical Doctor/Non-DEA	570,668	39,822	6,547,157	7,157,647	
	Naturopathic Doctor	1,409	384	344	2,137	
	Osteopathic Doctor	90,314	4,027	612,984	707,325	
	Physician Assistant	104,413	11,679	421,699	537,791	
	Registered Nurse Practitioner/Nurse					
	Midwife	204,103	14,744	486,095	704,942	
	(Out of State) Prescribers	2,747	72	0	2,819	
	Pharmacists	1,258,177	10,931	5,915,654	7,184,762	
	(Out of State) Pharmacists	9,409	498	17,532	27,439	
	License Type	2,249,477	82,386	14,050,201	16,382,064	
Other Roles						
	LEAs	169	N/A	N/A	169	
	DOJ Administrators	83	N/A	N/A	83	
	DOJ Analysts	1	N/A	N/A	1	
	Regulatory Board	1307	N/A	N/A	1,307	
	Other Roles	1,560			1,560	
Total Search Counts					16,383,624	
<i>Note:</i>						
<i>Clinical Roles = License Type</i>						
<i>Total Search Counts = Clinical Roles + Other Roles + Searches by Delegates</i>						
<i>Stats are from the 1st of the month to the last day of the month</i>						



November 2023 Statistics

Number of Outbound Interstate Searches				
				November
				Totals
		Outbound Interstate PAR Searches		
		App PAR Searches	IEWS	
Clinical Roles		Delegate		
Prescribers		1,591	911	2,502
Non-DEA Practitioner		1	0	1
Pharmacists		1,640	9	1,649
Clinical Roles		3,232	920	0
License Type				
Doctor of Dental Surgery/Dental Medicine		16	0	16
Doctor of Optometry		0	0	0
Doctor of Podiatric Medicine		2	0	2
Doctor of Veterinary Medicine		0	0	N/A
Medical Doctor/Non-DEA		805	873	1,678
Naturopathic Doctor		3	0	3
Osteopathic Doctor		113	7	120
Physician Assistant		221	9	230
Midwife		432	22	454
(Out of State) Prescribers		0	0	N/A
Pharmacists		1,552	9	1,561
(Out of State) Pharmacists		88	0	88
License Type		3,232	920	0

Note: Not all CURES users will have authority to query other states/PDMPs.
 Outbound Searches are searches sent by CURES users to another State/PDMP.

Number of Inbound Interstate Searches		
		November
		Totals
		Oregon
PMIX Role		
Advanced Practice Rns		0
Dentists		0
Interns		0
Naturopaths		0
Optometrists		0
Pharmacists		0
Physician		0
Physician Assistants		0
Residents		0
PMIX Role		0
Total Search Counts		0

Note:
 Inbound Searches are searches originating from outside of CURES
 PMIX = The Prescription Monitoring Information Exchange National Architecture
 Stats are from the 1st of the month to the last day of the month



November 2023 Statistics

Number of CURES Help Desk Requests			November	
			Phone	Email
Clinical Roles				
	Prescribers/Non-DEA		1,097	375
	Pharmacists		405	75
		Clinical Roles	1,502	450
License Type				
	Doctor of Dental Surgery/Dental Medicine		36	22
	Doctor of Optometry		2	1
	Doctor of Podiatric Medicine		5	0
	Doctor of Veterinary Medicine		31	5
	Medical Doctor/Non-DEA Practitioner		715	285
	Naturopathic Doctor		4	3
	Osteopathic Doctor/Non-DEA Practitioner		67	16
	Physician Assistant		83	12
	Registered Nurse Practitioner/Nurse Midwife		154	31
	Pharmacists		405	75
	Out of State Licensed User		0	0
		License Type	1,502	450
Other Roles				
	LEAs		17	40
	Delegates		47	20
	DOJ Administrators		0	0
	DOJ Analysts		0	0
	Regulatory Board		5	7
		Other Roles	69	67
Totals			1,571	517

Note:

Clinical Roles = License Type

Total = Clinical Roles + License Type

Stats are from the 1st of the month to the last day of the month

add note about licesne type



November 2023 Statistics

	November
Number of Distinct Prescriptions	
Number of Prescriptions Filled by Schedule	
Schedule II	1,238,194
Schedule III	238,361
Schedule IV	1,048,563
Schedule V	156,414
R	5
Over-the-counter product	59,830
Total	2,741,367

Note:

1. Each component of a compound is submitted as a separate prescription record. The number of distinct prescriptions rolls compound prescriptions into a single count.
2. The number of distinct prescriptions and the number of prescriptions filled by schedule will not be equal because a compound can consist of multiple drugs with varying schedules.
3. R = Not classified under the Controlled Substances Act; includes all other prescription drugs



October 2023 Statistics

Registered Users		October
Clinical Roles		
Prescribers		186,975
Non-DEA Practitioner		15,267
Pharmacists		51,981
Clinical Roles		254,223
License Type		
Doctor of Dental Surgery/Dental Medicine		17,900
Doctor of Optometry		713
Doctor of Podiatric Medicine		1,717
Doctor of Veterinary Medicine		3,861
Medical Doctor/Non-DEA		128,090
Naturopathic Doctor		538
Osteopathic Doctor/Non-DEA		10,305
Physician Assistant		14,361
Registered Nurse Practitioner/Nurse Midwife		24,129
(Out of State) Prescribers		628
Pharmacists		51,126
(Out of State) Pharmacists		855
License Type		254,223
Other Roles		
LEAs		1,714
Delegates		4,731
DOJ Administrators		67
DOJ Analysts		90
Regulatory Board		266
Other Roles		6,868
Total Registered Users		261,091

Note:

Clinical Roles = License Type

Total = Clinical Roles + License Type

Stats are from the 1st of the month to the last day of the month



October 2023 Statistics

Number of CURES Searches					October	
				App PAR Searches	IEWS PAR Searches	Totals
Clinical Roles				Delegate		
Prescribers		1,020,900	70,965	10,470,779	11,562,644	
Non-DEA Practitioner		1,099	42	4,322	5,463	
Pharmacists		1,272,065	11,288	5,949,245	7,232,598	
Clinical Roles		2,294,064	82,295	16,424,346	18,800,705	
License Type						
Doctor of Dental Surgery/Dental Medicine		7,689	225	18,557	26,471	
Doctor of Optometry		0	0	1,216	1,216	
Doctor of Podiatric Medicine		1,395	12	30,020	31,427	
Doctor of Veterinary Medicine		104	0	0	104	
Medical Doctor/Non-DEA		588,129	38,978	6,875,160	7,502,267	
Naturopathic Doctor		1,622	310	435	2,367	
Osteopathic Doctor		95,039	3,916	2,355,630	2,454,585	
Physician Assistant		110,199	11,280	680,745	802,224	
Registered Nurse Practitioner/Nurse						
Midwife		215,266	16,202	513,338	744,806	
(Out of State) Prescribers		2,556	84	0	2,640	
Pharmacists		1,262,118	10,887	5,928,430	7,201,435	
(Out of State) Pharmacists		9,947	401	20,815	31,163	
License Type		2,294,064	82,295	16,424,346	18,800,705	
Other Roles						
LEAs		58	N/A	N/A	58	
DOJ Administrators		264	N/A	N/A	264	
DOJ Analysts		2	N/A	N/A	2	
Regulatory Board		941	N/A	N/A	941	
Other Roles		1,265			1,265	
Total Search Counts					18,801,970	

Note:

Clinical Roles = License Type

Total Search Counts = Clinical Roles + Other Roles + Searches by Delegates

Stats are from the 1st of the month to the last day of the month



October 2023 Statistics

Number of Outbound Interstate Searches						
				Outbound Interstate PAR Searches		October
				App PAR Searches	IEWS	Totals
Clinical Roles		Delegate				
	Prescribers	0	0	0		0
	Non-DEA Practitioner	0	0	0		0
	Pharmacists	0	0	0		0
	Clinical Roles	0	0	0		0
License Type						
	Doctor of Dental Surgery/Dental Medicine	0	0	0		0
	Doctor of Optometry	0	0	0		0
	Doctor of Podiatric Medicine	0	0	0		0
	Doctor of Veterinary Medicine	0	0	N/A		N/A
	Medical Doctor/Non-DEA	0	0	0		0
	Naturopathic Doctor	0	0	0		0
	Osteopathic Doctor	0	0	0		0
	Physician Assistant	0	0	0		0
	Midwife	0	0	0		0
	(Out of State) Prescribers	0	0	N/A		N/A
	Pharmacists	0	0	0		0
	(Out of State) Pharmacists	0	0	0		0
	License Type	0	0	0		0

Note: Not all CURES users will have authority to query other states/PDMPs.
 Outbound Searches are searches sent by CURES users to another State/PDMP.

Number of Inbound Interstate Searches				
			October	
			Oregon	Totals
PMIX Role				
	Advanced Practice Rns			0
	Dentists			0
	Interns			0
	Naturopaths			0
	Optometrists			0
	Pharmacists			0
	Physician			0
	Physician Assistants			0
	Residents			0
	PMIX Role			0
Total Search Counts				0

Note:
 Inbound Searches are searches originating from outside of CURES
 PMIX = The Prescription Monitoring Information Exchange National Architecture
 Stats are from the 1st of the month to the last day of the month



October 2023 Statistics

Number of CURES Help Desk Requests			October	
			Phone	Email
Clinical Roles				
	Prescribers/Non-DEA		2,009	937
	Pharmacists		1601	1,514
		Clinical Roles	3,610	2,451
License Type				
	Doctor of Dental Surgery/Dental Medicine		70	28
	Doctor of Optometry		1	1
	Doctor of Podiatric Medicine		6	0
	Doctor of Veterinary Medicine		36	7
	Medical Doctor/Non-DEA Practitioner		1,374	751
	Naturopathic Doctor		0	1
	Osteopathic Doctor/Non-DEA Practitioner		96	27
	Physician Assistant		140	24
	Registered Nurse Practitioner/Nurse Midwife		286	98
	Pharmacists		1,601	1,514
	Out of State Licensed User		0	0
		License Type	3,610	2,451
Other Roles				
	LEAs		11	26
	Delegates		61	42
	DOJ Administrators		0	0
	DOJ Analysts		0	0
	Regulatory Board		3	7
		Other Roles	75	75
Totals			3,685	2,526

Note:

Clinical Roles = License Type

Total = Clinical Roles + License Type

Stats are from the 1st of the month to the last day of the month

add note about licesne type



October 2023 Statistics

	October
Number of Distinct Prescriptions	2,827,993
Number of Prescriptions Filled by Schedule	
Schedule II	1,281,700
Schedule III	245,360
Schedule IV	1,089,121
Schedule V	149,363
R	16
Over-the-counter product	64,299
Total	2,829,859

Note:

1. Each component of a compound is submitted as a separate prescription record. The number of distinct prescriptions rolls compound prescriptions into a single count.
2. The number of distinct prescriptions and the number of prescriptions filled by schedule will not be equal because a compound can consist of multiple drugs with varying schedules.
3. R = Not classified under the Controlled Substances Act; includes all other prescription drugs

Registration Statistics

October – December 2023

		October 2023	November 2023	December 2023
Clinical Roles				
	Prescribers	186,975	187,459	187,664
	Non-DEA Practitioner	15,267	15,575	16,126
	Pharmacists	51,981	52,153	52,286
	Clinical Roles	254,223	255,187	256,076
License Type				
	Doctor of Dental Surgery/Dental Medicine	17,900	17,940	17,985
	Doctor of Optometry	713	714	717
	Doctor of Podiatric Medicine	1,717	1,720	1,727
	Doctor of Veterinary Medicine	3,861	3,881	3,947
	Medical Doctor	128,090	128,481	128,775
	Naturopathic Doctor	538	545	550
	Osteopathic Doctor	10,305	10,386	10,444
	Physician Assistant	14,361	14,420	14,511
	Registered Nurse Practitioner/Nurse Midwife	24,129	24,311	24,492
	(Out of State) Prescribers	628	636	642
	Pharmacists	51,126	51,284	51,385
	(Out of State) Pharmacists	855	869	901
	Breakdown by license type	254,223	255,187	256,076
Other Roles				
	LEAs	1,714	1,732	1,734
	Delegates	4,731	4,839	4,921
	DOJ Admin	67	67	67
	DOJ Analyst	90	90	90
	Regulatory Board	266	270	272
	Other Roles	6,868	6,998	7,084
Total Registered Users		261,091	262,185	263,160

Clinical Roles = Breakdown by license type

Clinical Roles + Other Roles = Total Registered Users

Stats are from the 1st of the month to the last day of the month



Search Statistics

October 2023

	Web Application	IEWS	Interstate Outbound	Totals	
Clinical Roles	Delegate				
Prescribers	1,020,900	70,965	10,470,779	0	11,562,644
Non-DEA Practitioner	1,099	42	4,322	0	5,463
Pharmacists	1,272,065	11,288	5,949,245	0	7,232,598
Clinical Roles	2,294,064	82,295	16,424,346	0	18,800,705
License Type					
Doctor of Dental Surgery/Dental Medicine	7,689	225	18,557	0	26,471
Doctor of Optometry	0	0	1,216	0	1,216
Doctor of Podiatric Medicine	1,395	12	30,020	0	31,427
Doctor of Veterinary Medicine	104	0	0	0	104
Medical Doctor	588,129	38,978	6,875,160	0	7,502,267
Naturopathic Doctor	1,622	310	435	0	2,367
Osteopathic Doctor	95,039	3,916	2,355,630	0	2,454,585
Physician Assistant	110,199	11,280	680,745	0	802,224
Registered Nurse Practitioner/Nurse Midwife	215,266	16,202	513,338	0	744,806
(Out of State) Prescribers	2,556	84	0	0	2,640
Pharmacists	1,262,118	10,887	5,928,430	0	7,201,435
(Out of State) Pharmacists	9,947	401	20,815	0	31,163
License Type	2,294,064	82,295	16,424,346	0	18,800,705
Other Roles					
LEAs	58	N/A	N/A	N/A	58
DOJ Administrators	264	N/A	N/A	N/A	264
DOJ Analysts	2	N/A	N/A	N/A	2
Regulatory Board	941	N/A	N/A	N/A	941
Other Roles	1,265				1,265
Total Search Counts					18,801,970

Note:

Search Counts is defined as searches performed in the system without generating the report.

Clinical Roles = License Type

Total Search Count = Clinical Roles + Other Roles



Search Statistics

	Web Application	IEWS	Interstate Outbound	Totals	
Clinical Roles	Delegate				
Prescribers	980,789	70,916	8,111,879	2,502	9,166,086
Non-DEA Practitioner	1,102	41	5,136	1	6,280
Pharmacists	1,267,586	11,429	5,933,186	1,649	7,213,850
Clinical Roles	2,249,477	82,386	14,050,201	4,152	16,386,216
License Type					
Doctor of Dental Surgery/Dental Medicine	6,889	210	20,502	16	27,617
Doctor of Optometry	1	0	1,417	0	1,418
Doctor of Podiatric Medicine	1,263	16	26,817	2	28,098
Doctor of Veterinary Medicine	84	3	0	N/A	87
Medical Doctor	570,668	39,822	6,547,157	1,678	7,159,325
Naturopathic Doctor	1,409	384	344	3	2,140
Osteopathic Doctor	90,314	4,027	612,984	120	707,445
Physician Assistant	104,413	11,679	421,699	230	538,021
Registered Nurse Practitioner/Nurse Midwife	204,103	14,744	486,095	454	705,396
(Out of State) Prescribers	2,747	72	0	N/A	2,819
Pharmacists	1,258,177	10,931	5,915,654	1,561	7,186,323
(Out of State) Pharmacists	9,409	498	17,532	88	27,527
License Type	2,249,477	82,386	14,050,201	4,152	16,386,216
Other Roles					
LEAs	169	N/A	N/A	N/A	169
DOJ Administrators	83	N/A	N/A	N/A	83
DOJ Analysts	1	N/A	N/A	N/A	1
Regulatory Board	1307	N/A	N/A	N/A	1307
Other Roles	1,560				1,560
Total Search Counts					16,387,776

Search Counts is defined as searches performed in the system without generating the report.

Clinical Roles = License Type

Total Search Count = Clinical Roles + Other Roles



Search Statistics

	Web Application	Delegate	IEWS	Interstate Outbound	Totals
Clinical Roles					
Prescribers	927,805	68,175	7,401,409	4,336	8,401,725
Non-DEA Practitioner	920	299	4,508	10	5,737
Pharmacists	1,262,425	11,755	5,922,067	6,843	7,203,090
Clinical Roles	2,191,150	80,229	13,327,984	11,189	15,610,552
License Type					
Doctor of Dental Surgery/Dental Medicine	5,963	178	18,684	23	24,848
Doctor of Optometry	0	0	1,283	0	1,283
Doctor of Podiatric Medicine	1,350	9	22,224	9	23,592
Doctor of Veterinary Medicine	56	0	0	N/A	56
Medical Doctor	537,481	39,000	5,828,288	4,945	6,409,714
Naturopathic Doctor	1,406	355	270	5	2,036
Osteopathic Doctor	81,063	4,077	544,986	249	630,375
Physician Assistant	103,381	10,868	539,302	412	653,963
Registered Nurse Practitioner/Nurse Midwife	195,414	13,850	450,880	1,139	661,283
(Out of State) Prescribers	2,611	137	0	N/A	2,748
Pharmacists	1,253,011	11,071	5,907,964	4,222	7,176,268
(Out of State) Pharmacists	9,414	684	14,103	185	24,386
License Type	2,191,150	80,229	13,327,984	11,189	15,610,552
Other Roles					
LEAs	79	N/A	N/A	N/A	79
DOJ Administrators	127	N/A	N/A	N/A	127
DOJ Analysts	2	N/A	N/A	N/A	2
Regulatory Board	1148	N/A	N/A	N/A	1,148
Other Roles	1,356				1,356
Total Search Counts					15,611,908

Search Counts is defined as searches performed in the system without generating the report.

Clinical Roles = License Type

Total Search Count = Clinical Roles + Other Roles



Help Desk Statistics

October – December 2023

		October		November		December	
		Phone	E-mail	Phone	E-mail	Phone	E-mail
Clinical Roles							
	Prescribers/Non-DEA Practitioners	2,009	937	1,097	375	1,591	390
	Pharmacists	1601	1,514	405	75	669	111
	Clinical Roles	3,610	2,451	1,502	450	2,260	501
License Type							
	Doctor of Dental Surgery/Dental Medicine	70	28	36	22	50	19
	Doctor of Optometry	1	1	2	1	0	0
	Doctor of Podiatric Medicine	6	0	5	0	10	4
	Doctor of Veterinary Medicine	36	7	31	5	23	8
	Medical Doctor	1,374	751	715	285	1,071	261
	Naturopathic Doctor	0	1	4	3	3	1
	Osteopathic Doctor	96	27	67	16	81	20
	Physician Assistant	140	24	83	12	104	23
	Registered Nurse Practitioner/Nurse Midwife	286	98	154	31	249	54
	Pharmacists	1,601	1,514	405	75	669	111
	(Out of State) Pharmacists	0	0	0	0	0	0
	License Type	3,610	2,451	1,502	450	2,260	501
Other Roles							
	LEAs	11	26	17	40	7	3
	Delegates	61	42	47	20	39	12
	DOJ Administrators	0	0	0	0	0	0
	DOJ Analysts	0	0	0	0	0	0
	Regulatory Board	3	7	5	7	3	7
	Other Roles	75	75	69	67	49	22
Totals		3,685	2,526	1,571	517	2,309	523

Clinical Roles = License Type
 Total Calls = Clinical Roles + Other Roles

Prescriptions Filled by Schedule

October – December 2023

Prescription Counts	October	November	December
Number of Distinct Prescriptions	2,827,993	2,739,987	2,723,624
Number of Prescriptions Filled by Schedule			
Schedule II	1,281,700	1,238,194	1,227,109
Schedule III	245,360	238,361	232,657
Schedule IV	1,089,121	1,048,563	1,032,511
Schedule V	149,363	156,414	173,224
R	16	5	3
Over-the-counter product	64,299	59,830	59,718
TOTAL	2,829,859	2,741,367	2,725,222

NOTE:

1. Each component of a compound is submitted as a separate prescription record. The number of distinct prescriptions rolls compound prescriptions into a single count
2. The number of distinct prescriptions and the number of prescriptions filled by schedule will not be equal because a compound can consist of multiple drugs with varying schedules
3. R = Not classified under the Controlled Substances Act; includes all other prescription drugs



MEMORANDUM

DATE	January 18, 2024
TO	Members of the Dental Board of California
FROM	Paige Ragali, Chief of Dental Programs and Customer Support Dental Board of California
SUBJECT	Agenda Item 10.a.: Update on Dental Licensure and Permit Statistics

Dental License Application Statistics

The following are monthly dental license application statistics by pathway for fiscal year 2020–21, 2021–22, 2022–23 and 2023–24 as of December 31, 2023.

***NOTE: Canceled and Withdrawn applications have been removed from reporting as they are used internally for cleanup and not pertinent to DBC reporting.**

Dental Applications Received by Month													
	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Totals
WREB 20/21	140	156	99	66	29	20	28	27	26	78	158	217	1,044
WREB 21/22	138	85	75	22	28	27	38	31	71	83	109	123	830
WREB 22/23	71	58	42	35	29	28	38	26	31	41	48	80	527
WREB 23/24	38	32	21	14	8	7	-	-	-	-	-	-	91
Residency 20/21	42	15	8	5	2	2	5	7	4	8	20	29	147
Residency 21/22	93	23	12	5	1	6	3	8	8	6	3	14	182
Residency 22/23	13	5	1	2	4	1	2	4	4	6	3	12	57
Residency 23/24	11	2	0	0	1	1	-	-	-	-	-	-	13
Credential 20/21	15	19	22	27	16	16	18	13	16	19	20	22	223
Credential 21/22	45	51	44	20	8	17	19	19	23	14	19	27	306
Credential 22/23	20	17	18	20	12	20	28	17	30	20	28	20	250
Credential 23/24	27	26	19	19	17	16	-	-	-	-	-	-	72
Portfolio 20/21	0	0	0	0	0	0	0	0	0	0	3	1	4
Portfolio 21/22	0	0	0	0	0	1	0	0	0	0	1	1	3
Portfolio 22/23	0	0	0	0	0	0	0	0	1	0	0	1	2
Portfolio 23/24	0	1	1	0	0	0	-	-	-	-	-	-	2
ADEX 20/21	22	28	9	16	4	5	9	3	17	41	112	87	353
ADEX 21/22	82	34	17	11	5	9	17	20	19	22	78	117	431
ADEX 22/23	69	51	23	22	17	12	30	18	55	118	137	188	740
ADEX 23/24	56	34	32	36	32	33	-	-	-	-	-	-	122

Agenda Item 10.a.: Update on Dental Licensure and Permit Statistics
Dental Board of California Meeting
February 9, 2024

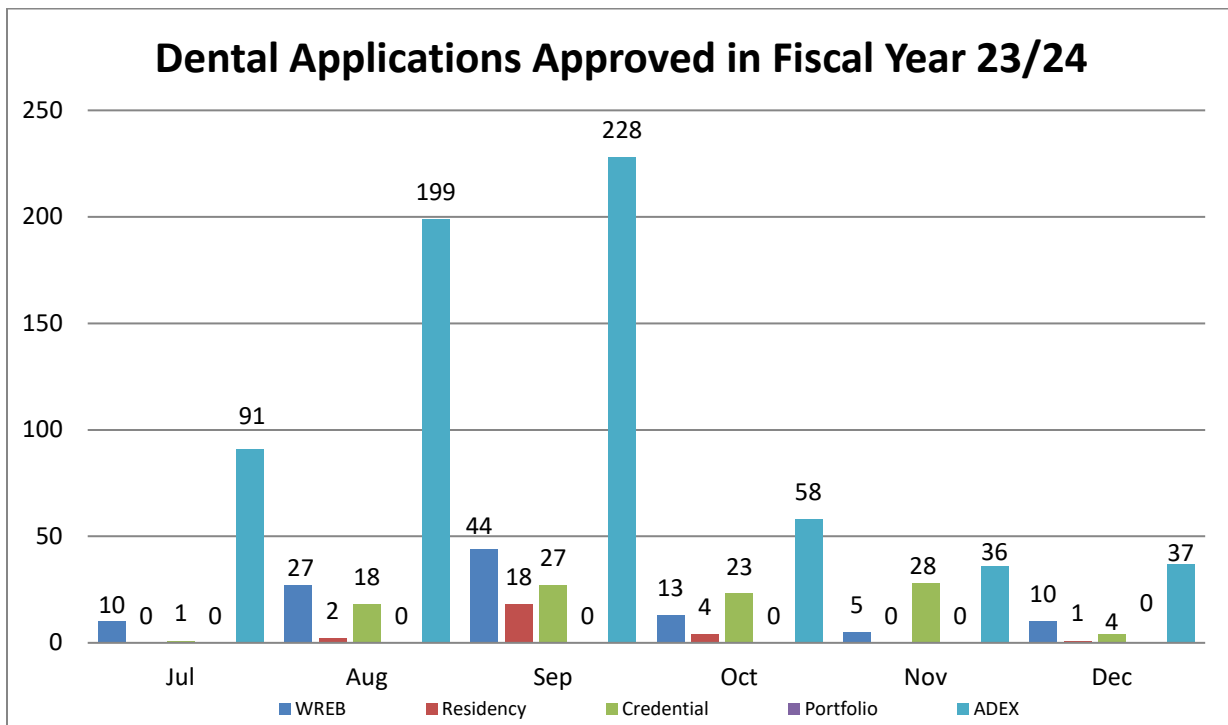
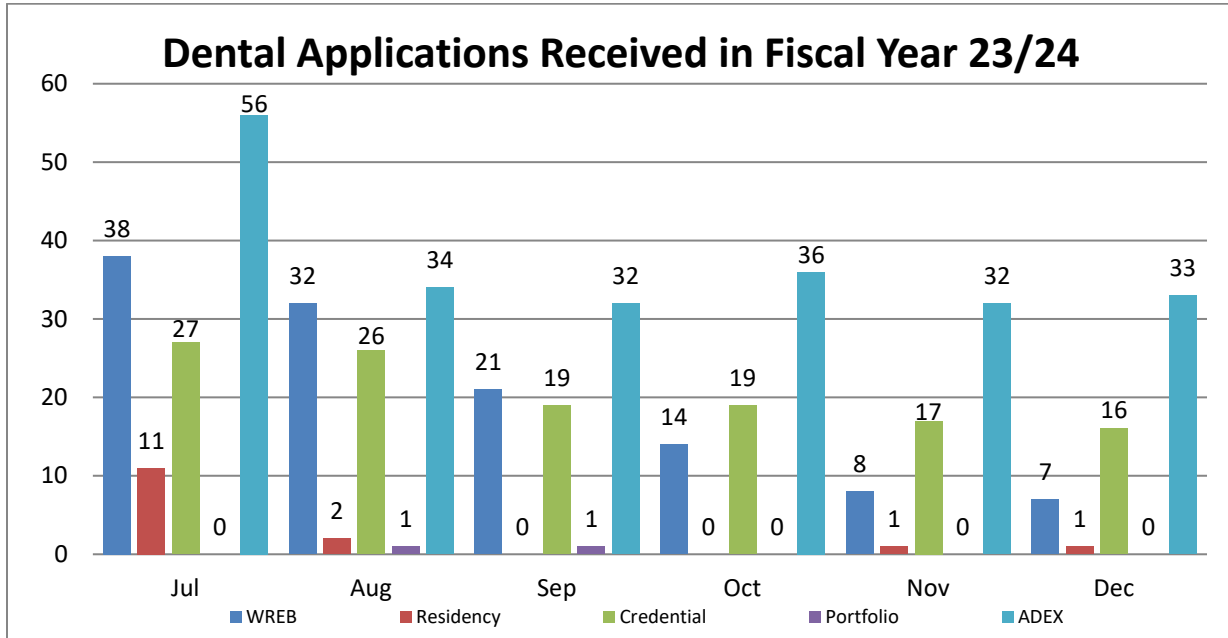
Dental Applications Approved by Month													
	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Totals
WREB 20/21	135	199	140	100	37	61	38	41	16	14	14	150	945
WREB 21/22	367	128	98	29	12	48	44	35	21	20	29	48	879
WREB 22/23	79	134	135	58	18	43	35	39	17	20	25	18	621
WREB 23/24	10	27	44	13	5	10	-	-	-	-	-	-	81
Residency 20/21	25	49	16	8	5	4	3	4	1	3	2	5	125
Residency 21/22	110	54	27	12	6	7	2	4	0	1	7	5	235
Residency 22/23	2	18	14	5	1	1	3	2	3	1	4	1	55
Residency 23/24	0	2	18	4	0	1	-	-	-	-	-	-	20
Credential 20/21	9	25	25	20	16	14	24	10	23	22	16	16	220
Credential 21/22	36	60	38	20	9	19	9	13	14	4	24	5	251
Credential 22/23	11	18	24	21	13	29	13	28	13	17	16	12	215
Credential 23/24	1	18	27	19	17	16	-	-	-	-	-	-	46
Portfolio 20/21	0	0	0	0	0	0	0	0	0	0	0	4	4
Portfolio 21/22	0	0	0	0	0	0	0	0	0	0	0	0	0
Portfolio 22/23	0	0	0	0	0	0	0	0	0	0	0	0	0
Portfolio 23/24	0	0	0	0	0	0	-	-	-	-	-	-	0
ADEX 20/21	2	24	17	19	10	6	6	4	2	7	10	93	200
ADEX 21/22	189	79	43	21	4	7	13	5	3	5	16	31	416
ADEX 22/23	43	95	98	40	14	23	23	25	16	22	34	52	485
ADEX 23/24	91	199	228	58	36	37	-	-	-	-	-	-	518
Dental Licenses Issued by Month													
	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Totals
WREB 20/21	133	190	140	90	41	59	39	38	23	21	16	115	905
WREB 21/22	198	71	48	35	14	42	35	28	22	20	24	51	588
WREB 22/23	71	127	131	58	27	39	30	40	18	16	32	20	609
WREB 23/24	14	26	46	11	5	9	-	-	-	-	-	-	86
Residency 20/21	27	49	16	9	6	3	3	2	2	5	1	7	130
Residency 21/22	51	30	15	12	6	5	4	2	1	3	7	5	141
Residency 22/23	3	15	12	6	2	2	3	2	1	1	3	2	52
Residency 23/24	1	2	18	4	0	1	-	-	-	-	-	-	40
Credential 20/21	9	22	24	22	19	11	20	11	20	20	17	16	211
Credential 21/22	8	16	22	19	10	19	11	9	9	4	18	10	155
Credential 22/23	8	19	23	23	12	18	18	25	12	16	18	18	210
Credential 23/24	4	14	22	23	28	4	-	-	-	-	-	-	40
Portfolio 20/21	0	0	0	0	0	0	0	0	0	0	0	4	4
Portfolio 21/22	0	0	0	0	0	0	0	0	0	0	0	0	0

Portfolio 22/23	0	0	0	0	0	0	0	0	0	0	0	0	0
Portfolio 23/24	0	0	0	0	0	0	-	-	-	-	-	-	0
ADEX 20/21	2	25	17	17	10	5	4	3	4	7	11	75	180
ADEX 21/22	107	40	22	23	6	7	9	5	5	5	17	26	272
ADEX 22/23	39	94	96	40	20	22	19	24	17	23	33	53	480
ADEX 23/24	80	190	217	57	43	38	-	-	-	-	-	-	487
Denied Dental Applications by Month													
	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Totals
WREB 20/21	38	31	3	2	2	0	1	1	0	1	3	0	82
WREB 21/22	1	1	0	0	1	2	0	1	0	0	0	0	6
WREB 22/23	0	2	1	1	0	0	0	1	0	0	0	0	5
WREB 23/24	0	0	0	0	0	0	-	-	-	-	-	-	13
Residency 20/21	8	0	0	0	2	0	1	0	0	0	1	1	13
Residency 21/22	0	0	0	0	0	1	0	1	0	0	0	0	2
Residency 22/23	0	0	0	0	0	0	0	0	0	0	0	0	0
Residency 23/24	0	0	1	0	0	0	-	-	-	-	-	-	1
Credential 20/21	0	2	1	1	0	0	1	0	0	0	1	0	6
Credential 21/22	2	0	0	2	1	0	1	0	0	0	0	0	6
Credential 22/23	0	0	1	2	0	0	0	0	0	1	0	1	5
Credential 23/24	0	0	0	0	0	0	-	-	-	-	-	-	1
Portfolio 20/21	0	0	0	0	0	0	0	0	0	0	0	0	0
Portfolio 21/22	0	0	0	0	0	0	0	0	0	0	0	0	0
Portfolio 22/23	0	0	0	0	0	0	0	0	0	0	0	0	0
Portfolio 23/24	0	0	0	0	0	0	-	-	-	-	-	-	0
ADEX 20/21	8	2	0	0	0	0	0	0	1	0	0	1	12
ADEX 21/22	0	0	0	0	0	0	0	1	0	0	0	0	1
ADEX 22/23	0	0	0	0	0	0	2	0	3	0	0	0	5
ADEX 23/24	0	0	0	0	0	0	-	-	-	-	-	-	18

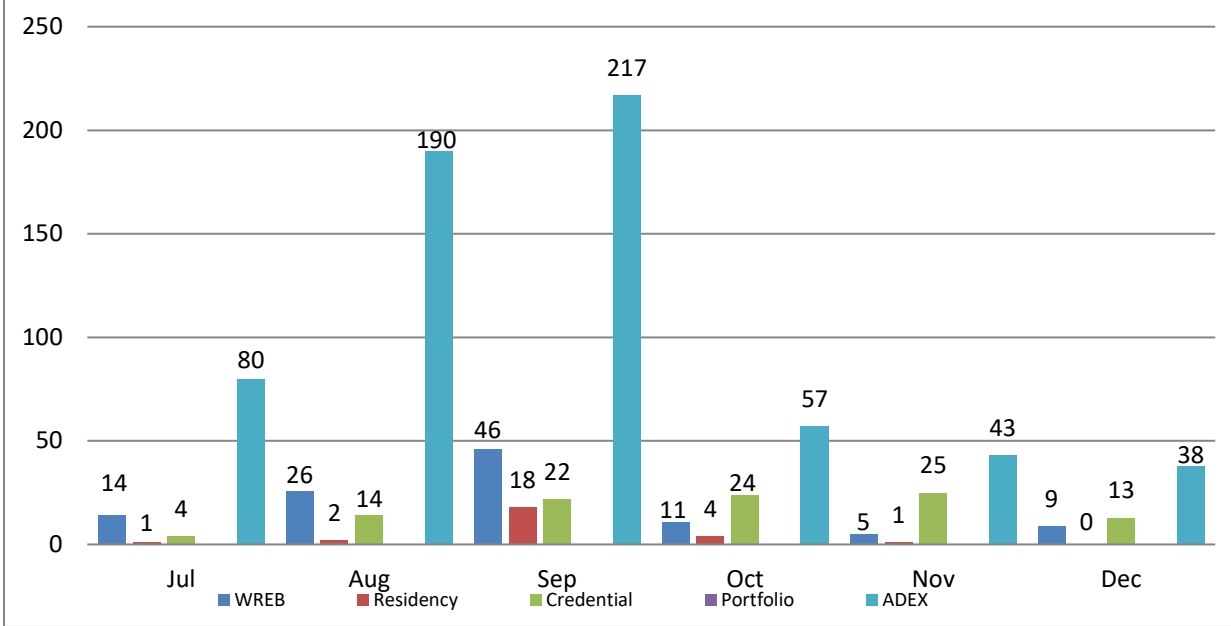
Application Definitions	
Received	Application submitted in physical form or digitally through Breeze system.
Approved	Application for eligibility of licensure processed with all required documentation.
License Issued	Application processed with required documentation and paid prorated fee for initial license.
Denied	The Board denies an application on the on the grounds that the applicant has been convicted of a crime or has been subject to formal discipline; in accordance with Business and Professions Code, Division 1.5, Chapter 2, Denial of Licenses.

Dental License Application Statistic Graphs

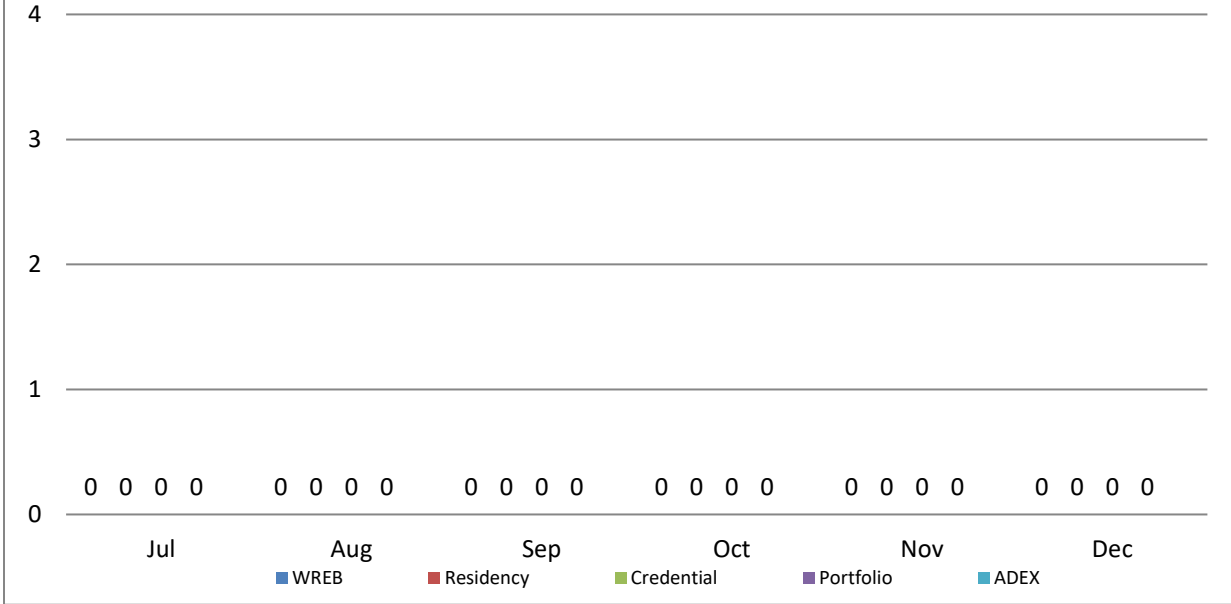
The following graphs represent monthly dental license application statistics by pathway for fiscal year 2023-24 as of December 31, 2023.



Dental Licenses Issued in Fiscal Year 23/24



Denied Dental Applications in Fiscal Year 23/24



Dental Law and Ethics Written Examination Statistics

License Type	DDS				
Exam Title	Dental Law and Ethics Examination				
Licensure Pathway		WREB	LBR	PORT	ADEX
2020/21	# of 1 st Time Candidates	824	89	4	232
	Pass %	86.89%	91.01%	50.00%	82.33%
2021/22	# of 1 st Time Candidates	326	61	0	164
	Pass %	72.70%	77.05%	N/A	79.88%
2022/23	# of 1 st Time Candidates	247	21	N/A	230
	Pass %	77.67%	91.30%	N/A	82.73%
2023/24	# of 1 st Time Candidates	44	6	N/A	285
	Pass %	97.73%	100.00%	N/A	92.28%
Date of Last Occupational Analysis: 2018					
Name of Developer: Office of Professional Examination Services					
Target Occupational Analysis Date: 2025					

Dental License and Permits Statistics

The following table provides statistics on dental licenses issued by pathway to licensure by fiscal year 2020–21, 2021–22, 2022–23 and 2023–24 as of December 31, 2023.

Dental Licenses Issued via Pathway	Total Issued in 20/21	Total Issued in 21/22	Total Issued 22/23	Total Issued 23/24	Total Issued to Date	Date Pathway Implemented
WREB Exam	905	588	609	111	12,785	January 1, 2006
Licensure by Residency	130	141	52	26	2,391	January 1, 2007
Licensure by Credential	211	155	210	102	3,746	July 1, 2002
(LBC Clinic Contract)	14	14	13	12	77	July 1, 2002
(LBC Faculty Contract)	6	1	5	1	23	July 1, 2002
Portfolio	4	0	0	0	79	November 5, 2014
ADEX	180	272	480	626	2,054	November 15, 2019
Total	1,430	1,156	1,351	878	21,155	

The following table provides statistics on dental license and permit status statistics by fiscal year 2020–21, 2021–22, 2022–23 and 2023–24 as of December 31, 2023.

License Type	License Status	FY 20/21	FY 21/22	FY 22/23	FY 23/24
Dental License	Active	34,922	34,619	34,710	35,069
	Inactive	1,751	1,727	1,691	1,682
	Retired/ReducedFee	1,297	1,251	1,168	1,164
	Disabled	98	95	87	88
	Delinquent	5,540	6,002	6,180	6,187
	Cancelled	18,720	19,604	20,703	21,212
License Type	License Status	FY 20/21	FY 21/22	FY 22/23	FY 23/24
Additional Office Permit	Active	2,750	2,556	2,375	2,437
	Delinquent	992	1,204	1,390	1,357
	Cancelled	7,181	7,418	7,726	7,838
License Type	License Status	FY 20/21	FY 21/22	FY 22/23	FY 23/24
Conscious Sedation	Active	543	554	380	251
	Delinquent	43	63	219	241
	Cancelled	586	606	625	732
License Type	License Status	FY 20/21	FY 21/22	FY 22/23	FY 23/24
Continuing Education Registered Provider Permit	Active	854	744	746	740
	Delinquent	744	776	660	635
	Cancelled	2,344	2,471	2,663	2,721

License Type	License Status	FY 20/21	FY 21/22	FY 22/23	FY 23/24
Elective Facial Cosmetic Surgery Permit	Active	30	29	27	27
	Delinquent	5	6	6	6
	Cancelled	2	3	4	5
License Type	License Status	FY 20/21	FY 21/22	FY 22/23	FY 23/24
Extramural Facility Registration*	Active	203	205	60	62
	Delinquent	N/A	N/A	N/A	N/A
	Cancelled	N/A	N/A	N/A	N/A
License Type	License Status	FY 20/21	FY 21/22	FY 22/23	FY 23/24
Fictitious Name Permit	Active	7,250	6,782	6,485	6,724
	Delinquent	1,782	2,394	2,855	2,755
	Cancelled	7,361	7,808	8,350	8,595
License Type	License Status	FY 20/21	FY 21/22	FY 22/23	FY 23/24
General Anesthesia Permit	Active	918	925	949	945
	Delinquent	31	38	41	46
	Cancelled	1,042	1,067	1,095	1,109
License Type	License Status	FY 20/21	FY 21/22	FY 22/23	FY 23/24
Mobile Dental Clinic Permit	Active	55	44	45	45
	Delinquent	29	44	39	39
	Cancelled	78	81	88	93
License Type	License Status	FY 20/21	FY 21/22	FY 22/23	FY 23/24
Medical General Anesthesia	Active	136	156	153	144
	Delinquent	30	27	32	35
	Cancelled	211	226	242	257
License Type	License Status	FY 20/21	FY 21/22	FY 22/23	FY 23/24
Moderate Sedation Permit	Active	N/A	N/A	192	323
	Delinquent	N/A	N/A	1	2
	Cancelled	N/A	N/A	3	12
License Type	License Status	FY 20/21	FY 21/22	FY 22/23	FY 23/24
Oral Conscious Sedation Certification (Adult Only 1,170; Adult & Minors 657)	Active	2,391	2,352	1,971	1,680
	Delinquent	638	702	386	397
	Cancelled	1,096	1,185	1,960	2,305
License Type	License Status	FY 20/21	FY 21/22	FY 22/23	FY 23/24
Oral and Maxillofacial Surgery Permit	Active	93	94	96	95
	Delinquent	10	10	9	10
	Cancelled	22	25	27	27
License Type	License Status	FY 20/21	FY 21/22	FY 22/23	FY 23/24
Pediatric Minimal Sedation Permit	Active	N/A	N/A	102	228
	Delinquent	N/A	N/A	1	2
	Cancelled	N/A	N/A	0	0

License Type	License Status	FY 20/21	FY 21/22	FY 22/23	FY 23/24
Referral Service Registration*	Active	159	161	7	7
	Delinquent	N/A	N/A	0	0
	Cancelled	N/A	N/A	2	2
License Type	License Status	FY 20/21	FY 21/22	FY 22/23	FY 23/24
Special Permit	Active	35	35	34	36
	Delinquent	9	7	6	7
	Cancelled	190	195	203	205
Status Definitions					
Active	Current and can practice without restrictions (<i>BPC §1625</i>)				
Inactive	Current but cannot practice, continuing education not required (<i>CCR §1017.2</i>)				
Retired/Reduced Fee	Current, has practiced over 20 years, eligible for Social Security and can practice with restrictions (<i>BPC §1716.1a</i>)				
Disabled	Current with disability but cannot practice (<i>BPC §1716.1b</i>)				
Delinquent	Renewal fee not paid within one month after expiration date (<i>BPC §163.5</i>)				
Cancelled	Renewal fee not paid 5 years after its expiration and may not be renewed (<i>BPC §1718.3a</i>) Total number of licenses / permits cancelled to date.				

The following table provides statistics on population (Pop.), current & active dental licenses by County, and population (Pop.) per dental license by County in 2020–21, 2021–22, 2022–23 and 2023–24 as of September 30, 2023.

County	DDS per County in 2021/22	Pop. in 2021/22	Pop. per DDS in 2021/22	DDS per County in 2022/23	Pop. in 2022/23	Pop. per DDS in 2022/23	DDS per County in 2023/24	Pop. in 2023/24	Pop. per DDS in 2023/24
Alameda	1,492	1,651,979	1,107	1,485	1,651,979	1,112	1,508	1,651,979	1,095
Alpine	1	1,200	1,200	0	1,200	0	0	1,200	0
Amador	22	40,297	1,831	21	40,297	1,918	20	40,297	2,014
Butte	124	201,608	1,666	124	201,608	1,625	122	201,608	1,652
Calaveras	18	45,049	2,516	21	45,049	2,145	23	45,049	1,958
Colusa	6	21,807	3,639	6	21,807	3,634	6	21,807	3,634
Contra Costa	1,098	1,156,555	1,065	1,103	1,156,555	1,048	1,093	1,156,555	1,058
Del Norte	13	27,218	1,981	11	27,218	2,474	11	27,218	2,474
El Dorado	157	190,465	1,213	152	190,465	1,253	150	190,465	1,269
Fresno	613	1,011,273	1,649	620	1,011,273	1,631	636	1,011,273	1,590
Glenn	6	28,750	4,791	7	28,750	4,107	7	28,750	4,107
Humboldt	64	135,168	2,099	63	135,168	2,145	65	135,168	2,079
Imperial	38	179,329	4,719	39	179,329	4,598	38	179,329	4,719
Inyo	8	18,978	2,372	5	18,978	3,795	6	18,978	3,163
Kern	340	909,813	2,605	341	909,813	2,668	336	909,813	2,707
Kings	49	152,023	2,209	61	152,023	2,492	58	152,023	2,621
Lake	26	67,407	1,450	39	67,407	1,728	36	67,407	1,872
Lassen	23	30,274	1,363	22	30,274	1,376	21	30,274	1,441
Los Angeles	8,418	9,861,224	1,184	8,416	9,861,224	1,171	8,491	9,861,224	1,161
Madera	45	157,396	3,720	44	157,396	3,577	44	157,396	3,577
Marin	308	257,135	860	290	257,135	886	291	257,135	883
Mariposa	7	17,045	2,435	7	17,045	2,435	7	17,045	2,435
Mendocino	54	89,999	1,666	49	89,999	1,836	49	89,999	1,836
Merced	97	284,338	3,023	92	284,338	3,090	99	284,338	2,872

County	DDS per County in 2021/22	Pop. in 2021/22	Pop. per DDS in 2021/22	DDS per County in 2022/23	Pop. in 2022/23	Pop. per DDS in 2022/23	DDS per County in 2023/24	Pop. in 2023/24	Pop. per DDS in 2023/24
Modoc	3	8,690	1,740	3	8,690	2,896	4	8,690	2,172
Mono	5	13,379	2,675	5	13,379	2,675	5	13,379	2,675
Monterey	257	433,716	1,669	248	433,716	1,748	244	433,716	1,777
Napa	112	136,179	1,215	110	136,179	1,237	106	136,179	1,284
Nevada	77	101,242	1,294	72	101,242	1,406	71	101,242	1,425
Orange	4,059	3,162,245	788	4,073	3,162,245	776	4,157	3,162,245	760
Placer	466	409,025	879	472	409,025	866	469	409,025	872
Plumas	14	18,942	1,353	13	18,942	1,457	13	18,942	1,457
Riverside	1,122	2,435,525	2,170	1,142	2,435,525	2,132	1,171	2,435,525	2,079
Sacramento	1,175	1,576,618	1,344	1,176	1,576,618	1,340	1,200	1,576,618	1,313
San Benito	24	65,479	3,057	23	65,479	2,846	25	65,479	2,619
San Bernardino	1,370	2,187,665	1,572	1,398	2,187,665	1,564	1,427	2,187,665	1,533
San Diego	2,764	3,287,306	1,187	2,820	3,287,306	1,165	2,858	3,287,306	1,150
San Francisco	1,175	842,754	730	1,151	842,754	732	1,142	842,754	737
San Joaquin	371	784,298	2,114	376	784,298	2,085	394	784,298	1,990
San Luis Obispo	207	280,721	1,357	210	280,721	1,336	211	280,721	1,330
San Mateo	853	744,662	900	843	744,662	883	834	744,662	892
Santa Barbara	312	445,164	1,436	307	445,164	1,450	312	445,164	1,426
Santa Clara	2,284	1,894,783	848	2,289	1,894,783	827	2,301	1,894,783	823
Santa Cruz	166	255,564	1,651	168	255,564	1,586	172	255,564	1,485
Shasta	107	180,531	1,718	100	180,531	1,805	103	180,531	1,752
Sierra	0	3,229	0	0	3,229	0	0	3,229	0
Siskiyou	21	43,830	2,003	23	43,830	1,905	23	43,830	1,905
Solano	282	447,241	1,574	279	447,241	1,603	278	447,241	1,608
Sonoma	383	482,404	1,256	382	482,404	1,262	375	482,404	1,286
Stanislaus	271	549,466	2,017	274	549,466	2,005	281	549,466	1,955
Sutter	52	99,145	1,879	51	99,145	1,944	49	99,145	2,023

County	DDS per County In 2021/22	Pop. In 2021/22	Pop. per DDS in 2021/22	DDS per County in 2022/23	Pop. In 2022/23	Pop. per DDS in 2021/22	DDS per County in 2023/24	Pop. in 2023/24	Pop. per DDS in 2023/24
Tehama	31	65,052	2,194	31	65,052	2,194	29	65,052	2,243
Trinity	3	16,023	5,341	3	16,023	5,341	2	16,023	8,011
Tulare	218	475,014	2,131	217	475,014	2,131	216	475,014	2,199
Tuolumne	48	55,291	1,209	47	55,291	1,209	48	55,291	1,151
Ventura	666	833,652	1,265	627	833,652	1,265	636	833,652	1,310
Yolo	118	221,165	1,874	122	221,165	1,874	124	221,165	1,783
Yuba	6	82,275	11,653	7	82,275	11,653	10	82,275	8,227
Out of State/Country	2,369	N/A	N/A	2,343	N/A	N/A	29	N/A	N/A
Total	32,049	39,185, 605	N/A	34,168	39,185, 605	N/A	32,407	39,174,605	N/A

*Population data obtained from Department of Finance, Demographic Research Unit as of 7/1/2023.

*The counties with the highest Population per DDS are:	Yuba County (1:8,227)	*The counties with the lowest Population per DDS are:	Sierra County (No DDS)
	Trinity County (1:8,011)		Alpine County (No DDS)
	Imperial County (1:4,719)		San Francisco County (1:737)
	Glenn County (1:4,107)		Orange County (1:760)
	Colusa County (1:3,634)		Santa Clara (1:823)

Action Requested

No action is requested.



DENTAL BOARD OF CALIFORNIA

2005 Evergreen St., Suite 1550, Sacramento, CA 95815

P (916) 263-2300 | F (916) 263-2140 | www.dbc.ca.gov



MEMORANDUM

DATE	January 16, 2024
TO	Members of the Dental Board of California
FROM	Mirela Taran, Administrative Analyst Dental Board of California
SUBJECT	Agenda Item 11.a.: Report on Commission on Dental Competency Assessment, Western Regional Examining Board, and Council of Interstate Testing Agencies (CDCA-WREB-CITA)

Background

Representatives from Commission on Dental Competency Assessment, Western Regional Examining Board, and The Council of Interstate Testing Agencies will provide a verbal report.

Action Requested

No action requested.



DENTAL BOARD OF CALIFORNIA

2005 Evergreen St., Suite 1550, Sacramento, CA 95815

P (916) 263-2300 | F (916) 263-2140 | www.dbc.ca.gov



MEMORANDUM

Table with 2 columns: Field (DATE, TO, FROM, SUBJECT) and Content (January 18, 2024, Members of the Dental Board of California, John Tran, Associate Governmental Program Analyst, Dental Board of California, Agenda Item 12.a.: General Anesthesia and Sedation Permits: Inspections and Evaluations Statistics)

Background

General Anesthesia (GA), Medical General Anesthesia (MGA), and Moderate Sedation (MS) permitholders are subject to an onsite inspection and evaluation prior to the issuance or renewal of a permit at the discretion of the Dental Board of California (Board). The Board must conduct an inspection and evaluation for GA and MGA permitholders at least once every five years, and for MS permitholders at least once every six years. An inspection and evaluation are required to keep a permit active and in good standing.

Effective January 1, 2022, Senate Bill (SB) 501 (Glazer, Chapter 929, Statutes of 2018) repealed Business and Professions Code (BPC) sections 1647–1647.9.5 (Conscious Sedation). As a result, the Board no longer issues or renews Conscious Sedation (CS) permits. To implement SB 501, the Board promulgated a rulemaking that became effective on August 16, 2022. Among other things, the rulemaking amended California Code of Regulations (CCR), title 16, sections 1043.2–1043.7 (concerning inspections and evaluations) to remove and replace each mention of conscious sedation with moderate sedation.

After enactment of SB 501 and the implementing regulations, the Board may no longer conduct onsite inspections and evaluations for CS permitholders. In September 2022, Board staff stopped scheduling and conducting inspections and evaluations of CS permitholders. A CS permitholder who was issued a permit before January 1, 2022 may follow the terms of that existing permit until it expires, even if the CS permitholder was due to complete an inspection and evaluation. As the CS permits expire, Board staff will continue to monitor and investigate grievances related to permitting for the administration of conscious sedation.

The first MS permit (MS 1) was issued on September 15, 2022. Onsite inspections and evaluations may be conducted within one year of issuance of a new MS permit, and new permit holders are allowed to practice within the scope of their permit until the inspection and evaluation. Between September 2022 and March 2023, Board staff contacted newly licensed MS permit holders to schedule their inspections and evaluations. The first series of MS inspections and evaluations were conducted during April 2023.

Onsite Inspection and Evaluation Statistics

This memo provides a statistical overview of onsite inspections and evaluations administered by the Board for GA, MGA, and MS permits.

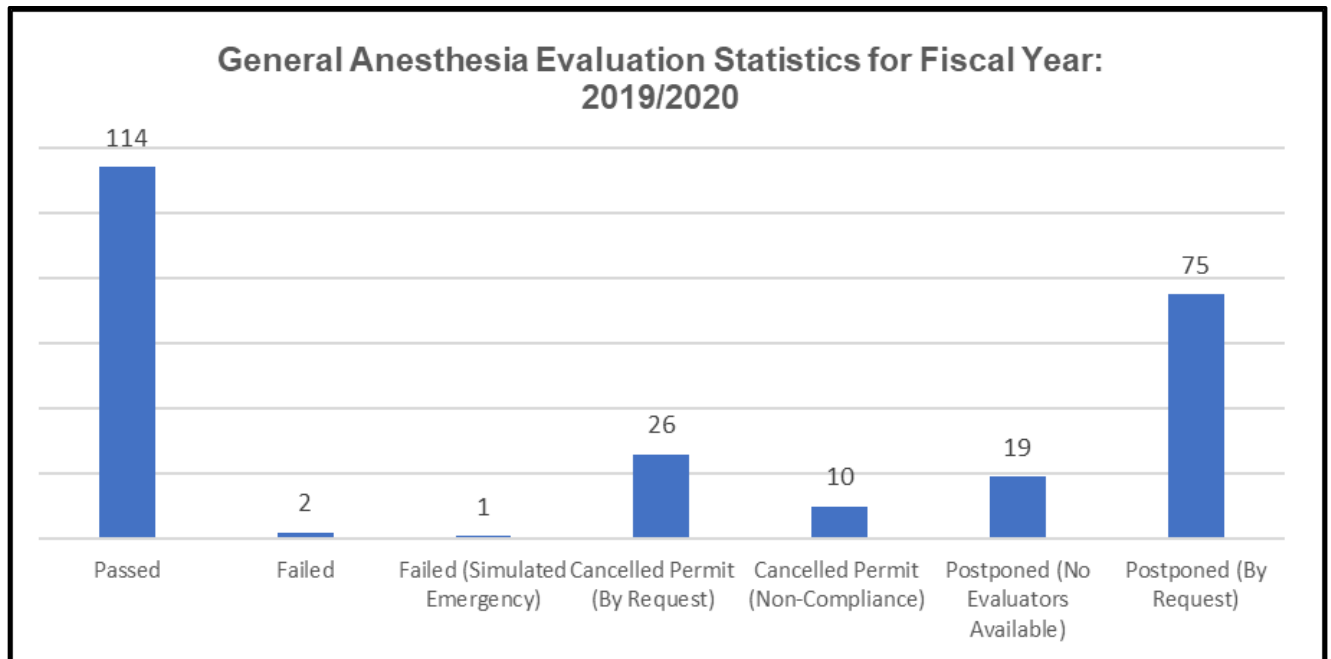
General Anesthesia Evaluation Statistics for Fiscal Year 2023–24

	Passed Evaluation	Failed Evaluation	Failed Simulated Emergency	Cancelled Permit by Request	Cancelled Permit for Non-compliance	Postponed (No Evaluators Available)	Postponed (By Request)
Jul 2023	14	0	0	1	1	4	1
Aug 2023	13	0	0	0	1	4	1
Sep 2023	21	0	0	1	1	2	1
Oct 2023	20	0	1	1	1	2	2
Nov 2023	13	0	0	1	2	2	2
Dec 2023	9	0	0	1	2	1	2
Jan 2024							
Feb 2024							
Mar 2024							
Apr 2024							
May 2024							
Jun 2024							
Total	90	0	1	5	8	15	9

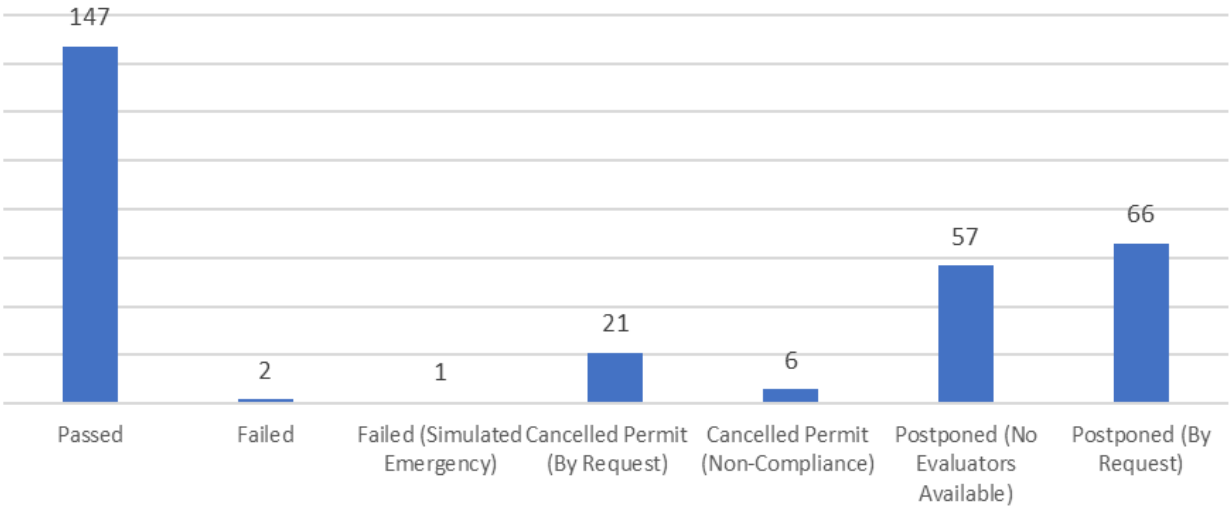
General Anesthesia Evaluation Statistics for Fiscal Years 2019–20, 2020–21, 2021–22, 2022–23, and 2023–24

	19–20	20–21	21–22	22–23	23–24*
Passed Evaluation – Permitholder met all required components of the onsite evaluation.	114	147	160	196	90
Failed Evaluation – Permitholder failed due to multiple deficient components that were required for the onsite evaluation.	2	2	0	1	0
Failed Simulated Emergency – Permitholder failed one or more simulated emergency scenarios required for the onsite evaluation.	1	1	2	2	1
Cancelled Permit by Request – Permitholder no longer wanted permit.	26	21	12	14	5
Cancelled Permit for Noncompliance – Permitholder did not complete required onsite evaluation.	10	6	6	11	8
Postponed (No Evaluators Available) – Permitholder evaluation was postponed due to no available evaluators.	19	57	27	71	15
Postponed (By Request) – Permitholder requested postponement due to scheduling conflict, emergencies, or COVID-related issues.	75	66	37	20	9

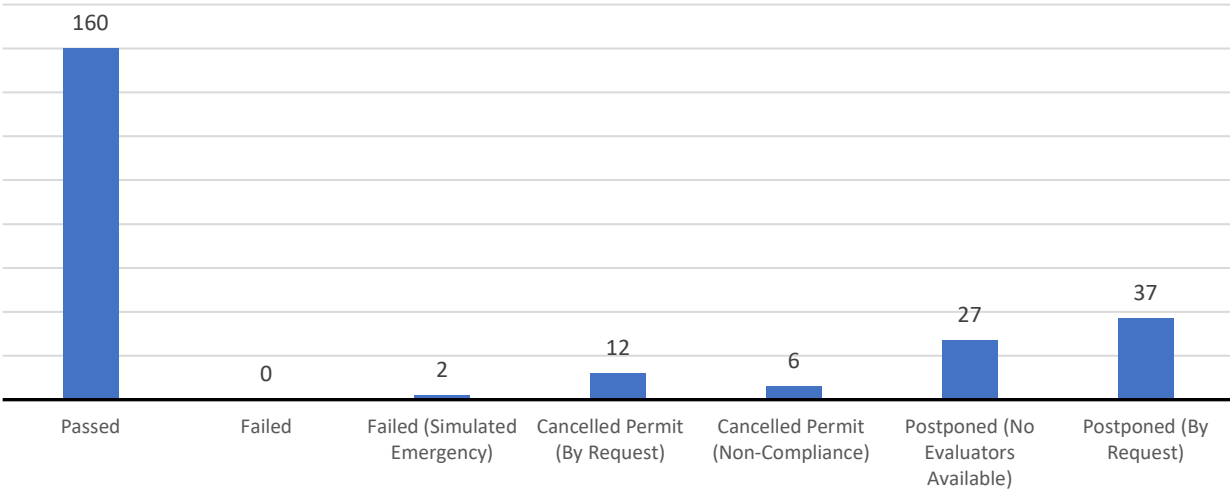
* Approximate number of evaluations scheduled for 2023-24.



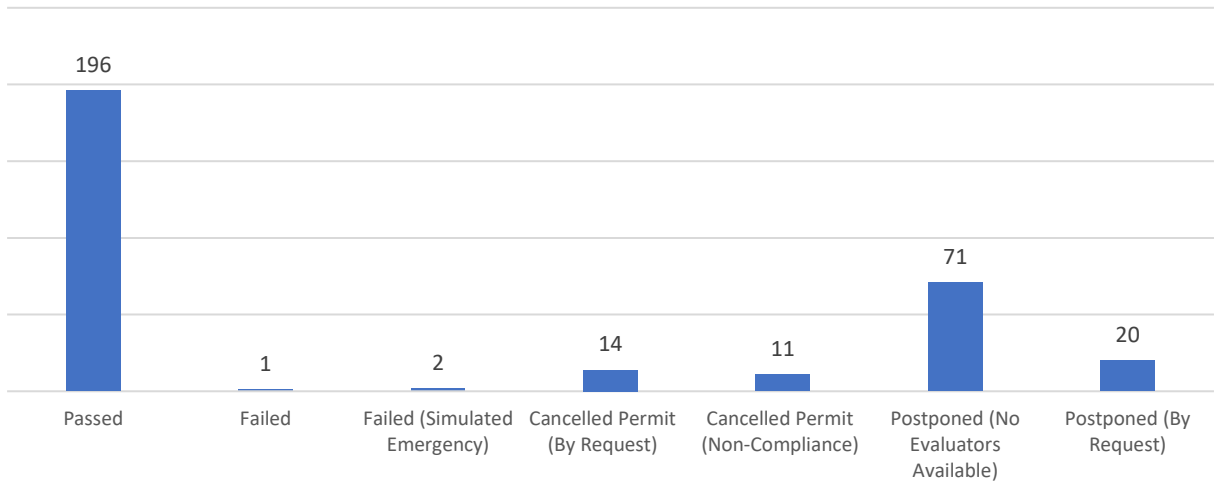
**General Anesthesia Evaluation Statistics for Fiscal Year:
2020/2021**



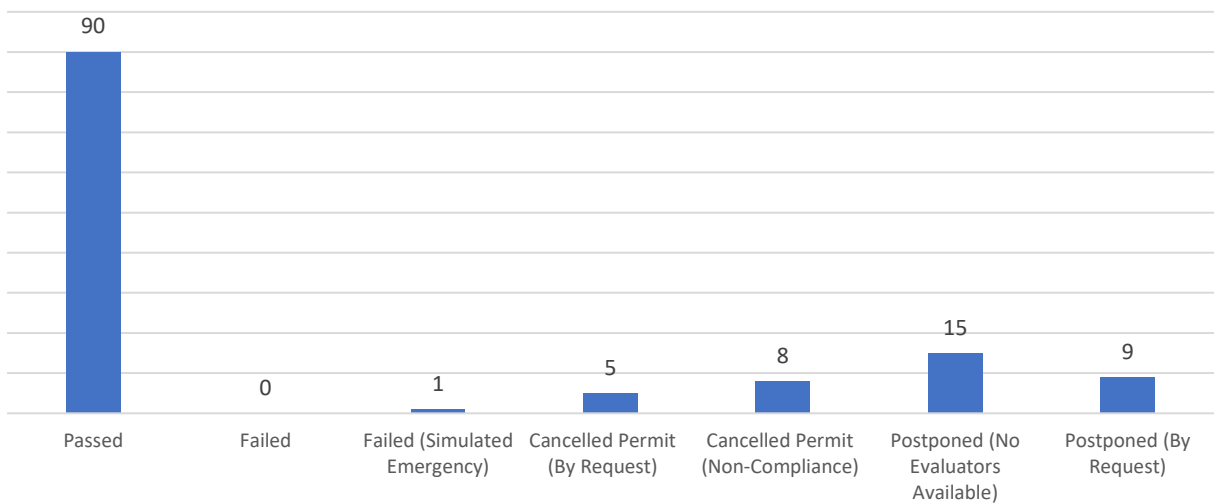
**General Anesthesia Evaluation Statistics for Fiscal Year:
2021/2022**



**General Anesthesia Evaluation Statistics for Fiscal Year:
2022/2023**



**General Anesthesia Evaluation Statistics for Fiscal Year:
2023/2024**



Medical General Anesthesia Evaluation Statistics for Fiscal Year 2023–24

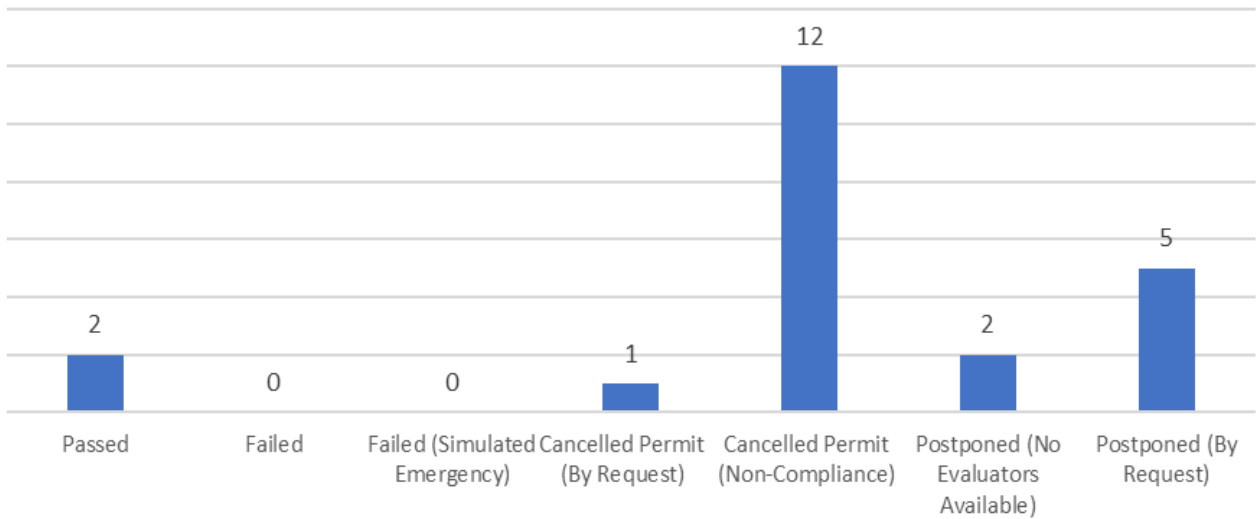
	Passed Evaluation	Failed Evaluation	Failed Simulated Emergency	Cancelled Permit by Request	Cancelled Permit for Non-Compliance	Postponed (No Evaluators Available)	Postponed (By Request)
Jul 2023	0	1	0	0	2	0	0
Aug 2023	1	0	0	0	1	1	0
Sep 2023	0	0	0	0	3	0	0
Oct 2023	0	0	1	2	1	0	0
Nov 2023	0	0	0	0	1	2	0
Dec 2023	1	0	0	0	2	0	0
Jan 2024							
Feb 2024							
Mar 2024							
Apr 2024							
May 2024							
Jun 2024							
Total	2	1	1	2	10	3	0

Medical General Anesthesia Evaluation Statistics for Fiscal Years 2019–20, 2020–21, 2021–22, 2022–23, and 2023–24

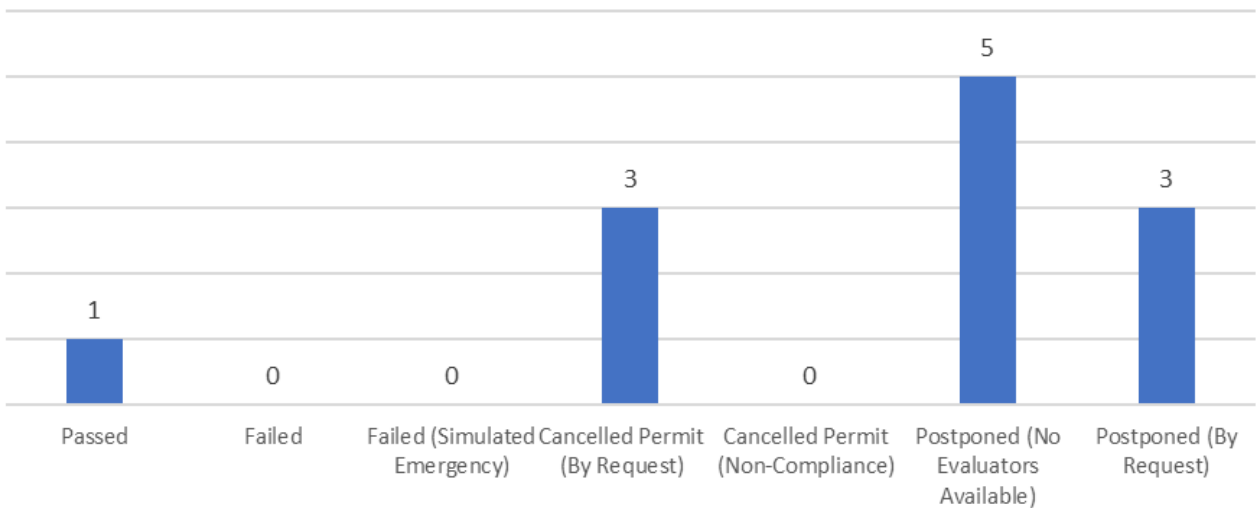
	19–20	20–21	21–22	22–23	23–24*
Passed Evaluation – Permitholder met all required components of the onsite evaluation.	2	1	3	5	2
Failed Evaluation – Permitholder failed due to multiple deficient components that were required for the onsite evaluation.	0	0	0	1	1
Failed Simulated Emergency – Permitholder failed one or more simulated emergency scenarios required for the onsite evaluation.	0	0	0	0	1
Cancelled Permit by Request – Permitholder no longer wanted permit.	1	3	2	11	2
Cancelled Permit for Non-Compliance – Permitholder did not complete required onsite evaluation.	12	0	15	9	10
Postponed (No Evaluators Available) – Permitholder evaluation was postponed due to no available evaluators.	2	5	11	3	3
Postponed (By Request) – Permitholder requested postponement due to scheduling conflict, emergencies, or COVID-related issues.	5	3	4	1	0

* Approximate number of MGA evaluations scheduled for 2023–24.

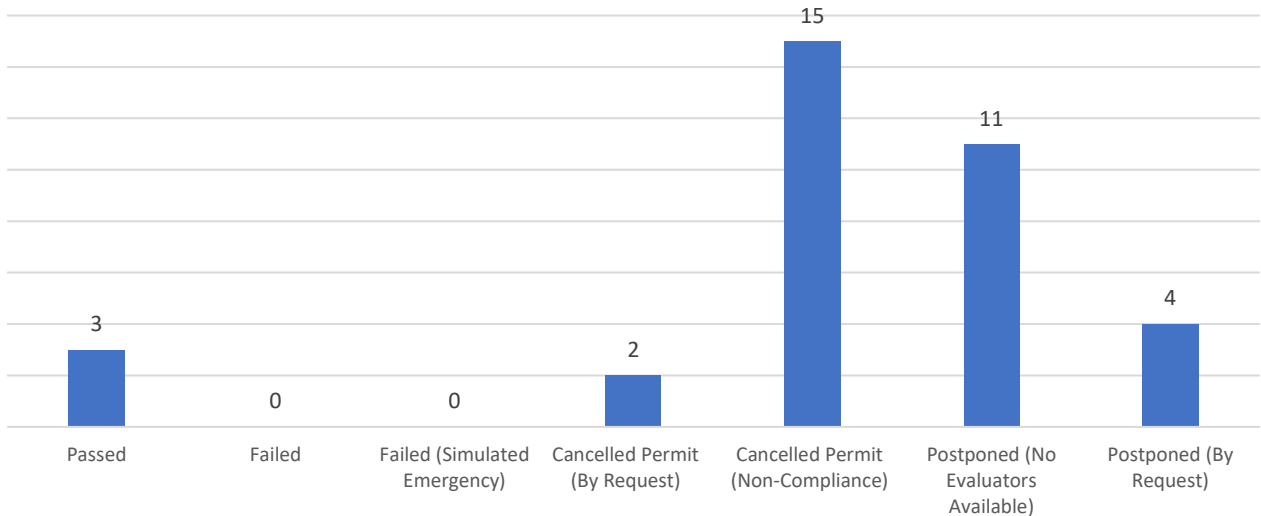
**Medical General Anesthesia Evaluation Statistics for Fiscal Year:
2019/2020**



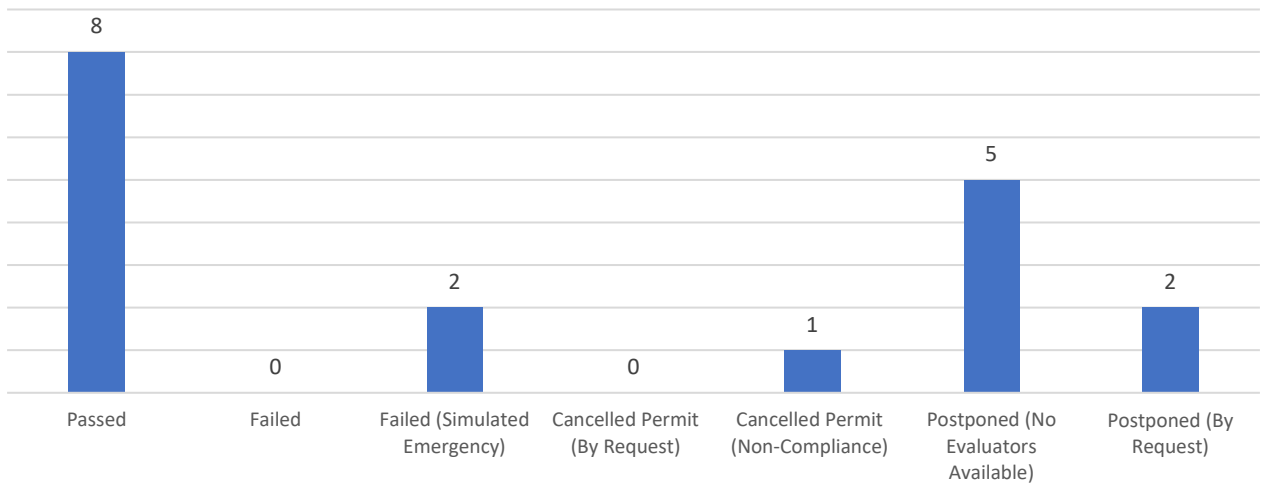
**Medical General Anesthesia Evaluation Statistics for Fiscal Year:
2020/2021**

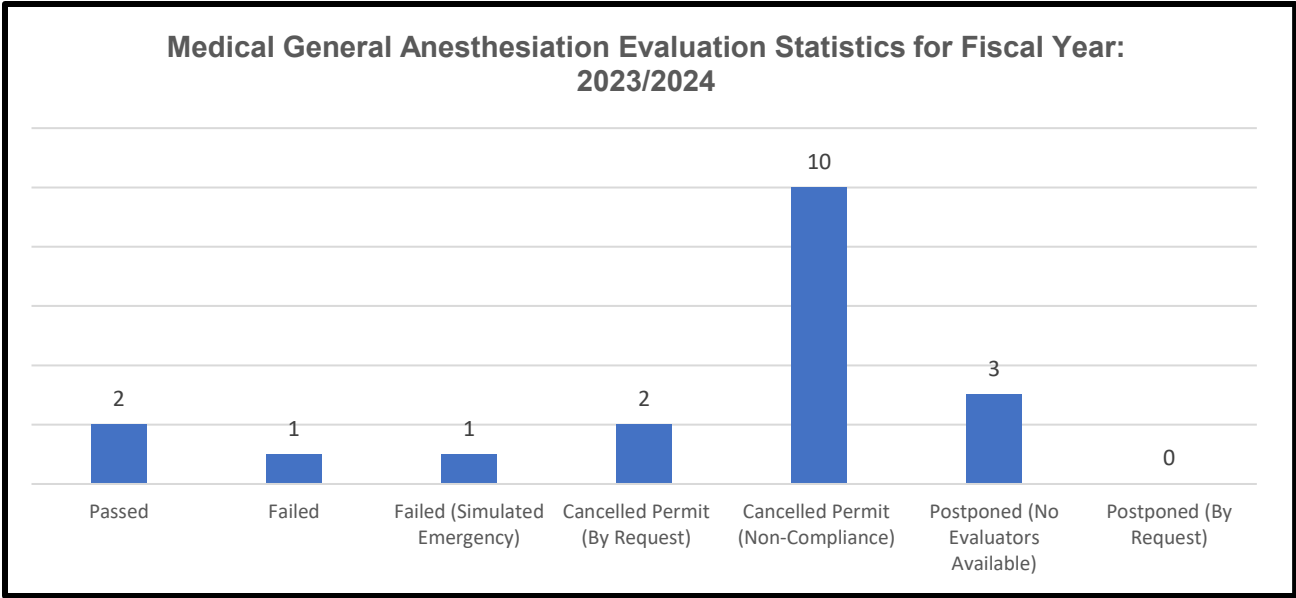


**Medical General Anesthesia Evaluation Statistics for Fiscal Year:
2021/2022**



**Medical General Anesthesia Evaluation Statistics for Fiscal Year:
2022/2023**





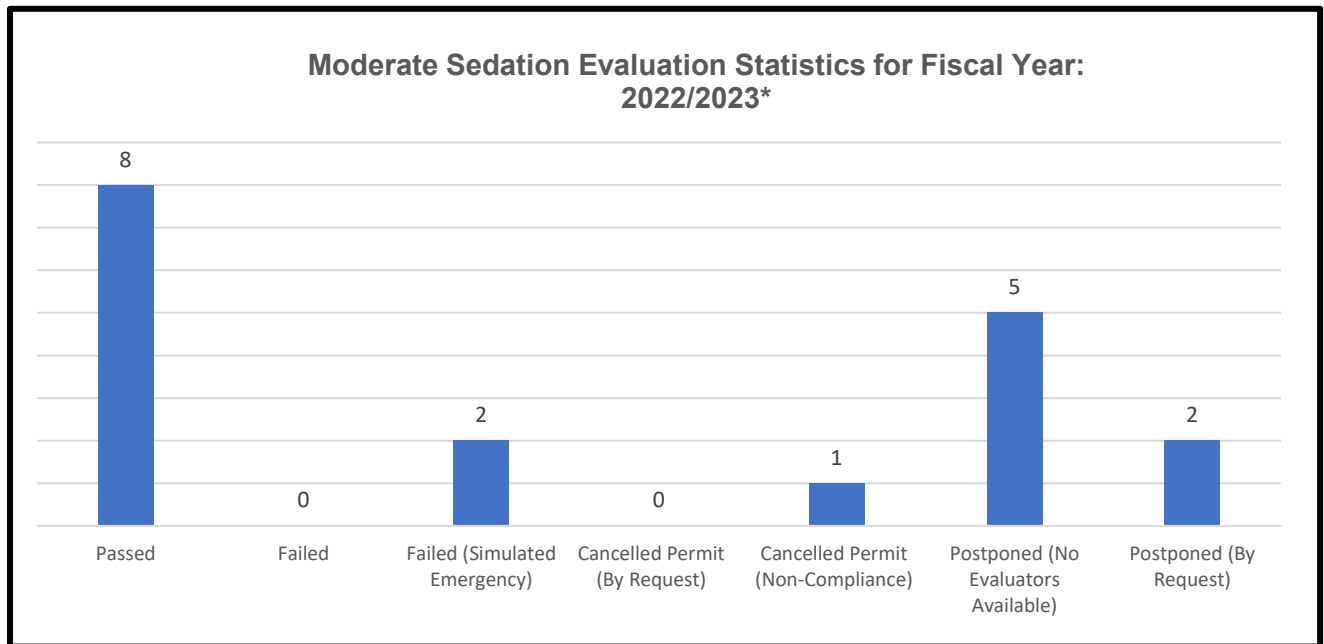
Moderate Sedation Evaluation Statistics for Fiscal Year 2023–24

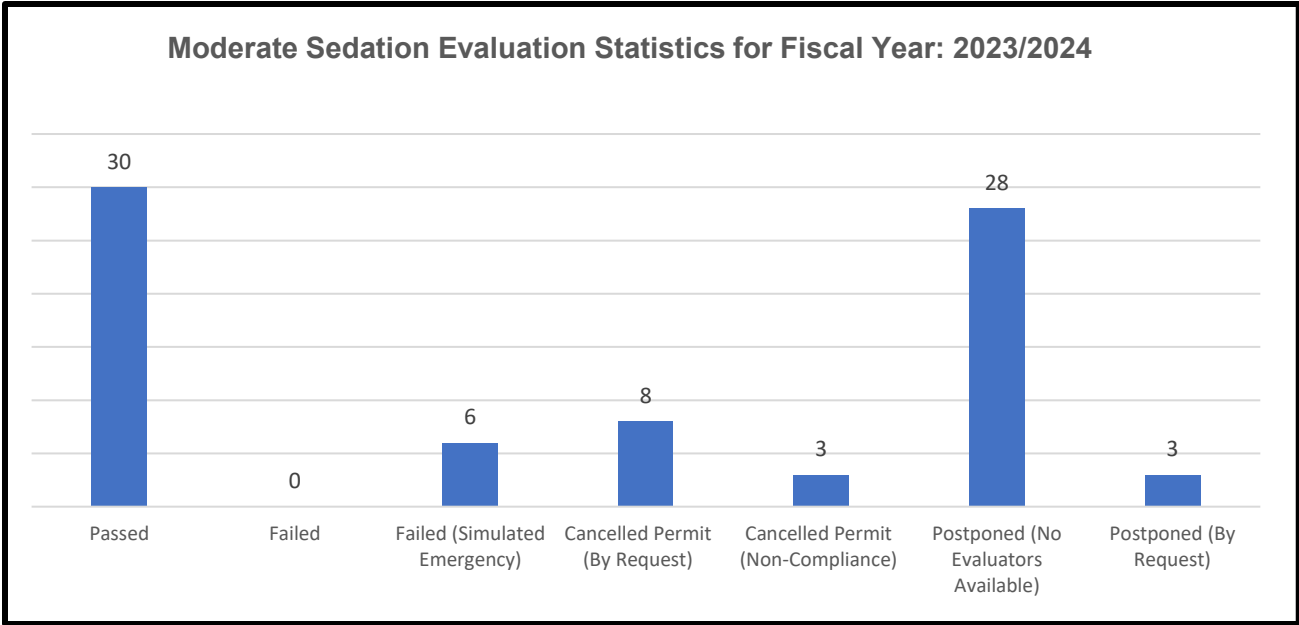
	Passed Evaluation	Failed Evaluation	Failed Simulated Emergency	Cancelled Permit by Request	Cancelled Permit for Non-compliance	Postponed (No Evaluators Available)	Postponed (By Request)
Jul 2023	2	0	0	2	0	4	0
Aug 2023	4	0	2	1	0	6	1
Sep 2023	5	0	1	3	1	3	1
Oct 2023	7	0	1	0	1	5	1
Nov 2023	4	0	1	1	0	6	0
Dec 2023	8	0	1	1	1	4	0
Jan 2024							
Feb 2024							
Mar 2024							
Apr 2024							
May 2024							
Jun 2024							
Total	30	0	6	8	3	28	3

Moderate Sedation Evaluation Statistics for Fiscal Year 2022–23, and 2023–24

	22–23	23–24*			
Passed Evaluation – Permitholder met all required components of the onsite evaluation.	8	30			
Failed Evaluation – Permitholder failed due to multiple deficient components that were required for the onsite evaluation.	0	0			
Failed Simulated Emergency – Permitholder failed one or more simulated emergency scenarios required for the onsite evaluation.	2	6			
Cancelled Permit by Request – Permitholder no longer wanted permit.	0	8			
Cancelled Permit for Non-Compliance – Permitholder did not complete required onsite evaluation.	1	3			
Postponed (No Evaluators Available) – Permitholder evaluation was postponed due to no available evaluators.	5	28			
Postponed (By Request) – Permitholder requested postponement due to scheduling conflict, emergencies, or COVID-related issues.	2	3			

* Approximate number of MS evaluations scheduled for 2023-24.





Current Evaluators per Region

Region	GA	MGA	MS
Northern California	125	19	10
Southern California	161	18	10

Action Requested

No action is requested.



MEMORANDUM

DATE	January 22, 2024
TO	Members of the Dental Board of California
FROM	Jessica Olney, Staff Services Manager I Dental Board of California
SUBJECT	Agenda Item 12.b.: Update Regarding Board Implementation of Senate Bill (SB) 501 (Glazer, Chapter 929, Statutes of 2018)

Background

On September 29, 2018, Governor Brown signed SB 501 (Glazer, Chapter 929, Statutes of 2018). SB 501 became fully effective on January 1, 2022. Among other things, SB 501 significantly changed requirements for existing anesthesia and sedation permits, created new permits and pediatric endorsements, and changed patient monitoring requirements.

SB 501 repealed Business and Professions Code (BPC) sections 1646–1646.10 (General Anesthesia), 1647–1647.9.5 (Conscious Sedation), and 1647.10–1647.17.5 (Oral Conscious Sedation for Pediatric Patients). As a result, the Dental Board of California (Board) no longer issues or renews Conscious Sedation (CS) and Oral Conscious Sedation for Minors (OCS-M) permits. SB 501 also added BPC sections 1601.8, 1646–1646.13 (Deep Sedation and General Anesthesia), 1647–1647.12 (Moderate Sedation), and 1647.30–1647.36 (Pediatric Minimal Sedation). As a result, the Board implemented significant changes to the anesthesia and sedation permit program. These changes include:

- New patient monitoring requirements when administering anesthesia or sedation to pediatric patients.
- A new Moderate Sedation (MS) permit required to administer or order the administration of moderate sedation.
- A new Pediatric Minimal Sedation (PMS) permit required to administer or order the administration of pediatric minimal sedation on a patient under the age of 13.
- A new pediatric endorsement for General Anesthesia (GA), Medical General Anesthesia (MGA), and MS permit holders who administer deep sedation, general anesthesia, or moderate sedation to pediatric patients.

Agenda Item 12.b.: Update Regarding Board Implementation of Senate Bill (SB) 501
(Glazer, Chapter 929, Statutes of 2018)
Dental Board of California Meeting
February 9, 2024

Page 1 of 5

Regulations to Implement SB 501

In 2020–2022, Board staff worked with subject matter experts and Legal Counsel to develop regulations to implement SB 501. These regulations became effective on August 16, 2022. The timeline below summarizes this work:

November 19, 2021: Approval of proposed regulatory language by the Board.

December 31, 2021: Initiation of 45-day public comment period on the proposed regulations after submittal by the Board of the initial rulemaking file and necessary materials to the Office of Administrative Law (OAL) for publication in the California Regulatory Notice Register.

February 15, 2022: Closure of the 45-day public comment period, during which Board staff received several written public comments and four requests for a public hearing.

February 16, 2022: Public hearing held through WebEx teleconferencing, at which seven members of the public offered public comment.

March 14, 2022: Board meeting at which staff presented a summary of the comments received and proposed Board responses. Board staff presented additional clean-up modifications to the proposed regulations. The Board accepted Board staff recommendations on the comments received. The Board approved the modified text and documents added to the rulemaking file and directed Board staff to take all steps necessary to complete the rulemaking process. These steps included sending out the modified text and notice of the addition of documents added to the rulemaking file for an additional 15-day comment period. If no adverse comments were received by the close of the 15-day public comment period, the Board authorized the Executive Officer to make any non-substantive changes to the proposed regulations and to adopt the proposed regulations as described in the modified text notice.

March 18, 2022: Notice of the amended rulemaking file and modified text, and posting of the file to the Board's website.

April 4, 2022: Close of the 15-day public comment period; Board staff received one adverse comment that was subsequently withdrawn.

May 2, 2022: Submission of amended rulemaking package to OAL and Department of Finance.

June 8, 2022: Initiation of discussions between Board staff and OAL staff regarding items identified in the proposed text that would require substantive changes and approval from the Board.

June 14, 2022: Withdrawal of the rulemaking file by Board staff to make the changes to the proposed text necessary for final approval.

Agenda Item 12.b.: Update Regarding Board Implementation of Senate Bill (SB) 501
(Glazer, Chapter 929, Statutes of 2018)
Dental Board of California Meeting
February 9, 2024

June 28, 2022: Board meeting at which Board staff presented the additional modifications to the proposed regulations that were identified in the review conducted by OAL. The Board approved the second modified text and forms and directed Board staff to take all steps necessary to complete the rulemaking process. These steps included sending out the second modified text notice with these modifications for an additional 15-day comment period. If no adverse comments were received by the close of the 15-day comment period, the Board authorized the Executive Officer to make any non-substantive changes to the proposed regulations and to adopt the proposed regulations as described in the second modified text notice.

June 29, 2022: Notice of the second amended rulemaking file and second modified text and posting of the file to the Board’s website.

July 14, 2022: Close of the 15-day public comment period; adverse comments were received but were found to be not related to the second modified text and were not considered.

July 21, 2022: Submission of final rulemaking package to OAL.

August 16, 2022: Proposed regulatory language became effective after OAL approval.

Implementation of SB 501 Permits

BreEZe was reconfigured to incorporate the statutory and regulatory requirements for issuing and renewing the new SB 501 permits. A simplified version of BreEZe to implement SB 501 was put into production on August 19, 2022. Board staff continue to encounter system fixes, and the configuration and maintenance of the BreEZe system is ongoing. Configuration of online transactions to begin accepting applications online is a priority. Board staff continue to work with the Department of Consumer Affairs, Office of Information Services (OIS) staff and the vendor to achieve this.

The table below shows the number of applications received and processed (i.e., deficient or approved) for licensure by Board staff since August 2022.

Permit/Application Type	Deficient Applications Received	Approved Applications Received	Total Applications Received
GA Permit Initial Application	1	54	55
GA Permit Application for Pediatric Endorsement	3	65	68

Permit/Application Type	Deficient Applications Received	Approved Applications Received	Total Applications Received
MGA Permit Initial Application	3	26	29
MGA Permit Application for Pediatric Endorsement	3	48	51
MS Permit Initial Application	12	353	365
MS Permit Application for Pediatric Endorsement	2	24	26
PMS Permit Initial Application	6	237	243
OCS for Adults Certificate	10	142	152

Legislative Amendments

After the implementation of SB 501, Board staff and Legal Counsel identified additional areas in current law that would benefit from legislative amendments. Legislative proposals in these areas were presented to the Board and approved at the November 2021, August 2022, November 2022, February 2023, May 2023, and October 2023 Board meetings. The legislative proposals have been submitted to the California State Legislature in the Board’s Sunset Review Report.

Expiration of Existing Permits and Impact of SB 501

To minimize the impact of SB 501, Board staff worked with OIS to allow permit changes to be applied gradually through 2023 and 2024. In November 2021, Board staff worked with OIS to reconfigure the BreEZe system to allow existing permitholders whose permits were to expire in 2022 to renew by December 31, 2021 (i.e., before the changes implemented by SB 501 on permitholders became effective). Such renewal would enable a permitholder to continue to practice under the existing terms of their permit until it expires. Board staff identified 1,414 permitholders who were eligible to renew, and as of January 3, 2022, 1,107 permitholders renewed successfully.

Existing permits will continue to expire steadily in 2024. The table below shows the number of permits expiring each month as of January 11, 2024. Previously, expiring CS and OCS permits were automatically placed in a “delinquent” status in the BreZE system. Permitholders expressed concerns that the “delinquent” status could reflect negatively on their license. Board staff worked with OIS to have CS and OCS permits instead placed automatically into a cancelled status upon expiration. The BreZE system has also been configured to cancel all OCS permits that were previously placed in “delinquent” status. OIS is currently working to cancel all CS permits that were previously placed in “delinquent” status.

Number of GA, MGA, CS, and OCS-M Permits Expiring between January 31, 2023 and December 31, 2024													
GA	1/23	2/23	3/23	4/23	5/23	6/23	7/23	8/23	9/23	10/23	11/23	12/23	TOTAL
	0	0	1	3	1	3	3	0	1	2	4	6	24
	1/24	2/24	3/24	4/24	5/24	6/24	7/24	8/24	9/24	10/24	11/24	12/24	TOTAL
	14	14	45	48	42	45	40	46	48	28	29	39	438
MGA	1/23	2/23	3/23	4/23	5/23	6/23	7/23	8/23	9/23	10/23	11/23	12/23	TOTAL
	0	1	3	2	2	0	1	1	6	0	3	1	20
	1/24	2/24	3/24	4/24	5/24	6/24	7/24	8/24	9/24	10/24	11/24	12/24	TOTAL
	2	4	9	6	4	5	4	4	7	8	6	3	62
CS	1/23	2/23	3/23	4/23	5/23	6/23	7/23	8/23	9/23	10/23	11/23	12/23	TOTAL
	24	31	26	26	23	18	22	0	0	0	0	0	170
	1/24	2/24	3/24	4/24	5/24	6/24	7/24	8/24	9/24	10/24	11/24	12/24	TOTAL
	27	24	16	14	17	27	18	19	23	21	24	21	251
OCS-M	1/23	2/23	3/23	4/23	5/23	6/23	7/23	8/23	9/23	10/23	11/23	12/23	TOTAL
	0	0	0	0	0	0	0	0	0	0	0	0	0
	1/24	2/24	3/24	4/24	5/24	6/24	7/24	8/24	9/24	10/24	11/24	12/24	TOTAL
	43	34	34	41	37	42	43	35	60	42	45	44	500

Action Requested

No action is requested.



MEMORANDUM

DATE	January 10, 2024
TO	Members of the Dental Board of California
FROM	Jessica Olney, Staff Services Manager I Dental Board of California
SUBJECT	Agenda Item 12.c.: Discussion and Possible Action Regarding Appointment of General Anesthesia, Medical General Anesthesia, and Moderate Sedation Permit Evaluators

Background

Business and Professions Code (BPC) sections 1646.4, 1646.9, and 1647.7 authorize the Dental Board of California (Board) to conduct onsite inspections and evaluations of existing General Anesthesia (GA) and Medical General Anesthesia (MGA) permit holders, as well as of new Moderate Sedation (MS) permit holders. Onsite inspections and evaluations are conducted by a team of one or more evaluators, who are contracted by the Board as subject matter experts. The evaluators provide an independent evaluation and recommend a grade on a pass–fail system per California Code of Regulations (CCR), title 16, section 1043.6.

Senate Bill (SB) 501 (Glazer, Chapter 929, Statutes of 2018) changed existing provisions that govern the administration of minimal, moderate, and deep sedation and general anesthesia on dental patients. The subsequent SB 501 rulemaking, which implemented SB 501 provisions and became operative on August 16, 2022, amended CCR, title 16, section 1043.2 regarding the composition of teams performing onsite inspection and evaluation of GA, MGA, and MS permits. That section now provides that the onsite inspection and evaluation team consist of two or more persons for the first evaluation, or if an applicant has failed an evaluation. For each subsequent evaluation, only one evaluator is required. In addition, the evaluators must meet the following criteria:

1. The evaluators must meet one of the listed criteria in the Application for General Anesthesia Permit (Form GAP-1 New 05/2021) for general anesthesia, or the criteria in BPC 1647.3 for moderate sedation, and must have utilized general anesthesia, deep sedation, or moderate sedation in a dental practice setting for a minimum of three years immediately preceding their application to be an evaluator, exclusive of any training.

Agenda Item 12.c.: Discussion and Possible Action Regarding Appointment of General Anesthesia, Medical General Anesthesia, and Moderate Sedation Permit Evaluators
Dental Board of California Meeting
February 9, 2024

Page 1 of 3

2. At least one of the evaluators must have experience in evaluation of dentists administering general anesthesia, deep sedation, or moderate sedation. At least one member of the evaluation team must have substantial experience in the administration of the method of delivery of general anesthesia, deep sedation, or moderate sedation used by the dentist being evaluated.
3. Evaluators shall possess a current, active, and unrestricted license from the Board or the Medical Board of California for applicants qualifying under BPC section 1646.9. "Unrestricted" means not subject to any disciplinary action such as revocation, suspension, or probation.
4. The Board may appoint a licensee member of the Board to serve as a consultant at any evaluation.

To implement SB 501, amendments were made to the terms for onsite inspections (CCR, title 16, section 1043.3). Pursuant to BPC section 1646.11, a holder of a GA or MGA permit issued or renewed on or before January 1, 2022, may follow the terms of that existing permit until it expires, and any permit issued or renewed on or after January 1, 2022, requires the permitholder to follow the new statutory requirements. Therefore, holders of GA and MGA permits issued or renewed on or after January 1, 2022, are required to comply with the amended terms for onsite inspections.

To increase the pool of available evaluators for the onsite inspection and evaluation program, Board staff post a continuous recruitment notice on the Board's website.

To increase the number of available evaluators specifically for the MS permit program, Board staff contacted MS permitholders who previously held Conscious Sedation (CS) permits for at least three years to assess their interest in becoming evaluators.

Appointment of Onsite Inspection and Evaluation Program Evaluators

The permitholders below have applied to become evaluators for the general anesthesia and moderate sedation onsite inspection and evaluation program. Board staff have reviewed the applications and recommend approval of their appointment as evaluators.

1. Dr. Brian Chu, Dental License No. 63589, and General Anesthesia Permit No. 1942. Dr. Chu has held an active GA permit since July 1, 2019. Dr. Chu practices as a dental anesthesiologist in Loma Linda, CA. If approved, Dr. Chu will conduct evaluations in southern California for GA permits.
2. Dr. George Jaber, Dental License No. 62479, and General Anesthesia Permit No. 1787. Dr. Jaber has held an active GA permit since June 30, 2016. Dr. Jaber practices as a dental anesthesiologist in San Francisco, CA. If approved, Dr. Jaber will conduct evaluations in northern California for GA and MS permits.

Agenda Item 12.c.: Discussion and Possible Action Regarding Appointment of General Anesthesia, Medical General Anesthesia, and Moderate Sedation Permit Evaluators
Dental Board of California Meeting
February 9, 2024

Page 2 of 3

3. Dr. Jakub Pietrowski, Dental License No. 100544, and General Anesthesia Permit No. 1816. Dr. Pietrowski has held an active GA permit since August 4, 2016. Dr. Pietrowski practices as an oral and maxillofacial surgeon in Fairfield, CA. If approved, Dr. Pietrowski will conduct evaluations in northern California for GA and MS permits.
4. Dr. Ali Pootrakul, Dental License No. 60258, and General Anesthesia Permit No. 1563. Dr. Pootrakul has held an active GA permit since March 25, 2011. Dr. Pootrakul practices as an oral and maxillofacial surgeon in Los Angeles, CA. If approved, Dr. Pootrakul will conduct evaluations in southern California for GA and MS permits.
5. Dr. Akemi Arzouman, Dental License No. 103592, and Moderate Sedation Permit No. 296. Dr. Arzouman has held an active MS permit since October 24, 2023, and previously served as an evaluator for Conscious Sedation (CS) permits. Dr. Arzouman practices as a periodontist in Orange, CA. If approved, Dr. Arzouman will conduct evaluations in southern California for MS permits.
6. Dr. Yvette Carrillo, Dental License No. 64810, and Moderate Sedation Permit No. 308. Dr. Carrillo has held an active MS permit since November 9, 2023, and previously held a Conscious Sedation (CS) permit. Dr. Carrillo practices as a pediatric dentist in San Diego, CA. If approved, Dr. Carrillo will conduct evaluations in southern California for MS permits.
7. Dr. Kabson Hong, Dental License 41922, Moderate Sedation Permit No. 251. Dr. Hong has held an active MS permit since September 6, 2023, and previously held a Conscious Sedation (CS) permit. Dr. Hong practices as a general dentist in Downey, CA. If approved, Dr. Hong will conduct evaluations in southern California for MS permits.
8. Dr. James Rore, Dental License 33839, Moderate Sedation Permit No. 209. Dr. Rore has held an active MS permit since August 1, 2023, and previously served as an evaluator for Conscious Sedation (CS) permits. Dr. Rore practices as a general dentist in Stockton, CA. If approved, Dr. Rore will conduct evaluations in central and northern California for MS permits.

Action Requested

The Board is asked to consider Board staff's recommendations and make a motion to appoint each of the 8 applicants as evaluators for the onsite inspection and evaluation program.



DENTAL BOARD OF CALIFORNIA

2005 Evergreen St., Suite 1550, Sacramento, CA 95815

P (916) 263-2300 | F (916) 263-2140 | www.dbc.ca.gov



GENERAL ANESTHESIA / MODERATE SEDATION EVALUATOR APPLICATION

<p>QUALIFICATIONS AS AN EVALUATOR</p> <p>Have you utilized general anesthesia, deep sedation, or moderate sedation in a dental practice setting for a minimum of 3 years preceding the date of this application? If YES, indicate the type of sedation utilized.</p> <p><input type="checkbox"/> NO <input checked="" type="checkbox"/> General Anesthesia (GA) <input type="checkbox"/> Deep Sedation (DS) <input type="checkbox"/> Moderate Sedation (MS)</p> <p>Do you have substantial experience in the administration of methods of delivery of general anesthesia, deep sedation, or moderate sedation?</p> <p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>EVALUATION PREFERENCES</p> <p>In which California region are you able to conduct evaluations?</p> <p><input type="checkbox"/> North <input type="checkbox"/> South <input checked="" type="checkbox"/> BOTH</p> <p>What kind of cases would you like to evaluate?</p> <p><input checked="" type="checkbox"/> GA/DS <input type="checkbox"/> MS <input type="checkbox"/> BOTH</p>	<p>TYPE OF PRACTICE</p> <p><input checked="" type="checkbox"/> Anesthesia <input type="checkbox"/> Endodontics <input type="checkbox"/> Prosthodontics <input type="checkbox"/> Oral Pathology <input type="checkbox"/> Orthodontics <input type="checkbox"/> Public Health <input type="checkbox"/> Pedodontics <input type="checkbox"/> Periodontology <input type="checkbox"/> General Dentist <input type="checkbox"/> OMS <input type="checkbox"/> Other</p>
--	--	--

APPLICANT NAME: Brian Chu	LICENSE NO.: DDS 63589
------------------------------	---------------------------

PERMIT HELD: General Anesthesia	PERMIT NO.: GA 1942
------------------------------------	------------------------


MAILING ADDRESS: [REDACTED]

EMAIL ADDRESS: [REDACTED]

TELEPHONE (INCLUDING AREA CODE): [REDACTED]

Certification

I certify under penalty of perjury under the laws of the State of California that the foregoing and any attachments are true and correct, and I hereby request appointment as an Evaluator for the General Anesthesia / Moderate Sedation program.

Signature of Applicant:  Date: 10/12/23



DENTAL BOARD OF CALIFORNIA

2005 Evergreen St., Suite 1550, Sacramento, CA 95815

P (916) 263-2300 | F (916) 263-2140 | www.dbc.ca.gov



GENERAL ANESTHESIA / MODERATE SEDATION EVALUATOR APPLICATION

<p>QUALIFICATIONS AS AN EVALUATOR</p> <p>Have you utilized general anesthesia, deep sedation, or moderate sedation in a dental practice setting for a minimum of 3 years preceding the date of this application? If YES, indicate the type of sedation utilized.</p> <p><input checked="" type="checkbox"/> NO <input checked="" type="checkbox"/> General Anesthesia (GA) <input checked="" type="checkbox"/> Deep Sedation (DS) <input checked="" type="checkbox"/> Moderate Sedation (MS)</p> <p>Do you have substantial experience in the administration of methods of delivery of general anesthesia, deep sedation, or moderate sedation?</p> <p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>EVALUATION PREFERENCES</p> <p>In which California region are you able to conduct evaluations?</p> <p><input type="checkbox"/> North <input type="checkbox"/> South <input checked="" type="checkbox"/> BOTH</p> <p>What kind of cases would you like to evaluate?</p> <p><input type="checkbox"/> GA/DS <input type="checkbox"/> MS <input checked="" type="checkbox"/> BOTH</p>	<p>TYPE OF PRACTICE</p> <p><input checked="" type="checkbox"/> Anesthesia <input type="checkbox"/> Endodontics <input type="checkbox"/> Prosthodontics <input type="checkbox"/> Oral Pathology <input type="checkbox"/> Orthodontics <input type="checkbox"/> Public Health <input type="checkbox"/> Pedodontics <input type="checkbox"/> Periodontology <input type="checkbox"/> General Dentist <input type="checkbox"/> OMS <input type="checkbox"/> Other</p>
---	--	--

APPLICANT NAME: <i>George Jabes</i>	LICENSE NO.: <i>62479</i>
PERMIT HELD: <i>GA</i>	PERMIT NO.: <i>1787</i>
MAILING ADDRESS: [REDACTED]	
EMAIL ADDRESS: [REDACTED]	
TELEPHONE (INCLUDING AREA CODE): [REDACTED]	

Certification

I certify under penalty of perjury under the laws of the State of California that the foregoing and any attachments are true and correct, and I hereby request appointment as an Evaluator for the General Anesthesia / Moderate Sedation program.

Signature of Applicant *George Jabes* Date *9/11/2023*




**GENERAL ANESTHESIA / MODERATE SEDATION
 EVALUATOR APPLICATION**

<p>QUALIFICATIONS AS AN EVALUATOR</p> <p>Have you utilized general anesthesia, deep sedation, or moderate sedation in a dental practice setting for a minimum of 3 years preceding the date of this application? If YES, indicate the type of sedation utilized.</p> <p><input type="checkbox"/> NO <input checked="" type="checkbox"/> General Anesthesia (GA) <input checked="" type="checkbox"/> Deep Sedation (DS) <input checked="" type="checkbox"/> Moderate Sedation (MS)</p> <p>Do you have substantial experience in the administration of methods of delivery of general anesthesia, deep sedation, or moderate sedation?</p> <p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>EVALUATION PREFERENCES</p> <p>In which California region are you able to conduct evaluations?</p> <p><input checked="" type="checkbox"/> North <input type="checkbox"/> South <input type="checkbox"/> BOTH</p> <p>What kind of cases would you like to evaluate?</p> <p><input type="checkbox"/> GA/DS <input type="checkbox"/> MS <input checked="" type="checkbox"/> BOTH</p>	<p>TYPE OF PRACTICE</p> <p><input type="checkbox"/> Anesthesia <input type="checkbox"/> Endodontics <input type="checkbox"/> Prosthodontics <input type="checkbox"/> Oral Pathology <input type="checkbox"/> Orthodontics <input type="checkbox"/> Public Health <input type="checkbox"/> Pedodontics <input type="checkbox"/> Periodontology <input type="checkbox"/> General Dentist <input checked="" type="checkbox"/> OMS <input type="checkbox"/> Other</p>
--	--	--

<p>APPLICANT NAME: JAKUB PIETROWSKI</p>	<p>LICENSE NO.: DDS100544</p>
<p>PERMIT HELD: GA</p>	<p>PERMIT NO.: 1816</p>
<p>MAILING ADDRESS: [REDACTED]</p>	
<p>EMAIL ADDRESS: [REDACTED]</p>	
<p>TELEPHONE (INCLUDING AREA CODE): [REDACTED]</p>	

Certification

I certify under penalty of perjury under the laws of the State of California that the foregoing and any attachments are true and correct, and I hereby request appointment as an Evaluator for the General Anesthesia / Moderate Sedation program.

Signature of Applicant  Date **1/11/2024**

TIME RECEIVED
December 18, 2023 at 8:28:35 PM PST

REMOTE CSID

DURATION
35

PAGES
1

STATUS
Received



BUSINESS CONSUMER SERVICES AND HOUSING AGENCY • GAVIN NEWSOM GOVERNOR

DENTAL BOARD OF CALIFORNIA

2005 Evergreen St., Suite 1550, Sacramento, CA 95815

P (916) 263-2300 | F (916) 263-2140 | www.dbc.ca.gov



**GENERAL ANESTHESIA / MODERATE SEDATION
EVALUATOR APPLICATION**

<p>QUALIFICATIONS AS AN EVALUATOR</p> <p>Have you utilized general anesthesia, deep sedation, or moderate sedation in a dental practice setting for a minimum of 3 years preceding the date of this application? If YES, indicate the type of sedation utilized.</p> <p><input checked="" type="checkbox"/> NO <input checked="" type="checkbox"/> General Anesthesia (GA) <input checked="" type="checkbox"/> Deep Sedation (DS) <input checked="" type="checkbox"/> Moderate Sedation (MS)</p> <p>Do you have substantial experience in the administration of methods of delivery of general anesthesia, deep sedation, or moderate sedation?</p> <p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>EVALUATION PREFERENCES</p> <p>In which California region are you able to conduct evaluations?</p> <p><input type="checkbox"/> North <input type="checkbox"/> South <input checked="" type="checkbox"/> BOTH</p> <p>What kind of cases would you like to evaluate?</p> <p><input type="checkbox"/> GA/DS <input type="checkbox"/> MS <input checked="" type="checkbox"/> BOTH</p>	<p>TYPE OF PRACTICE</p> <p><input type="checkbox"/> Anesthesia <input type="checkbox"/> Endodontics <input type="checkbox"/> Prosthodontics <input type="checkbox"/> Oral Pathology <input type="checkbox"/> Orthodontics <input type="checkbox"/> Public Health <input type="checkbox"/> Pedodontics <input type="checkbox"/> Periodontology <input checked="" type="checkbox"/> General Dentist <input type="checkbox"/> OMS <input type="checkbox"/> Other</p>
---	--	--

APPLICANT NAME: Ali Pootrakul LICENSE NO.: 60258

PERMIT HELD: GA PERMIT NO.: 1563

MAILING ADDRESS: [REDACTED]

EMAIL ADDRESS: [REDACTED]

TELEPHONE (INCLUDING AREA CODE): [REDACTED]

Certification

I certify under penalty of perjury under the laws of the State of California that the foregoing and any attachments are true and correct, and hereby request appointment as an Evaluator for the General Anesthesia / Moderate Sedation program.

Signature of Applicant: [Signature] Date: 12/15/2023



DENTAL BOARD OF CALIFORNIA

2005 Evergreen St., Suite 1550, Sacramento, CA 95815

P (916) 263-2300 | F (916) 263-2140 | www.dbc.ca.gov



GENERAL ANESTHESIA / MODERATE SEDATION EVALUATOR APPLICATION

<p>QUALIFICATIONS AS AN EVALUATOR</p> <p>Have you utilized general anesthesia, deep sedation, or moderate sedation in a dental practice setting for a minimum of 3 years preceding the date of this application? If YES, indicate the type of sedation utilized.</p> <p><input type="checkbox"/> NO <input type="checkbox"/> General Anesthesia (GA) <input type="checkbox"/> Deep Sedation (DS) <input checked="" type="checkbox"/> Moderate Sedation (MS)</p> <p>Do you have substantial experience in the administration of methods of delivery of general anesthesia, deep sedation, or moderate sedation?</p> <p><input checked="" type="checkbox"/> YES <input type="checkbox"/> NO</p>	<p>EVALUATION PREFERENCES</p> <p>In which California region are you able to conduct evaluations?</p> <p><input type="checkbox"/> North <input checked="" type="checkbox"/> South <input type="checkbox"/> BOTH</p> <p>What kind of cases would you like to evaluate?</p> <p><input type="checkbox"/> GA/DS <input checked="" type="checkbox"/> MS <input type="checkbox"/> BOTH</p>	<p>TYPE OF PRACTICE</p> <p><input type="checkbox"/> Anesthesia <input type="checkbox"/> Endodontics <input type="checkbox"/> Prosthodontics <input type="checkbox"/> Oral Pathology <input type="checkbox"/> Orthodontics <input type="checkbox"/> Public Health <input type="checkbox"/> Pedodontics <input checked="" type="checkbox"/> Periodontology <input type="checkbox"/> General Dentist <input type="checkbox"/> OMS <input type="checkbox"/> Other</p>
--	--	--

<p>APPLICANT NAME: Akemi Arzouman</p>	<p>LICENSE NO.: 103592</p>
--	---------------------------------------

<p>PERMIT HELD: Moderate Sedation</p>	<p>PERMIT NO.: MS 296</p>
--	--------------------------------------

MAILING ADDRESS:
[REDACTED]

EMAIL ADDRESS:
[REDACTED]

TELEPHONE (INCLUDING AREA CODE):
[REDACTED]

Certification

I certify under penalty of perjury under the laws of the State of California that the foregoing and any attachments are true and correct, and I hereby request appointment as an Evaluator for the General Anesthesia / Moderate Sedation program.

Signature of Applicant: *Akemi Arzouman* Date: 11/29/2023



DENTAL BOARD OF CALIFORNIA

2005 Evergreen St., Suite 1550, Sacramento, CA 95815

P (916) 263-2300 | F (916) 263-2140 | www.dbc.ca.gov



GENERAL ANESTHESIA / MODERATE SEDATION EVALUATOR APPLICATION

<p>QUALIFICATIONS AS AN EVALUATOR</p> <p>Have you utilized general anesthesia, deep sedation, or moderate sedation in a dental practice setting for a minimum of 3 years preceding the date of this application? If YES, indicate the type of sedation utilized.</p> <p><input type="checkbox"/> NO</p> <p><input type="checkbox"/> General Anesthesia (GA)</p> <p><input type="checkbox"/> Deep Sedation (DS)</p> <p><input checked="" type="checkbox"/> Moderate Sedation (MS)</p> <p>Do you have substantial experience in the administration of methods of delivery of general anesthesia, deep sedation, or moderate sedation?</p> <p><input checked="" type="checkbox"/> YES</p> <p><input type="checkbox"/> NO</p>	<p>EVALUATION PREFERENCES</p> <p>In which California region are you able to conduct evaluations?</p> <p><input type="checkbox"/> North</p> <p><input checked="" type="checkbox"/> South</p> <p><input type="checkbox"/> BOTH</p> <p>What kind of cases would you like to evaluate?</p> <p><input type="checkbox"/> GA/DS</p> <p><input checked="" type="checkbox"/> MS</p> <p><input type="checkbox"/> BOTH</p>	<p>TYPE OF PRACTICE</p> <p><input type="checkbox"/> Anesthesia</p> <p><input type="checkbox"/> Endodontics</p> <p><input type="checkbox"/> Prosthodontics</p> <p><input type="checkbox"/> Oral Pathology</p> <p><input type="checkbox"/> Orthodontics</p> <p><input type="checkbox"/> Public Health</p> <p><input checked="" type="checkbox"/> Pedodontics</p> <p><input type="checkbox"/> Periodontology</p> <p><input type="checkbox"/> General Dentist</p> <p><input type="checkbox"/> OMS</p> <p><input type="checkbox"/> Other</p>
--	--	--

<p>APPLICANT NAME: <i>Orville Councillo</i></p>	<p>LICENSE NO.: <i>61810</i></p>
---	--------------------------------------

<p>PERMIT HELD: <i>MS- changed to mod 70304</i></p>	<p>PERMIT NO.: <i>1230 MS 308</i></p>
---	---

MAILING ADDRESS:
[REDACTED]

EMAIL ADDRESS:
[REDACTED]

TELEPHONE (INCLUDING AREA CODE):
[REDACTED]

Certification

I certify under penalty of perjury under the laws of the State of California that the foregoing and any attachments are true and correct, and I hereby request appointment as an Evaluator for the General Anesthesia / Moderate Sedation program.

Signature of Applicant: *[Signature]* Date: *10-17-23*



DENTAL BOARD OF CALIFORNIA

2005 Evergreen St., Suite 1550, Sacramento, CA 95815

P (916) 263-2300 | F (916) 263-2140 | www.dbc.ca.gov



GENERAL ANESTHESIA / MODERATE SEDATION EVALUATOR APPLICATION

<p>QUALIFICATIONS AS AN EVALUATOR</p> <p>Have you utilized general anesthesia, deep sedation, or moderate sedation in a dental practice setting for a minimum of 3 years preceding the date of this application? If YES, indicate the type of sedation utilized.</p> <p><input type="checkbox"/> NO</p> <p><input type="checkbox"/> General Anesthesia (GA)</p> <p><input type="checkbox"/> Deep Sedation (DS)</p> <p><input checked="" type="checkbox"/> Moderate Sedation (MS)</p> <p>Do you have substantial experience in the administration of methods of delivery of general anesthesia, deep sedation, or moderate sedation?</p> <p><input type="checkbox"/> YES</p> <p><input type="checkbox"/> NO</p>	<p>EVALUATION PREFERENCES</p> <p>In which California region are you able to conduct evaluations?</p> <p><input type="checkbox"/> North</p> <p><input type="checkbox"/> South</p> <p><input checked="" type="checkbox"/> BOTH</p> <p>What kind of cases would you like to evaluate?</p> <p><input type="checkbox"/> GA/DS</p> <p><input checked="" type="checkbox"/> MS</p> <p><input type="checkbox"/> BOTH</p>	<p>TYPE OF PRACTICE</p> <p><input type="checkbox"/> Anesthesia</p> <p><input type="checkbox"/> Endodontics</p> <p><input type="checkbox"/> Prosthodontics</p> <p><input type="checkbox"/> Oral Pathology</p> <p><input type="checkbox"/> Orthodontics</p> <p><input type="checkbox"/> Public Health</p> <p><input type="checkbox"/> Pedodontics</p> <p><input type="checkbox"/> Periodontology</p> <p><input checked="" type="checkbox"/> General Dentist</p> <p><input type="checkbox"/> OMS</p> <p><input type="checkbox"/> Other</p>
---	--	--

APPLICANT NAME: Kabson Hong	LICENSE NO.: 41922
PERMIT HELD: M.S.	PERMIT NO.: CS 776 MS251

MAILING ADDRESS: [REDACTED]

EMAIL ADDRESS: [REDACTED]

TELEPHONE (INCLUDING [REDACTED])

Certification

I certify under penalty of perjury under the laws of the State of California that the foregoing and any attachments are true and correct, and I hereby request appointment as an Evaluator for the General Anesthesia / Moderate Sedation program.

Signature of Applicant: *Kabson Hong* Date: 9-26-2023



**GENERAL ANESTHESIA / MODERATE SEDATION
EVALUATOR APPLICATION**

QUALIFICATIONS AS AN EVALUATOR	EVALUATION PREFERENCES	TYPE OF PRACTICE
<p>Have you utilized general anesthesia, deep sedation, or moderate sedation in a dental practice setting for a minimum of 3 years preceding the date of this application? If YES, indicate the type of sedation utilized.</p> <p><input type="checkbox"/> NO</p> <p><input type="checkbox"/> General Anesthesia (GA)</p> <p><input type="checkbox"/> Deep Sedation (DS)</p> <p><input checked="" type="checkbox"/> Moderate Sedation (MS)</p> <p>Do you have substantial experience in the administration of methods of delivery of general anesthesia, deep sedation, or moderate sedation?</p> <p><input checked="" type="checkbox"/> YES</p> <p><input type="checkbox"/> NO</p>	<p>In which California region are you able to conduct evaluations?</p> <p><input checked="" type="checkbox"/> North</p> <p><input type="checkbox"/> South</p> <p><input type="checkbox"/> BOTH</p> <p>What kind of cases would you like to evaluate?</p> <p><input type="checkbox"/> GA/DS</p> <p><input checked="" type="checkbox"/> MS</p> <p><input type="checkbox"/> BOTH</p>	<p><input type="checkbox"/> Anesthesia</p> <p><input type="checkbox"/> Endodontics</p> <p><input type="checkbox"/> Prosthodontics</p> <p><input type="checkbox"/> Oral Pathology</p> <p><input type="checkbox"/> Orthodontics</p> <p><input type="checkbox"/> Public Health</p> <p><input type="checkbox"/> Pedodontics</p> <p><input type="checkbox"/> Periodontology</p> <p><input checked="" type="checkbox"/> General Dentist</p> <p><input type="checkbox"/> OMS</p> <p><input type="checkbox"/> Other</p>

<p>APPLICANT NAME: <i>James Rore</i></p>	<p>LICENSE NO.: <i>33839</i></p>
<p>PERMIT HELD: <i>MS</i></p>	<p>PERMIT NO.: <i>209</i></p>

MAILING ADDRESS:
[REDACTED]

EMAIL ADDRESS:
[REDACTED]

TELEPHONE (INCLUDING AREA CODE):
[REDACTED]

Certification

I certify under penalty of perjury under the laws of the State of California that the foregoing and any attachments are true and correct, and I hereby request appointment as an Evaluator for the General Anesthesia / Moderate Sedation program.

Signature of Applicant *J. Rore* Date *10-30-2023*



MEMORANDUM

DATE	January 16, 2024
TO	Members of the Dental Board of California
FROM	Mirela Taran, Administrative Analyst Dental Board of California
SUBJECT	Agenda Item 13.: Discussion and Possible Action on Board, Council, and Committee Member Administrative Policy and Procedure Manual

Background

The Dental Board of California (Board) Board, Council, and Committee Member Administrative Policy and Procedure Manual (Manual) is provided to Board, Dental Assisting Council (Council), and committee members as a reference for important laws, regulations, Department of Consumer Affairs policies, and Board policies and procedures. The purpose of the Manual is to assist members in ensuring effectiveness and efficiency of actions and decision making. The last time this Manual was reviewed was in 2021.

Board staff and the Board's legal counsel have reviewed and edited the Manual, adopted as amended May 13, 2021, and have proposed revisions for the Board to consider. Edits are mostly non substantive and represent updated information. Strikeout indicates deletion and underline indicates addition.

Action Requested

Board staff requests that the Board adopt the revised Board, Council, and Committee Member Administrative Policy and Procedure Manual.

Attachment

Draft Revisions to the Board, Council, and Committee Member Administrative Policy and Procedure Manual

Agenda Item 13.: Discussion and Possible Action on Board, Council, and Committee Member Administrative Policy and Procedure Manual
Dental Board of California Meeting
February 9, 2024

Page 1 of 1



Board, Council, and Committee Member Administrative Policy and Procedure Manual

Dental Board of California
2005 Evergreen Street, Suite 1550
Sacramento, CA 95815-3831 www.dbc.ca.gov

(Rev. February 2024)

Contents

CHAPTER 1. INTRODUCTION 4

 Overview..... 4

Definitions 4

 General Rules of Conduct..... 5

CHAPTER 2. BOARD, COUNCIL, AND COMMITTEE MEETING PROCEDURES..... 6

 Frequency of Meetings 6

 Board, Council, and Committee Member Attendance at Meetings 6

 Board, Council, and Committee Meetings 6

 Communications 6

 Council/Committee Member Participation at Board Meeting 6

 Committees..... 7

 Dental Assisting Council 7

 Public Participation 7

 Quorum..... 8

 Agenda Items..... 8

 Closed Session..... 9

 Notice of Meetings..... 9

 Notice of Meetings to be Posted on the Internet..... 9

 Record of Meetings..... 9

 Recording of Public Meetings 9

 Meeting Rules..... 10

 Use of Electronic Devices During Meetings..... 10

CHAPTER 3. TRAVEL AND COMPENSATION POLICIES AND PROCEDURES 11

 Travel Approval..... 11

 Travel Arrangements 11

 Out-of-State Travel 11

 Travel Claims..... 11

 Per Diem Compensation..... 11

CHAPTER 4. SELECTION OF OFFICERS AND COMMITTEE/LIAISON APPOINTMENTS..... 13

 Officers of the Board..... 13

Board, Council, and Committee Member Administrative Policy and Procedure Manual

Election of Officers.....	13
Procedure for Nomination.....	13
Election Process.....	13
Officer Vacancies.....	13
Absence of Officers.....	13
Attendance at Committee Meetings.....	14
Roles and Responsibilities of Board Officers/Committee Chairs/Liaisons.....	14
Creation of Task Forces.....	15
CHAPTER 5. BOARD ADMINISTRATION AND STAFF.....	16
Board Administration.....	16
Board Budget.....	16
Strategic Planning.....	16
Legislation.....	16
Communications with Other Organizations and Individuals.....	16
Media Inquiries.....	17
Legal Opinions – Requests from Outside Parties.....	17
Service of Lawsuits.....	17
Executive Officer Evaluation.....	18
Executive Officer Vacancy.....	18
Board Staff.....	18
Business Cards.....	18
CHAPTER 6. OTHER POLICIES AND PROCEDURES.....	19
Availability.....	19
Mandatory Training.....	19
Ethics Training.....	19
Sexual Harassment Prevention Training.....	19
Board Member Orientation Training (BMOT).....	19
Board Member Onboarding and Mentoring.....	20
Board Member Disciplinary Actions.....	20
Removal of Board Members.....	20
Resignation of Board Members.....	21
Form 700 – Statement of Economic Interests.....	21
Conflict of Interest.....	21

Board, Council, and Committee Member Administrative Policy and Procedure Manual

Honoraria Prohibition	21
Paid Travel to Attend Meeting Unrelated to Board Business	22
Contact with Applicants.....	22
Gifts from Applicants.....	23
Request for Records Access	23
Ex Parte Communications	23

DRAFT

CHAPTER 1. INTRODUCTION

Overview

The Dental Board of California (Board) was created by the California State Legislature in 1885. Today, the Board is one of the boards, bureaus, commission, and committee within the Department of Consumer Affairs (DCA), Business, Consumer Services and Housing Agency. The Board's highest priority is protection of the public while exercising its licensing, regulatory, and disciplinary functions. If protection of the public is inconsistent with other interests sought to be promoted, the protection of the public shall be paramount (Business and Professions Code (BPC) § 1601.2).

The Board is presently comprised of 15 members. The composition of the Board is defined in BPC sections 1601, 1602, and 1603 and includes: eight dentists appointed by the Governor, only one can be a member of a faculty of any California dental college, and one must be a dentist practicing in a nonprofit community clinic; five public members, three appointed by the Governor, one by the Speaker of the Assembly and one by the Senate Rules Committee; one registered dental hygienist appointed by the Governor; and one registered dental assistant appointed by the Governor. Board members may serve up to two full four-year terms. (BPC § 1603, subd. (c).) In addition to the two full four-year terms, Board members may serve the partial term of the vacant position to which they are appointed and up to a one-year grace period after a term expires. (BPC § 1603, subds. (a), (b).) Board members serve without a salary but are compensated \$100 per day for each meeting day and are reimbursed for travel expenses. (BPC § 103).

This Administrative Policy and Procedure Manual (Manual) is provided to Board, Dental Assisting Council (Council), and Committee members as a reference for important laws, regulations, Board policies and procedures, and DCA policies to help guide the actions of Board, Council, and Committee members and facilitate Board, Council, and Committee effectiveness and efficiency.

Definitions

BPC	Business and Professions Code
CCR	California Code of Regulations
DCA	Department of Consumer Affairs
Gov. Code	Government Code
SAM	State Administrative Manual
President	Where the term "President" is used in this manual, it will be assumed to include "their designee"

General Rules of Conduct

Board members shall not speak or act for the Board without proper authorization.

Board members shall maintain the confidentiality and security of confidential documents and information.

Board members shall commit the time necessary to prepare for Board meetings and associated responsibilities.

Each Board member shall recognize the roles and responsibilities of all Board members, treating each other equally and equitably.

Board members shall act fairly, be nonpartisan, impartial, and unbiased in their role of protecting the public.

Board members shall treat all applicants and licensees in a fair and impartial manner.

Board members' actions shall serve to uphold the principle that the Board's primary mission is to protect the public.

Board members shall not use their positions on the Board for personal, familial, or financial gain.

Board members shall refrain from working on personal and/or non-Board related business during Board meetings. If necessary, members shall leave the dais, being mindful of a quorum, to address personal and/or non-Board related business.

CHAPTER 2. BOARD, COUNCIL, AND COMMITTEE MEETING PROCEDURES

Frequency of Meetings

DCA Boards shall meet at least two times each calendar year. (BPC § 101.7.) Boards shall meet at least once each calendar year in Northern California and once each calendar year in Southern California to facilitate participation by the public and its licensees. (*Ibid.*) The Board is required to meet regularly once each year in the San Francisco Bay area and once each year in southern California (BPC § 1607.)

Special meetings may be held at such times as the Board may elect, or on the call of the Board President, or of not less than four members thereof. (BPC § 1608.)

Notice of each meeting and the time and place thereof shall be given in accordance with the Bagley-Keene Open Meeting Act. (Gov. Code § 11120 et seq.)

Board, Council, and Committee Member Attendance at Meetings (*Board Policy*)

Members shall attend each meeting. If a member is unable to attend, they must contact the Board President or the Executive Officer and request to be excused from the meeting.

Board, Council, and Committee Meetings (*Gov. Code § 11120 et seq.*)

Meetings are subject to all provisions of the Bagley-Keene Open Meeting Act. This act governs meetings of the state regulatory boards and meetings of committees of those boards where the committee consists of more than two members. It specifies meeting notice and agenda requirements and prohibits discussing or taking action on matters not included in the agenda.

Communications (*Gov. Code § 11122.5(b)*)

A majority of the members of the Board, Council, or Committee shall not, outside of a publicly noticed meeting, use a series of communications of any kind, directly or through intermediaries, to discuss, deliberate, or take action on any item of business that is within the subject matter of the state body.

Council/Committee Member Participation at Board Meeting (*Gov. Code § 11122.5(c)(4)*)

A majority of Council and Committee members not serving as a member of the Board may only attend a Board meeting as an observer and shall not participate, which includes sitting with the Board on the dais or making any statements or asking any

questions during the Board meeting, in matters under consideration by the Board during a meeting, unless there is a joint meeting of the Board and Council or Committee.

Committees

(Board Policy, BPC § 1601.1)

The Board shall be organized into standing committees pertaining to examinations, enforcement, and other subjects the Board deems appropriate.

Committees meet when they have issues to be considered to make recommendations to the full Board.

The Board President shall establish committees, whether standing or special, as the Board President deems necessary. The composition of the committees and the appointment of the members shall be determined in consultation with the Vice President, and Executive Officer. When committees include the appointment of non-Board members all affected parties should be considered. The Board President shall strive to appoint Board members to a minimum of one standing committee.

The statutory and standing committees are as follows:

- Diversion Evaluation Committee (BPC § 1695.2)
- Elective Facial Cosmetic Surgery Permit Credentialing Committee (BPC § 1638.1)
- Enforcement Committee (BPC § 1601.1)
- Licensing, Examination Certification, and Permits Committee (BPC § 1601.1)

The specific needs committees are as follows:

- Access to Care Committee
- Anesthesia Committee
- Executive Committee
- Legislative and Regulatory Committee
- Substance Use Awareness Committee
- Sunset Review Report Committee

Dental Assisting Council

(BPC § 1742)

The Council will consider all matters relating to dental assistants in California and will make appropriate recommendations to the Board and the standing Committees of the Board. The members of the Council shall include the registered dental assistant member of the Board, another member of the Board, and five registered dental assistants.

Public Participation

(Gov. Code § 11125.7(a); Board Policy)

The Board, Council, and Committees shall provide an opportunity for members of the

public to directly address the Board, Council, and Committee on each agenda item before or during the Board's, Council's, or Committee's discussion or consideration of the item. Public participation is encouraged throughout the public portion of the meetings. The chairs of the respective committees, as well as the Board President, acknowledge comments from the audience during general discussion of agenda items. In addition, each Board agenda includes public comment as a standing item of the agenda. This standing agenda item allows the public to request items to be placed on future agendas.

If the agenda contains matters that are appropriate for closed session, the agenda shall cite the statutory section and subdivision authorizing the closed session.

Quorum

(BPC § 1610; Board Policy)

Eight Board members constitute a quorum of the Board for the transaction of business; four members for the Council; four members for the Diversion Evaluation Committee (DEC); and three members for the Elective Facial Cosmetic Surgery Permit Credentialing Committee (EFCS). Ad hoc committee quorums would be a simple majority of appointed members.

Members shall be mindful of the quorum before temporarily exiting the discussion.

To determine action on a motion, a majority of the members present and voting will be counted.

Agenda Items

(Board Policy)

Board meetings generally involve:

- Board operations (e.g., budget, personnel)
- Division updates (e.g., licensing application and licensing statistics, enforcement statistics)
- Legislation that may be relevant to the practice of dentistry, including dental assisting
- Adoption or repeal of regulations
- Enforcement issues, such as adoption or non-adoption of Administrative Law Judge proposed decisions, stipulated settlements, and referral of cases to the Office of Administrative Hearings
- Committee meetings updates and recommendations

Any Board member may submit, for consideration, items for a Board meeting agenda to the Board President and Executive Officer 45 days prior to the meeting. The Board President and Executive Officer, in consultation with legal counsel, will review and, if appropriate, approve items submitted for consideration.

Closed Session

(Gov. Code § 11126(c)(2) and (3))

The Board shall meet in Closed Session to deliberate and act on disciplinary matters, litigation, and personnel matters.

- Stipulations and Proposed Decisions will be distributed to Board members for a mail vote.
- Two Board members are required to hold a decision for discussion in Closed Session at a future Board meeting. If only two members hold for discussion and one of those members is unable to attend the meeting, the Board's action will revert to the majority vote on that decision.
- Settlement agreements for the renovation, surrender, or interim suspension of a license are reviewed and approved by the Executive Officer without Board member vote per CCR, title 16, § 1001.

Notice of Meetings

(Gov Code § 11125)

Meeting notices shall be given and made available at least 10 days in advance of the meeting. The notice shall include a staff person's name, work address and work telephone number who can provide further information prior to the meeting.

Notice of Meetings to be Posted on the Internet

(Gov Code § 11125)

The notice of meeting and agenda shall be made available on the Internet at least 10 days in advance of the meeting, and shall include the name, address, and telephone number of any person who can provide further information prior to the meeting but need not include a list of witnesses expected to appear at the meeting. The written notice shall additionally include the address of the Internet site where notices are available.

Record of Meetings

(Board Policy)

The minutes are a summary, not a transcript, of each Board, Council, and Committee meeting. They shall be prepared by Board staff and submitted for review and approval by members at the next Board, Council and Committee meeting. When approved, the minutes shall serve as the official record of the meeting.

Board meetings are webcast in real time when webcasting resources are available. Archived copies of the webcast are available on the Board's website approximately 30 days after the meeting is held.

Recording of Public Meetings

(Board Policy; Gov Code § 11124.1(b))

Any audio or visual recording of an and public meeting made for whatever purpose by or at the direction of the state body shall be subject to inspection pursuant to the

California Public Records Act but may be erased or destroyed upon Board approval of the minutes and after 30 days after the recording.

Meeting Rules

(CCR, Title 16, § 1002)

Board, Council, and Committee meetings are conducted following Robert's Rules of Order, to the extent that it does not conflict with state law (e.g., Bagley-Keene Open Meeting Act), as a guide when conducting the meetings.

Use of Electronic Devices During Meetings

(Gov Code § 11122.5(b)(1))

Board members should not text or email one another during a meeting on any matter within the Board's jurisdiction. Using electronic devices to communicate secretly in such a manner would violate the Bagley-Keene Open Meeting Act. Where laptop computers or tablets are used by Board members at the meeting because the Board provides materials electronically, the Board President shall make an announcement at the beginning of the meeting as to the reason for the use of laptop computers or tablets.

CHAPTER 3. TRAVEL AND COMPENSATION POLICIES AND PROCEDURES

Travel Approval

(CCR § 599.615 through 599.638.1 of Article 2 of Subchapter 1 of Chapter 3 of Division 1 of Title 2)

Board, Council, and Committee members shall have Board President approval for all Board-related travel except for regularly scheduled Board, Council, and Committee meetings to which the member is assigned.

Travel Arrangements

(Board Policy)

Board, Council, and Committee members should coordinate with the Board's Administrative Analyst on travel arrangements and lodging accommodations.

Out-of-State Travel

(SAM Chapter 700 et seq.)

For out-of-state travel, Board members will be reimbursed for actual lodging expenses and will be reimbursed for meal and supplemental expenses. Out-of-state travel for all persons representing the State of California is controlled and must be approved by the Governor's Office.

Travel Claims

(SAM Chapter 700 et seq. and CCR Sections 599.615 through 599.638.1 of Article 2 of Subchapter 1 of Chapter 3 of Division 1 of Title 2)

Rules governing reimbursement of travel expenses for Board members are consistent with rules that apply to management-level state staff. All expenses shall be claimed on the appropriate travel expense claim forms. The Board's Administrative Analyst maintains these forms and completes them as needed. It is advisable for Board members to submit their travel expense forms immediately after returning from a trip and not later than two weeks following the trip.

For the expenses to be reimbursed, Board members shall follow the procedures contained in DCA Travel Guide that are periodically disseminated by the DCA Director and are provided to Board members.

Per Diem Compensation

(BPC § 103)

Board, Council, and Committee members will receive per diem compensation for each day spent in the discharge of official duties and shall be reimbursed for traveling and other expenses necessarily incurred in the performance of official duties.

Per Board policy, the following general guidelines shall apply to the payment of per diem compensation or reimbursement for travel:

1. No per diem compensation or reimbursement for travel-related expenses shall be paid to Board, Council, or Committee members except for attendance at official Board, Council, or Committee meetings. Attendance at gatherings, events, hearings, conferences, or meetings other than official Board, Council or Committee meetings shall be approved in advance by the Board President. The Executive Officer shall be notified of the event and approval shall be obtained from the Board President prior to member's attendance.
2. The term "day actually spent in the discharge of official duties" shall mean such time as is expended from the commencement of a Board, Council, or Committee meeting to the conclusion of that meeting.

Where it is necessary for a Board member to leave early from a meeting, the Board President shall determine if the member has provided a substantial service during the meeting and, if so, shall authorize payment of compensated per diem and reimbursement for travel-related expenses.

For specified Board, Council, or Committee work, members will be compensated for actual time spent performing work authorized by the Board President. That work includes, but is not limited to, authorized attendance at gatherings, events, meetings, hearings, or conferences, and committee work. That work does not include preparation time for Board, Council, or Committee meetings. Members cannot claim per diem compensation for time spent traveling to and from a Board, Council, or Committee meeting.

CHAPTER 4. SELECTION OF OFFICERS AND COMMITTEE/LIAISON APPOINTMENTS

Officers of the Board (BPC §1606)

The Board shall elect from its members a President, a Vice President, and a Secretary.

Election of Officers (Board Policy)

It is Board policy to elect officers at the final meeting of the calendar year for service during the next calendar year, unless otherwise decided by the Board. The newly elected officers shall assume the duties of their respective offices on January 1 of the new year.

Procedure for Nomination (Board Policy)

Board members interested in running for President, Vice-President, and Secretary shall independently submit their name to the Executive Officer no later than 30 days before the final scheduled meeting of the calendar year.

Election Process (Board Policy)

The Board's Executive Officer shall conduct the election of officers and shall set the general election procedure by electing the President, then the Vice President and lastly the Secretary. Members may vote by aye (yes), nay (no) or abstain.

Officer Vacancies (Board Policy)

If an office becomes vacant during the year, an election shall be held at the next Board meeting. If the office of the President becomes vacant, the Vice President shall assume the office of the President. Elected officers shall then serve the remainder of the term.

Absence of Officers (Board Policy)

If an officer is absent from two consecutive meetings, the Board may consider whether it wishes to vacate that position. If the office is that of the President, the Vice President shall assume the office of the President. If the office is that of the Vice President, the Secretary shall assume the office of the Vice President. A vacancy in the office of the Secretary shall be voted on by Board members. Officers shall then serve the remainder of the term.

Attendance at Committee Meetings
(Gov Code § 11122.5(c)(6))

If a Board member wishes to attend a meeting of a committee of which they are not a member, that Board member cannot participate or vote during the committee meeting and shall not sit on the dais.

Roles and Responsibilities of Board Officers/Committee Chairs/Liaisons
(Board Policy)

President

- Acts as the spokesperson for the Board (e.g., attends legislative hearings and testifies on behalf of the Board, attends meetings with stakeholders and legislators on behalf of Board, and signs letters on behalf of the Board).
- Meets and/or communicates with the Executive Officer on a regular basis.
- Provides oversight to the Executive Officer in performance of duties.
- Approves leave requests, verifies accuracy, approves member timesheets, approves travel, and signs travel expense claims for the Executive Officer.
- Coordinates the annual Executive Officer evaluation process, including contacting the DCA Office of Human Resources to obtain a copy of the Executive Officer Performance Evaluation Form, distributes the evaluation form to members, and collates the ratings and comments for discussion.
- Authors a President's message for Board meetings and published newsletters.
- Approves Board meeting agendas.
- Chairs and facilitates Board meetings.
- Chairs the Executive Committee.
- Signs specified Board enforcement approval orders.
- Establishes committees and appoints chairs and members.
- Establishes two-person subcommittees and/or work groups to research policy questions when necessary.
- Attends Dental Hygiene Board of California meetings.

Vice President

- May assume the duties above in the President's absence.
- Is a member of the Executive Committee.
- Coordinates the revision of the Board, Council, and Committee Member Administrative Policy and Procedure Manual.

Secretary

- Calls the roll at each Board meeting and reports that a quorum has been established.
- Calls the roll for each action item.

Council or Committee Chair

- Reviews agenda items with Executive Officer prior to Council or Committee meetings.

- Approves the Council or Committee agendas.
- Chairs and facilitates Council or Committee meetings.
- Calls the roll or appoints a member to call the roll for each action item.
- Reports the activities of the Council or Committee to the full Board.

Liaisons

Members acting as liaisons to committees are responsible for keeping the Board informed regarding emerging issues and recommendations made at the Committee level. The Council Chair serves as the Council's liaison to the Board. (BPC § 1742(i).)

Creation of Task Forces
(Board Policy)

It is the policy of the Board that:

- 1) task forces will be appointed sparingly as the exception rather than the rule and only when the Board finds it cannot address a specific and well defined issue through the existing committee structure;
- 2) task force members may be appointed by the Board President but must be approved by the full Board;
- 3) the charge given to the task force will be clear, specific, in writing, and presented to the Board at the time of appointment;
- 4) task forces of three or more members appointed by the Board are subject to the same Open Meeting laws as the Board (as required by Government Code § 11121(c));
- 5) all task forces shall give staff at least 45 days advance notice of the time, place, and general agenda for any task force meeting;
- 6) working groups will meet and report regularly and provide the Board with minutes after every meeting;
- 7) no task force recommendation will be the basis for Board action in the absence of a formal written report from the task force to the Board.

CHAPTER 5. BOARD ADMINISTRATION AND STAFF

Board Administration

(DCA Board Member Orientation Training)

Board members should be concerned primarily with formulating decisions on Board policies rather than decisions concerning the means for carrying out a specific course of action. It is inappropriate for Board members to become involved in the details of program delivery. Strategies for the day-to-day management of programs and staff shall be the responsibility of the Executive Officer.

Board Budget

(Board Policy)

The Executive Officer shall serve as the Board's budget liaison and shall assist staff in the monitoring and reporting of the budget to the Board. The Executive Officer, or the Executive Officer's designee, will attend and testify at legislative budget hearings and shall communicate all budget issues to the Governor's Administration and California State Legislature.

Strategic Planning

(Board Policy)

The Executive Committee shall have overall responsibility for the Board's Strategic Planning process. The Executive Officer shall serve as the Board's strategic planning liaison with staff and shall assist staff in the monitoring and reporting of the strategic plan to the Board. The Board will conduct periodic strategic planning sessions and may utilize a facilitator, such as the DCA SOLID Planning Solutions Unit to conduct the strategic planning process.

Legislation

(Board Policy)

When time constraints preclude Board action, the Board delegates the authority to the Executive Officer and the Chair of the Legislative and Regulatory Committee to act on legislation that would change the Dental Practice Act, impact a previously established Board policy, or affect the public's health, safety, or welfare. Prior to taking a position on legislation, the Executive Officer shall consult with the Board President and Legislative and Regulatory Committee Chair. The Board shall be notified of such action as soon as possible.

Communications with Other Organizations and Individuals

(Board Policy)

The official spokesperson for the Board is the Board President. The President may designate the Executive Officer, other Board members, or staff to speak on behalf of the

Board. Board members shall not speak or act for the Board without proper authorization.

It is the policy of the Board to accommodate speaking requests from all organizations, schools, consumer groups, or other interested groups, whenever possible. If the Board representative is addressing a dental school or group of potential candidates for licensure, the program must be open to all interested parties. The President may authorize Board members to speak to schools, organizations, consumer groups, or other interested groups upon request by members or written requests from said schools, organizations, or groups.

Media Inquiries
(Board Policy)

If a member of the Board, Council, or Committee receives a media call, the member should promptly refer the caller to the DCA Public Information Officer who is employed to interface with all types of media on any type of inquiry. It is required that members make this referral as the power of the Board is vested in the Board itself and not with an individual Board member. Expressing an opinion can be misconstrued as a Board policy or position and may be represented as a position that the Board has taken on a particular issue.

A Board member who receives a call should politely thank the caller for the call, but state that it is the Board's policy to refer all such requests to the DCA Public Information Officer. The Board members should then send an email to the Executive Officer indicating they received a media communication and relay any information supplied by the individual.

Legal Opinions – Requests from Outside Parties
(Board Policy)

The Board does not provide legal services for persons or entities outside of the Board. Requests for legal opinions from outside entities are to be discussed with the Board President and Legal Counsel to determine whether it is an issue over which the Board has jurisdiction and the opinion, if prepared, could be posted on the Board's website and benefit the public rather than one individual. Persons making such requests would be notified that the Board will consider the request and may or may accept the request for a legal opinion, and, if accepted, the legal opinion would be posted on the Board's website rather than sent solely to the requestor.

Service of Lawsuits
(Board Policy)

Board members may receive service of a lawsuit against themselves and the Board pertaining to a certain issue (e.g., a disciplinary matter, civil complaint, legislative matter, etc.). To prevent a confrontation, Board members should accept service. Upon receipt, Board members should notify the Executive Officer of the service and indicate

the name of the matter that was served and any pertinent information. Board members should then mail the entire package that was served to the Executive Officer as soon as possible. The Board's legal counsel will provide instructions to Board members on what is required of them once service has been made. Board members may be required to submit a request for representation to the Board to provide to the Office of the Attorney General's Office.

Executive Officer Evaluation
(Board Policy)

The Board shall evaluate the performance of the Executive Officer annually.

Executive Officer Vacancy
(Board Policy)

In the event the Executive Officer position becomes vacant, the Board may, at its discretion, appoint the Assistant Executive Officer, another employee of the Board, or a DCA employee as the Acting Executive Officer or Interim Executive Officer. An Acting Executive Officer is only entitled to their current salary. If an Interim Executive Officer is appointed, the Board shall set their salary at an amount within the Executive Officer's salary range. The DCA Office of Human Resources will assist with the temporary appointment process and the selection process for a new Executive Officer.

Board Staff
(DCA Office of Human Resources Policy Manual)

Employees of the Board, except for the Executive Officer, are civil service employees. Their employment, pay, benefits, discipline, termination, and conditions of employment are governed by civil service laws and regulations and often by collective bargaining labor agreements. Because of this complexity, it is appropriate that the Board delegate authority and responsibility for management of the civil service staff to the Executive Officer. Consequently, the Executive Officer shall solely be responsible for day-to-day personnel transactions.

Business Cards
(Board Policy)

Business cards will be provided, if requested, to each Board Officer with the Board's office address, telephone and fax number, and website address. A Board Officer's business address, telephone and fax number, and email address may be listed on the card at the member's request.

CHAPTER 6. OTHER POLICIES AND PROCEDURES

Availability (Board Policy)

It is recommended that Board members who will be unavailable for a period longer than seven consecutive days notify the Executive Officer.

Mandatory Training (DCA Policy and various codes)

State law requires Board members within to complete training in several important areas, including ethics, sexual harassment prevention, and Board Member Orientation Training.

Ethics Training http://www.dcaboardmembers.ca.gov/training/ethics_orientation.shtml (Gov Code §11146.1)

California law requires all appointees to take an ethics training within the first six months of their appointment and to repeat this ethics training every two years throughout their term.

The training includes important information on activities or actions that are inappropriate or illegal. For example, generally public officials cannot take part in decisions that directly affect their own economic interests. They are prohibited from misusing public funds, accepting free travel, and accepting honoraria. There are limits on gifts.

An online, interactive version of the Conflict of Interest Ethics Training is available on the DCA Learning Management System (LMS).

Sexual Harassment Prevention Training http://www.dcaboardmembers.ca.gov/training/harassment_prevention.shtml (Gov Code § 12950.1)

All new board members are required to attend at least two hours of classroom or other interactive training and education regarding sexual harassment prevention within six months of their appointment. An online, interactive version of the Sexual Harassment Prevention Training is available on the DCA LMS.

Board Member Orientation Training (BMOT) (BPC § 453)

Every newly appointed and reappointed board member is required to complete an orientation and training offered by DCA within one year of assuming office. BMOT covers the functions, responsibilities, and obligations that come with being a member of a DCA board.

For more information and assistance with scheduling any of these trainings, please contact the Board's Administrative Analyst.

Board Member Onboarding and Mentoring (Board Policy)

Within one week of appointment, both the Board President and Executive Officer will contact new members to welcome them and review mandatory paperwork. New members will also receive information about BMOT (see above). New Board members will be assigned a "mentor" (i.e., a current Board member) to assist the Executive Officer with orienting the member to the Board, licensing, and enforcement processes, etc. Resources include, for example:

- Contacts List
- Organizational Chart
- Enforcement PowerPoint Presentation
- Newsletters
- Sections from the Board, Council, and Committee Member Administrative Policy and Procedure Manual
- Strategic Plan
- Sunset Reports
- Travel Guide

Board Member Disciplinary Actions (Board Policy)

The Board may censure a member if, after a hearing before the Board, the Board determines that the member has acted in an inappropriate manner.

The President of the Board shall sit as President of the hearing unless the censure involves the President's own actions, in which case the Vice President of the Board shall sit as President. In accordance with the Bagley-Keene Open Meeting Act, the censure hearing shall be conducted in open session.

Removal of Board Members (BPC § 106, 106.5, 1605)

The Governor has the power to remove from office at any time any member of any Board appointed by them for continued neglect of duties required by law or for incompetence or unprofessional or dishonorable conduct. The Governor also may remove from office a Board member who directly or indirectly discloses examination questions to an applicant for examination for licensure. Those proceedings would be conducted in accordance with the Bagley-Keene Open Meeting Act, and that member would be subject to a misdemeanor violation (BPC § 123).

Resignation of Board Members
(Gov Code §1750)

If it becomes necessary for a Board member to resign, a letter shall be sent to the appropriate appointing authority (i.e., Governor, Senate Rules Committee, or Speaker of the Assembly) with the effective date of the resignation. State law requires written notification. A copy of this letter shall also be sent to the DCA Director, Board President, and the Executive Officer.

Form 700 – Statement of Economic Interests
(Gov Code § 87203; CCR, Title 2, § 18730)

Board, Council, and Committee members are public officials required to annually report their investments, interests in real property, and income to the Fair Political Practices Commission using the Form 700, Statement of Economic Interests, which is a publicly disclosable record. Each member must submit their Form 700 using the online submission process.

Information on the Form 700 and other conflicts of interest topics can be found at: https://www.dca.ca.gov/about_us/board_members/required_training.shtml.

Conflict of Interest
(Gov Code § 87100; BPC § 450; DCA Policy)

No Board, Council, or Committee member may make, participate in making, or in any way attempt to use their official position to influence a governmental decision in which they know or have reason to know they have a financial interest. Any member who has a financial interest shall disqualify themselves from making or attempting to use their official position to influence the decision.

Conflicts of interest or disqualification issues mainly arise from four general sources: (1) financial conflicts arising under the Political Reform Act of 1974 (Gov Code § 87100 et seq.); (2) common law conflicts of interest arising from personal interest or bias, or even the potential appearance of a bias or personal interest in a matter even in the absence of a financial conflict of interest; (3) the general provisions of BPC §450 et seq. that detail the qualifications and restrictions on public members of a board; and (4) conflicts arising under the DCA Incompatible Work Activities Policy.

Any member who feels they are entering into a situation where there is a potential for a conflict of interest should immediately consult the Executive Officer.

Honoraria Prohibition
(Gov Code § 89502)

As a general rule, Board, Council, and Committee members should decline honoraria for speaking at, or otherwise participating in, professional association conferences and meetings. A member of a state board is precluded from accepting an honorarium from any source if the board member would be required to report the receipt of income or

gifts from that source on their statement of economic interest.

There are limited exceptions to the honoraria prohibition. The acceptance of an honorarium is not prohibited under the following circumstances: (1) when an honorarium is returned to the donor (unused) within 30 days; (2) when an honorarium is delivered to the State Controller within thirty days for donation to the General Fund (for which a tax deduction is not claimed); and (3) when an honorarium is not delivered to the member, but is donated directly to a bona fide charitable, educational, civic, religious, or similar tax exempt, non-profit organization.

Considering this prohibition, members should report all offers of honoraria to the Board President, so that they, in consultation with the Executive Officer and the Board's legal counsel, may determine whether the potential for conflict of interest exists.

Paid Travel to Attend Meeting Unrelated to Board Business
(Gov Code § 89506)

In general, payments by a third party for a public official's travel are considered a gift, subject to the per year gift limit, and must be reported by the official on their statement of economic interests (i.e., Form 700); however, there are exceptions to this rule. Payments, advances, or reimbursements, for travel, including actual transportation and related lodging and subsistence that is reasonably related to a legislative or governmental purpose, or to an issue of state, national, or international public policy, are not prohibited and are not subject to the per year gift limit if either of the following apply:

- (1) The travel is in connection with a speech given by the member, the lodging and subsistence expenses are limited to the day immediately preceding, the day of, and the day immediately following the speech, and the travel is within the United States.
- (2) The travel is provided by a government, a governmental agency, a foreign government, a governmental authority, a bona fide public or private educational institution, as defined in § 203 of the Revenue and Taxation Code, a nonprofit organization that is exempt from taxation under Section 501(c)(3) of the Internal Revenue Code, or by a person domiciled outside the United States which substantially satisfies the requirements for tax-exempt status under § 501(c)(3) of the Internal Revenue Code.

Keep in mind that the rules regarding financial conflicts of interest are complex, and, therefore, Board members should contact the DCA Ethics Officer at (916) 574-8220 for assistance.

Contact with Applicants
(Board Policy)

Board, Council, and Committee members shall not intervene on behalf of an applicant

for licensure for any reason as this may create a conflict of interest. Members should forward all contacts or inquiries to the Executive Officer.

Gifts from Applicants
(Board Policy)

Gifts of any kind to Board, Council and Committee members or Board staff from applicants for licensure with the Board shall not be permitted.

Request for Records Access
(Board Policy)

No Board, Council, or Committee member may access the file of a licensee or applicant without the Executive Officer's knowledge and approval of the conditions of access. Records or copies of records shall not be removed from the Board's office.

Ex Parte Communications
(Gov Code § 11430.10 et seq.)

The Administrative Procedure Act prohibits *ex parte* communications.

An "ex parte" communication is a communication to the decision-maker made by one party to an administrative action without participation by the other party. While there are specified exceptions to the general prohibition, the key provision is found in Gov Code § 11430.10, subdivision (a), which states:

"While the proceeding is pending, there shall be no communication, direct or indirect, regarding any issue in the proceeding to the presiding officer from an employee or representative of an agency that is a party or from an interested person outside the agency, without notice and an opportunity for all parties to participate in the communication."

Board members, as adjudicators, are prohibited from an *ex parte* communication with Board investigative or prosecutorial staff while a proceeding is pending. (Gov Code §§ 11425.10, subd. (a)(4), 11430.10, subd. (a).)

Occasionally, an applicant who is being formally denied licensure, or a licensee against whom disciplinary action is being taken, will attempt to directly contact Board members. If the communication is written, the person should read only far enough to determine the nature of the communication. Once the Board member realizes it is from the person against whom an action is pending, they should reseal the documents and send them to the Executive Officer.

If a Board member receives a telephone call from an applicant or licensee against whom an action is pending, the Board member should immediately tell the person they cannot speak to them about the matter. If the person insists on discussing the case, they should be told that the Board member would be required to recuse themselves

from any participation in the matter. Therefore, continued discussion is of no benefit to the applicant or licensee.

If a Board member believes that they have received an unlawful *ex parte* communication, they should contact the Board's legal counsel.

DRAFT



MEMORANDUM

DATE	January 25, 2024
TO	Members of the Dental Board of California
FROM	David Bruggeman, Legislative and Regulatory Specialist Dental Board of California
SUBJECT	Agenda Item 14.a.: Status Update on Pending Regulations

Background

This memo addresses those rulemaking packages that have moved forward in the rulemaking process since the last Dental Board of California (Board) meeting. Rulemaking packages that require Board action will be presented as separate agenda items or will be presented at a future Board meeting.

Dental Assisting Comprehensive Rulemaking Regulations (California Code of Regulations (CCR), Tit. 16 §§ 1080 et. seq.)

Summary: At its November 8, 2023 meeting, the Dental Assisting Council (Council) moved to appoint Council Chair Cara Miyasaki and Vice Chair Jeri Fowler to a two-person working group to review the dental assisting regulations and develop updated language for future rulemaking packages.

Update: The first rulemaking package associated with these regulations, addressing dental assisting examinations (Article 4. "Examinations," California Code of Regulations, tit. 16 (16 CCR), §§ 1080 et seq.), was approved for initiation of the rulemaking process by the Board at the November 2023 Board Meeting.

Vice Chair Fowler, on behalf of the working group, met with staff, the Board's Executive Officer and Regulations Counsel on January 24, 2024 to identify a strategy for revising the remaining dental assisting regulations. As a result of that meeting, the working group will be preparing the following proposals for Council and Board consideration at a future meeting:

- A Section 100 rulemaking package to repeal CCR, title 16, section 1069, and to amend sections 1076 and 1086 to remove references to section 1069 (related to

Agenda Item 14.a.: Status Update on Pending Regulations
Dental Board of California Meeting
February 9, 2024

Page 1 of 4

permit processing times). Section 1069 concerns the implementation of requirements for minimum and maximum permit and license processing times in accordance with the Permit Reform Act of 1981, a part of the Government Code that has since been repealed. A Section 100 rulemaking package is intended to address changes without regulatory effect and permits updating of existing regulations through a shorter procedure than what is required for a regular rulemaking.

- A rulemaking package to update the Board’s regulations in Article 3. “Application for Licensure” (16 CCR, §§ 1076–1079.3) of Chapter 3 of Division 10, which addresses dental assisting applications. The package would update the existing language; add language for orthodontic assistant (OA) and dental sedation assistant (DSA) permit applications; and, in consultation with Dental Hygiene Board of California staff, repeal any language for registered dental hygienist (RDH) applications that has been supplanted by Dental Hygiene Board of California regulations.

The working group aims to have the language for the Section 100 rulemaking package ready for review and possible approval by the Council and the Board at the May 2024 Council and Board meetings. The language for the dental assisting applications rulemaking package will be prepared for consideration at a later meeting. Once these packages are initiated, the working group will shift focus to the remaining articles of the dental assisting regulations: Article 1. “General Provisions,” Article 2. “Educational Programs,” and Article 5. “Duties and Settings.”

Lost, Destroyed or Mutilated Licenses (CCR, Tit. 16 §§ 1012 and 1021) and Inactive Licenses (CCR, Tit. 16 § 1017.2)

Summary of Proposed Changes: This proposed rulemaking would amend CCR, title 16, section 1012 to change the form used for an applicant to both place their license on inactive status and to restore their license to active status. The proposed amendments also would change how an applicant complies with the required continuing education requirements when seeking active status from providing evidence to simply self-certifying. Section 1021, subsection (i) would need to be amended to include the Pocket License in the fee for replacement certificates. The proposed rulemaking would amend section 1017.2 to require licensees seeking a replacement license to submit a form and to eliminate the requirement for providing fingerprints with their application.

Update: The package was filed with the Office of Administrative Law (OAL) and published in the Notice Register on November 17, 2023. This started the 45-day Public Comment period which ended on January 3, 2024. No comments were received during the comment period and there were no requests for a hearing on the proposal. As a result, Board staff prepared the final package, and it was filed with OAL on January 16, 2024. A response from OAL is expected on or before February 28, 2024.

AB 107: Temporary Licenses for Military Spouses or Partners (CCR, Tit. 16 § 1006)

Summary of Proposed Changes: This proposed rulemaking would adopt CCR, title 16, section 1006 to set the application requirements and procedures for individuals seeking temporary licensure pursuant to Business and Professions Code section 115.6. This section of code permits spouses and domestic partners of military personnel assigned to duty stations in California to apply for temporary licensure to practice the profession for which they were authorized to practice in another U.S. jurisdiction. Such licensure would last no longer than 12 months.

Update: The Board responded to comments received during the initial comment period and approved modified text for this package at the November 2023 Board meeting. The modified text was noticed for a 15-day public comment period that ran from November 17 through December 3, 2023. The Board received no comments during that period. Board staff drafted the final package for filing with OAL. The package was filed with OAL on January 19, 2024. A response from OAL is expected on or before March 4, 2024.

Updates to the Board's Uniform Standards for Substance-Abusing Licensees (CCR, Tit. 16, §§ 1018.01 and 1018.02)

Summary of Proposed Changes: This rulemaking would update the Board's Uniform Standards for Substance-Abusing Licensees to reflect changes to the standards required to be adopted pursuant to Business and Professions Code section 315 and made by the Department of Consumer Affairs' Substance Abuse Coordination Committee (SACC) since the Board's last update of this document in 2013. An update to the Board's Uniform Standards requires the Board to update the regulations that incorporates the Uniform Standards by reference. This rulemaking would also add definitions of relevant terms related to discipline for substance abusing licensees to section.1018.01. The rulemaking would adopt new section 1018.02 to describe the processes involved in the Board issuing a Cease Practice Order, and the steps for a substance-abusing licensee subject to the order to appeal the order, to petition for its removal and to be restored to full practice.

Update: The Board approved proposed text for this rulemaking at its November 2023 Board meeting. Board staff have prepared the initial rulemaking package, which is currently under review by Regulations Counsel.

Dental Assisting Exams (CCR, Tit. 16, §§ 1080, 1080.1, 1080.2, 1080.3, 1081, 1081.1, 1081.2, 1081.3, 1081.4, 1082, 1082.1, 1082.2, 1082.3, 1083)

Summary of Proposed Changes: This rulemaking would update the Board's dental assisting examinations to reflect changes in law and exam administration, including the elimination of the clinical and practical examinations for dental assisting licensure. The proposal would incorporate by reference the examination outlines developed for the Board by the Department's Office of Professional Examination Services for the RDA, Registered

Dental Assistant in Extended Functions, DSA, and OA examinations. The rulemaking also repeals certain sections of Board regulations that have been superseded by regulations established by the Dental Hygiene Board of California.

Update: The proposed text was approved by the Board at the November 2023 Board meeting. Board staff have developed the rulemaking package, which is currently under review by the Board's Regulations Counsel.

Application for Licensure by Examination (CCR, Title 16 §§ 1021 and 1028)

Summary of Proposed Changes: This rulemaking would update the Board's application regulations for licensure by examination to reflect changes in the dentist examination landscape. It would repeal the existing application form and place the application requirements in narrative form, updating those requirements to reflect changes in law since the regulations were last updated. The proposed rulemaking also raises the fee for application for licensure by examination from \$400 to \$500.

Update: The proposed text was approved by the Board at the November 2023 Board meeting. Board staff are working on the initial rulemaking package.

Action Requested

This item is informational only. No action is requested.



MEMORANDUM

DATE	January 22, 2024
TO	Members of the Dental Board of California
FROM	David Bruggeman, Legislative and Regulatory Specialist Dental Board of California
SUBJECT	Agenda Item 14.b.: Discussion and Possible Action to Appoint a Working Group to Develop Proposed Amendments to California Code of Regulations (CCR), Title 16, Section 1005, Minimum Standards for Infection Control

Background

Business and Professions Code (BPC) section 1680(ad) makes it unprofessional conduct for a licensee to knowingly fail to protect patients by failing to follow the infection control guidelines of the Dental Board of California (Board). The Board is obligated by this section to review infection control guidelines on an annual basis, if necessary, and to review the guidelines with the Dental Hygiene Board of California (Dental Hygiene Board) to establish a consensus.

As stipulated in this section of BPC, the Board “shall consider referencing the standards, regulations, and guidelines of the State Department of Public Health developed pursuant to Section 1250.11 of the Health and Safety Code and the standards, guidelines, and regulations pursuant to the California Occupational Safety and Health Act of 1973 (Part 1 (commencing with Section 6300) of Division 5 of the Labor Code) for preventing the transmission of HIV, hepatitis B, and other bloodborne pathogens in health care settings.”

California Code of Regulations (CCR), section 1005, further details the Board’s infection control guidelines. This section was last updated in 2011. The Dental Hygiene Board regulations (section 1133) simply refers to the Board’s regulations in section 1005.

The Board last considered updates to these regulations in 2017 and 2018 following updates to the Centers for Disease Control and Prevention document “Summary of Infection Prevention Practices in Dental Settings: Basic Expectations for Safe Care.” Action on these regulations was also prompted by passage of Assembly Bill 1277 (Daly, Chapter 413, Statutes of 2017), which required the Board to amend its regulations to require the use of water that is either sterile or containing recognized disinfectant or

Agenda Item 14.b.: Discussion and Possible Action to Appoint a Working Group to Develop Proposed Amendments to California Code of Regulations (CCR), Title 16, Section 1005, Minimum Standards for Infection Control
Dental Board of California Meeting
February 9, 2024

Page 1 of 2

antibacterial properties when performing dental procedures that expose dental pulp¹. The Board approved regulatory language at the May 16-17, 2018 Board meeting, which is included with this memo.

Action Requested

Given the time that has passed since the Board approved proposed changes to the attached regulatory language, Board staff recommend reexamination of those standards for possible updates to the language to reflect changes in standards and techniques related to infection control. This would require the Board rescind its approval of the May 2018 proposed language.

Staff are also recommending the appointment of a one or two-person working group that would coordinate with staff and the Dental Hygiene Board in updating the language to reflect current standards and best practices related to infection control. The resulting language would come before the Board at a future Board meeting to initiate a rulemaking to amend section 1005.

Staff are requesting that the Board make two motions, one to address the previously approved regulatory language and the other to form the one or two-person working group.

Suggested Motion Language – Rescinding Previously Approved Language

Move to rescind approval of the proposed rulemaking language approved by the Board on May 16, 2018, to amend title 16, CCR section 1005.

Suggested Motion Language – Working Group

Move to appoint a working group composed of (insert name(s) of working group member(s)) to review and make recommendations to possibly revise the Board's regulations on infection control in consultation with Regulations Counsel and Board staff and bring back any revised text for discussion and possible action at a future Board meeting.

¹ Code section 1601.6 was repealed by SB 1491 in September 2018, but this language was moved to Code section 1680(ag) as one of the grounds for unprofessional conduct related to infection control.

**DENTAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS**

PROPOSED LANGUAGE

Amend Section 1005 of Division 10 of Title 16 of the California Code of Regulations to read as follows:

§ 1005. Minimum Standards for Infection Control.

(a) Definitions of terms used in this section:

(1) "Standard precautions" are a group of infection prevention practices that apply to all patients, regardless of suspected or confirmed infection status, in any setting in which healthcare is delivered. These include: hand hygiene, use of gloves, gown, mask, eye protection, or face shield, depending on the anticipated exposure, and safe handling of sharps. Standard precautions shall be used for care of all patients regardless of their diagnoses or personal infectious status.

(2) "Critical items" confer a high risk for infection if they are contaminated with any microorganism. These include all instruments, devices, and other items used to penetrate soft tissue or bone.

(3) "Semi-critical items" are instruments, devices and other items that are not used to penetrate soft tissue or bone, but [enter the oral cavity and](#) contact oral mucous membranes, non-intact skin or other potentially infectious materials (OPIM).

(4) "Non-critical items" are instruments, devices, equipment, and surfaces that come in contact with soil, debris, saliva, blood, [Other Potentially Infectious Materials](#) (OPIM) and intact skin, but not oral mucous membranes.

(5) "Low-level disinfection" is the least effective disinfection process. It kills some bacteria, some viruses and fungi, but does not kill bacterial spores or mycobacterium tuberculosis var bovis, a laboratory test organism used to classify the strength of disinfectant chemicals.

(6) "Intermediate-level disinfection" kills mycobacterium tuberculosis var bovis indicating that many human pathogens are also killed. This process does not necessarily kill spores.

(7) "High-level disinfection" kills some, but not necessarily all bacterial spores. This process kills mycobacterium tuberculosis var bovis, bacteria, fungi, and viruses.

(8) "Germicide" is a chemical agent that can be used to disinfect items and

surfaces based on the level of contamination.

(9) “Sterilization” is a validated process used to render a product free of all forms of viable microorganisms.

(10) “Cleaning” is the removal of **visible** soil (e.g., organic and inorganic material) debris and OPIM from objects and surfaces and shall be accomplished manually or mechanically using water with detergents or enzymatic products.

(11) “Personal Protective Equipment” (PPE) is specialized clothing or equipment worn or used for protection against a hazard. PPE items may include, but are not limited to, gloves, masks, respiratory devices, protective eyewear and protective attire which are intended to prevent exposure to blood, body fluids, OPIM, and chemicals used for infection control. General work attire such as uniforms, scrubs, pants and shirts, are not considered to be PPE. [PPE must comply with Cal/OSHA Bloodborne Pathogens \(BPP\) standards \(Title 8, Cal. Code of Regs., Section 5193\).](#)

(12) “Other Potentially Infectious Materials” (OPIM) means any one of the following:

(A) Human body fluids **and such as** saliva in dental procedures and any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids.

(B) Any unfixed tissue or organ (other than intact skin) from a human (living or dead).

~~(C) Any of the following, if known or reasonably likely to contain or be infected with human immunodeficiency virus (HIV), hepatitis B virus (HBV), or hepatitis C virus (HCV):~~

~~1. (C) Cell, tissue, or organ cultures from humans or experimental animals;~~

~~2. (D) Blood, organs, or other tissues from experimental animals; or~~

~~3. (E) Culture medium or other solutions.~~

(13) “Dental Healthcare Personnel” (DHCP), are all paid and non-paid personnel in the dental healthcare setting who might be occupationally exposed to infectious materials, including body substances and contaminated supplies, equipment, environmental surfaces, water, or air. DHCP includes dentists, dental hygienists, dental assistants, dental laboratory technicians (in-office and commercial), students and trainees, contractual personnel, and other persons not

directly involved in patient care but potentially exposed to infectious agents (e.g., administrative, clerical, housekeeping, maintenance, or volunteer personnel).

(b) All DHCP shall comply with infection control precautions and enforce the following minimum precautions to protect patients and DHCP and to minimize the transmission of pathogens in health care settings as mandated by the California Division of Occupational Safety and Health (Cal/OSHA).

(1) Standard precautions shall be practiced in the care of all patients.

(2) A written protocol shall be developed, maintained, [reviewed annually](#), and **periodically** updated for proper instrument processing, operatory cleanliness, and management of injuries. The protocol shall be made available to all DHCP at the dental office.

(3) A copy of this regulation shall be conspicuously posted in each dental office.

~~Personal Protective Equipment~~ [\(PPE\)](#):

(4) All DHCP shall wear surgical facemasks in combination with either chin length plastic face shields or protective eyewear whenever there is potential for aerosol spray, splashing or spattering of the following: droplet nuclei, blood, chemical or germicidal agents or OPIM. Chemical [and puncture](#) resistant utility gloves and appropriate, task specific PPE shall be worn when handling hazardous chemicals. After each patient treatment, masks shall be changed and disposed. After each patient treatment, face shields and protective eyewear shall be cleaned, disinfected, or disposed. [Single-use PPE's shall be disposed of after each use on an individual.](#)

(5) Protective attire shall be worn for disinfection, sterilization, and housekeeping procedures involving the use of germicides or handling contaminated items. All DHCP shall wear reusable or disposable protective attire whenever there is a potential for aerosol spray, splashing or spattering of blood, OPIM, or chemicals and germicidal agents. Protective attire must be changed daily or between patients if they should become moist or visibly soiled. All PPE used during patient care shall be removed when leaving laboratories or areas of patient care activities. Reusable gowns shall be laundered in accordance with Cal/OSHA Bloodborne Pathogens Standards (Title 8, Cal. Code [of](#) Regs., [s](#)Section 5193).

Hand Hygiene:

(6) All DHCP shall thoroughly wash their hands with soap and water at the start and end of each workday. DHCP shall wash contaminated or **visibly** soiled hands with soap and water and put on new gloves before treating each patient. If hands are not visibly soiled or contaminated an alcohol based hand rub may be used as an alternative to soap and water. Hands shall be thoroughly dried before donning

gloves in order to prevent promotion of bacterial growth and washed again immediately after glove removal. A DHCP shall refrain from providing direct patient care if hand conditions are present that may render DHCP or patients more susceptible to opportunistic infection or exposure.

(7) All DHCP who have exudative lesions or weeping dermatitis of the hand shall refrain from all direct patient care and from handling patient care equipment until the condition resolves.

Gloves:

(8) Medical exam gloves shall be worn whenever there is contact with mucous membranes, blood, OPIM, and during all pre-clinical, clinical, post-clinical, and laboratory procedures. When processing contaminated sharp instruments, needles, and devices, [and items or when handling hazardous chemicals](#), DHCP shall wear heavy-duty [chemical and puncture resistant](#) utility gloves to prevent puncture wounds ~~or exposure to chemicals~~. Gloves must be discarded when torn or punctured, upon completion of treatment, and before leaving laboratories or areas of patient care activities. All DHCP shall perform hand hygiene procedures before donning gloves and after removing and discarding gloves. [Exam G](#)gloves shall not be washed before or after use.

Needle and Sharps Safety:

(9) Needles shall be recapped only by using the scoop technique or a protective device. Needles shall not be bent or broken for the purpose of disposal. Disposable needles, syringes, scalpel blades, or other sharp items and instruments shall be placed into sharps containers for disposal as close as possible to the point of use according to all applicable local, state, and federal regulations.

Sterilization and Disinfection:

[\(10\) All DHCP shall follow manufacturer's instructions for use regarding products and critical items.](#)

~~(1011)~~ All germicides must be used in accordance with intended use and label instructions [for use from the manufacturer](#).

~~(1112)~~ Cleaning must precede any disinfection or sterilization process. Products used to clean items or surfaces prior to disinfection procedures shall be used according to all label instructions [for use from the manufacturer](#).

~~(1213)~~ Critical ~~instruments~~, items ~~and devices~~ shall be discarded or pre-cleaned, packaged or wrapped and sterilized after each use. Methods of sterilization shall include steam under pressure (autoclaving), chemical vapor, and dry heat. If a

critical item is heat-sensitive, it shall, at minimum, be processed with high-level disinfection and packaged or wrapped upon completion of the disinfection process. These ~~instruments, critical~~ items, ~~and devices~~, shall remain sealed and stored in a manner so as to prevent contamination, and shall be labeled with the date of sterilization and the specific sterilizer used if more than one sterilizer is utilized in the facility. If packaging is compromised, the critical items shall be recleaned, packaged in new wrap, and sterilized again.

~~(1314)~~ Semi-critical ~~instruments, items, and devices~~ shall be pre-cleaned, packaged or wrapped and sterilized after each use. Methods of sterilization include steam under pressure (autoclaving), chemical vapor and dry heat. If a semi-critical item is heat sensitive, it shall, at minimum, be processed with high level disinfection and packaged or wrapped upon completion of the disinfection process. These packages or containers shall remain sealed and shall be stored in a manner so as to prevent contamination, and shall be labeled with the date of sterilization and the specific sterilizer used if more than one sterilizer is utilized in the facility. If packaging is compromised, the semi-critical items shall be recleaned, packaged in new wrap, and sterilized again.

~~(1415)~~ Non-critical surfaces and patient care items shall be cleaned and disinfected with a California Environmental Protection Agency (Cal/EPA)-registered hospital disinfectant (low-level disinfectant) labeled effective against HBV and HIV. When the item is ~~visibly~~ contaminated with blood or OPIM, a Cal/EPA-registered hospital intermediate-level disinfectant with a tuberculocidal claim shall be used.

~~(1516)~~ All high-speed dental hand pieces, low-speed hand pieces, rotary components and dental unit attachments such as reusable air/water syringe tips and ultrasonic scaler tips, shall be pre-cleaned, packaged, labeled and heat-sterilized in a manner consistent with the same sterilization practices as a semi-critical item.

~~(1617)~~ Single use disposable items such as prophylaxis angles, prophylaxis cups and brushes, tips for high-speed evacuators, saliva ejectors, air/water syringe tips, and gloves shall be used for one patient only and discarded.

~~(1718)~~ Proper functioning of the sterilization cycle of all sterilization devices shall be verified at least weekly through the use of a biological indicator (such as a spore test). Test results shall be documented and maintained for 12 months.

Irrigation:

(19) Water or other methods used for irrigation shall be sterile or contain recognized disinfecting or antibacterial properties when performing procedures that expose dental pulp.

(1820) Sterile coolants/irrigants shall be used for surgical procedures involving soft tissue or bone. Sterile coolants/irrigants must be delivered using a sterile delivery system.

Facilities:

(21) Dental unit water lines shall be anti-retractable. At the beginning of each workday, dental unit lines and devices shall be purged with air or flushed with water for at least two (2) minutes prior to attaching handpieces, scalers, air water syringe tips, or other devices. The dental unit lines and devices shall be flushed between each patient for a minimum of twenty (20) seconds.

(22) Dental unit water lines shall be monitored following the instructions for use from the manufacturer of the dental unit or the dental unit waterline treatment product.

(1923) If non-critical items or surfaces likely to be contaminated are manufactured in a manner preventing cleaning and disinfection, they shall be protected with disposable impervious barriers. Disposable barriers shall be changed when visibly soiled or damaged and between patients.

(2024) Clean and disinfect all clinical contact surfaces that are not protected by impervious barriers using a California Environmental Protection Agency (Cal/EPA) registered, hospital grade low- to intermediate-level germicide after each patient. The low-level disinfectants used shall be labeled effective against HBV and HIV. Use disinfectants in accordance with the manufacturer's instructions. Clean all housekeeping surfaces (e.g. floors, walls, sinks) with a detergent and water or a Cal/EPA registered, hospital grade disinfectant. Products used to clean items or surfaces prior to disinfection procedures shall be clearly labeled and DHCP shall follow all material safety data sheet (MSDS) handling and storage instructions for use from the manufacturer.

~~(21) Dental unit water lines shall be anti-retractable. At the beginning of each workday, dental unit lines and devices shall be purged with air or flushed with water for at least two (2) minutes prior to attaching handpieces, scalers, air water syringe tips, or other devices. The dental unit lines and devices shall be flushed between each patient for a minimum of twenty (20) seconds.~~

(2225) Contaminated solid waste shall be disposed of according to applicable local, state, and federal environmental standards.

Lab Areas:

(2326) Splash shields and equipment guards shall be used on dental laboratory lathes. Fresh pumice and a sterilized or new rag-wheel shall be used for each patient. Devices used to polish, trim, or adjust contaminated intraoral devices

shall be disinfected or sterilized, properly packaged or wrapped and labeled with the date and the specific sterilizer used if more than one sterilizer is utilized in the facility. ~~If packaging is compromised, the instruments shall be recleaned, packaged in new wrap, and sterilized again.~~ Sterilized items will be stored in a manner so as to prevent contamination.

(~~24~~27) All intraoral items such as impressions, bite registrations, prosthetic and orthodontic appliances shall be cleaned and disinfected with an intermediate-level disinfectant before manipulation in the laboratory and before placement in the patient's mouth. Such items shall be thoroughly rinsed prior to placement in the patient's mouth.

(c) The Dental Board of California and Dental Hygiene Committee of California shall review this regulation annually and establish a consensus.

¹Cal/EPA contacts: WEBSITE www.cdpr.ca.gov or Main Information Center (916) 324-0419.

Note: Authority cited: Section 1614, Business and Professions Code. Reference: Section 1680, Business and Professions Code.

HISTORY

1. New section filed 6-29-94; operative 7-29-94 (Register 94, No. 26).
2. Repealer and new section filed 7-8-96; operative 8-7-96 (Register 96, No. 28).
3. Repealer of subsection (a)(5) and subsection renumbering, amendment of subsections (b)(7), (b)(10), (b)(18)-(19) and (b)(23) and repealer of subsection (c) and subsection relettering filed 10-23-97; operative 11-22-97 (Register 97, No. 43).
4. Change without regulatory effect amending subsection (b)(4) filed 12-7-98 pursuant to section 100, title 1, California Code of Regulations (Register 98, No. 50).
5. Amendment of subsections (b)(11), (b)(13) and (b)(15) filed 6-30-99; operative 7-30-99 (Register 99, No. 27).
6. Amendment filed 3-1-2005; operative 3-31-2005 (Register 2005, No. 9).
7. Amendment filed 7-21-2011; operative 8-20-2011 (Register 2011, No. 29).



MEMORANDUM

DATE	January 22, 2024
TO	Members of the Dental Board of California
FROM	David Bruggeman, Legislative and Regulatory Specialist Dental Board of California
SUBJECT	Agenda Item 14.c.: Discussion and Possible Action to Consider Modified Text for Currently Proposed Regulatory Language and to Adopt Amendments to CCR, Title 16, Section 1018 Relating to the Board's Disciplinary Guidelines

Background

The Disciplinary Guidelines (Guidelines) for the Dental Board of California (Board) were last updated in 2010. Since that time, there have been changes to the Board's laws and regulations, and changes in the administration of various penalties for violations requiring the Guidelines to be updated. The proposed amendments make the Guidelines consistent with current law and the current probationary environment, clarify the terms and conditions of probation to reduce the likelihood of misinterpretation, and strengthen consumer protection.

At the February 9-10, 2023 Board meeting, the Board approved proposed updates to the Guidelines and to the section of the Board's regulations that incorporates the Guidelines by reference, California Code of Regulations (CCR) section 1018. Board staff developed the rulemaking package, which was published in the California Regulatory Notice Register (CRNR) on September 29, 2023. Publication in the CRNR started the 45-day public comment period, which ran from September 29, 2023 through November 14, 2023. There were no adverse comments or requests for a public hearing received during the public comment period. However, review by Board Counsel and Regulations Counsel identified areas in the Guidelines that would benefit from modifications to the text. Accordingly, Board staff are bringing proposed modifications to the proposed updates to the Guidelines.

If approved, the proposed modified text would be posted for a 15-day public comment period. If no adverse comments are received to the proposed modifications, then the Board is asked to authorize its Executive Officer to finalize the rulemaking package for filing with the Office of Administrative Law and approval by the Secretary of State. Any adverse comments received during the 15-day period would be brought to the Board at a subsequent meeting for their consideration and response.

Agenda Item 14.c.: Discussion and Possible Action to Consider Modified Text for Currently Proposed Regulatory Language and to Adopt Amendments to CCR, Title 16, Section 1018 Relating to the Board's Disciplinary Guidelines
Dental Board of California Meeting
February 9, 2024

Discussion

Board staff have identified areas in the Guidelines that require modification based on review from Board Counsel and Regulations Counsel. The only modification Board staff is seeking to CCR section 1018 is to update the date for the version of the Guidelines being incorporated by reference. The other recommended modifications are to the Guidelines. Those recommendations are summarized below, and also **highlighted** in the attachments to this memo. In the attachments, recommended modifications that are additions to the text are in double underline, and recommended modifications that are deletions to the text are in ~~double strikethrough~~.

Aside from non-substantive changes to formatting and language made for purposes of clarity and readability, the proposed modifications to the Guidelines are summarized as follows:

Title Page

- Update the effective date of the Guidelines to February 9, 2024

Model Introductory Language section

- In subsection B. PETITION FOR REINSTATEMENT, in various introductory order language provisions, add the phrase “IT IS HEREBY ORDERED that” and remove the subsequent use of “hereby.” These revisions would conform the proposed introductory order language to the existing introductory order language.
- In subsection D. STATEMENT OF ISSUES (APPLICANTS), in various introductory order language provisions, add the phrase “IT IS HEREBY ORDERED that” and remove the subsequent use of the word “hereby.” These revisions would conform the proposed introductory order language to the existing introductory order language.
- In subsection D., revise proposed introductory order language to make minor, technical revisions to the provisions specifying the consequences on issuance of a license if the respondent fails to successfully complete licensing requirements.

Standard Probationary Terms

Term (10) License Surrender

- Clarify that re-application for any Board-issued license, not just a “dental license,” which to some is understood to mean a dentist license, will be treated as a petition for reinstatement of a revoked license. This proposed revision will ensure utility of the term for all Board license types.

Term (13) Notification of Employer

- Specify that the Petition to Revoke is a Petition to Revoke Probation.

Agenda Item 14.c.: Discussion and Possible Action to Consider Modified Text for Currently Proposed Regulatory Language and to Adopt Amendments to CCR, Title 16, Section 1018 Relating to the Board’s Disciplinary Guidelines
Dental Board of California Meeting
February 9, 2024

Page 2 of 7

Term (14) Disclosure of Probation to Patients

- Replace the use of probationers with respondents.
- Add language clarifying that the term is required only for Respondents meeting the requirements specified in Business and Professions Code section 1673.
- Insert paragraphs (1) and (2) to reflect in the Guidelines the statutory requirements that to include Term (14) in a probationary order, there must either be (1) a final adjudication by the Board following administrative hearing or admitted findings or prima facie showing in a stipulated settlement establishing specified criteria, or (2) an accusation or statement of issues alleging that the respondent committed specified acts and a stipulated settlement with the Board based upon a nolo contendere or other similar compromise that does not include any prima facie showing or admission of guilt or fact, but does include an express acknowledgment that the statutory disclosure requirements would serve to protect the public interest. After adding paragraphs (1) and (2), the paragraph that follows the criteria would be simplified through minor, technical corrections.
- Reletter the currently numbered paragraphs (1) through (4) as (A) through (D).
- Revise the probationary order language to specify how the Board's telephone number may be found and add clarifying language that the probation disclosure documentation must be maintained in the patient's file for the duration of the probationary period.
- Add language to the Rationale indicating that including the disclosure language in the Guidelines helps provide consistent implementation and notice of the requirements to Probationers.

Term (15) Civil Penalty,

- Replace reference to "fine" with "civil penalty."
- Add language specifying acceptable methods of payments to be made, and the necessary information to include with the payment.

Additional Conditions

Term (16) Suspension

- Add language for cases involving continuing education violations specifying that the suspension in those cases (and those cases only) would continue until Respondent complies with the continuing education requirements of Business and Professions Code section 1645.

Term (19) Supervised Practice

- Add language to provide for supervised practice of the specific practice determined to require supervision. Recent disciplinary cases have required the

supervised practice term to ensure consumer protection regarding a dentist's administration or ordering of administration of general anesthesia or sedation. However, in those cases, consumer protection did not require supervision of the general practice of dentistry that was not otherwise at issue in the disciplinary cases, only the respondents' administration or ordering the administration of general anesthesia or sedation. For dentists performing dental services at multiple locations, the supervision requirement may be unnecessarily onerous when only one type of dental service should require supervision and the costs associated therewith. The proposed revisions would allow the term to be modified to fit the conduct that should be supervised, ensuring the Board could monitor the respondent's conduct through the probationary term, as well as limiting the supervision, as appropriate, to avoid applying an unnecessarily onerous probationary term.

Term (26) Physical Evaluation

- Clarify that the notification to cease practice referenced in this term must be in writing.

Term (27) Diversion Program

- Add language related to a cease practice order issued under this term to clarify that it could apply to practice as a dental auxiliary, and that a cease practice order could be issued by the Board's designee.

Term (28) Biological Testing

- Clarify that the notice of any cease practice order under this term must be in writing.

Term (29) Abstain From Use Of Alcohol, Controlled Substances, and Dangerous Drugs

- Clarify that the Petition to Revoke is a Petition to Revoke Probation

Recommended Penalties (all sections refer to the Business and Professions Code unless otherwise stated))

Section 480(a)(2) Formal Discipline by a Licensing Board for Professional Misconduct

- Clarify that any Optional Terms and Conditions imposed should be similar to the terms and conditions used in the other licensing board's disciplinary order.

Sections 1645, 1680(n) Continuing Education Violations

- To better ensure completion of continuing education requirements, revise the suspension language to indicate the suspension would last until compliance with Business and Professions Code section 1645 is obtained.

- Remove the language “For more serious cases, the following additional terms and conditions should be imposed,” preceding the Suspension penalty, renumber the Suspension term, and eliminate the 30 days from that term.

Sections 1647.11, 1647.17 Administration of Oral Conscious Sedation Without a Permit – Minors

- To reflect the repeal of all Oral Conscious Sedation for Minors Permits statutes, remove the entire penalty section.

Sections 1647.31, 1647.34 Administration of Pediatric Minimal Sedation Without a Permit and/or Pediatric Endorsement

- Clarify that the pediatric endorsement that may be revoked is the pediatric endorsement to the moderate sedation permit.

Sections 1647.31(b), (c), 1647.34 Violation of Requirements for Administration of Pediatric Minimal Sedation

- Clarify that the pediatric endorsement that may be revoked is the pediatric endorsement to the moderate sedation permit.

Section 1680 and CCR Section 1018.05(a) Unprofessional Conduct – Failure to Provide Records to the Board

- Revise title to include related unprofessional conduct violations under section 1670.

Section 1680 and CCR Section 1018.05(b) Unprofessional Conduct – Failure to Report

- Revise title to include related unprofessional conduct violations under section 1670.

Section 1680 and Health and Safety Code Section 123110(h) Unprofessional Conduct – Failure to Provide Records to Patients

- Revise title to include related unprofessional conduct violations under section 1670.

Section 1680(z) Failure to Report Patient Death

- Revise title to include “or Hospitalization” to reflect patient hospitalization report requirement under section 1680, subdivision (z).

Section 1680(ag) Use of Non-Sterile Irrigation on Exposed Dental Pulp

- Add language to clarify the methods of satisfying proof of correction. Since “Proof of correction of the condition” is susceptible to multiple interpretations, staff propose to add the following:

Proof of correction of the condition shall include the following:

- (a) Submit to inspection of new or repaired equipment, as applicable, upon demand by the Board or its designee at the Board's offices,
- (b) Photographs or receipts showing repairs or improvements made to the equipment related to the violation,
- (c) The provision of copies of office policies updated to include procedures for avoiding relapse or recurrence of the violation, and,
- (d) Documentation that training directly related to the violation was provided to the staff (certificate or declaration of completion from the training provider and description of the type of training provided).

These requirements have historically been accepted as proof of compliance with this section to ensure safe practice, including using proper staff training, and administration procedures, and equipment in good working condition.

Section 1681(b) Use of Drugs/Alcohol Causing Danger to Patient

- Revise the list of Standard Terms and Conditions to specify that Term 14 would be included as a probationary term only if Business and Professions Code section 1673 applies.

Action Requested

Board staff are requesting that the Board approve the proposed modifications to the proposed regulatory text as noted in the attachments. Suggested motion language follows.

Motion A (If there are no changes to the modified text by members): Approve the proposed modified regulatory text for CCR, title 16, section 1018 and incorporated Guidelines as provided in Attachments 1 and 2 and direct staff to take all steps necessary to complete the rulemaking process, including sending out the modified text with these changes for an additional 15-day comment period. If after the 15-day public comment period, no adverse comments are received, authorize the Executive Officer to make any non-substantive changes to the proposed regulatory text and incorporated Guidelines, and adopt the proposed regulation and incorporated Guidelines as described in the modified text notice for CCR, title 16, section 1018.

If the Board decides to make changes to the staff recommended modified text, the Board may use the following motion:

Motion B (If there are changes to the modified text by members at this meeting): To approve the proposed modified regulatory text for CCR, title 16, section 1018 and incorporated Guidelines in Attachments 1 and 2 that includes the following changes [describe amendments here] and direct staff to take all steps necessary to complete the

Agenda Item 14.c.: Discussion and Possible Action to Consider Modified Text for Currently Proposed Regulatory Language and to Adopt Amendments to CCR, Title 16, Section 1018 Relating to the Board's Disciplinary Guidelines
Dental Board of California Meeting
February 9, 2024

rulemaking process, including sending out the modified text with these changes for an additional 15-day comment period. If after the 15-day public comment period, no adverse comments are received, authorize the Executive Officer to make any non-substantive changes to the proposed regulation and incorporated Guidelines, and adopt the proposed regulation and incorporated Guidelines as revised at this meeting and described in the modified text notice for CCR, title 16, section 1018.

Attachments:

1. Proposed Modified Text for CCR section 1018
2. Proposed Modified Text for the Document Incorporated by Reference at CCR section 1018, “Dental Board of California Disciplinary and Denial Guidelines With Model Language”, revised ~~08/30/2010~~February 10, 2023

DEPARTMENT OF CONSUMER AFFAIRS
TITLE 16. DENTAL BOARD OF CALIFORNIA

MODIFIED TEXT

Legend:

For the originally proposed regulatory language:

Added text is indicated with an underline.

Omitted text is indicated by (* * * *).

Deleted text is indicated by ~~strikeout~~.

Modifications to the originally proposed regulatory language are shown in double underline for new text and ~~double strikethrough~~ for deleted text.

Amend section 1018 of Article 4.5 of Chapter 1 of Division 10 of Title 16 of the California Code of Regulations to read as follows:

§ 1018. Disciplinary Guidelines and Exceptions for Uniform Standards Related to Substance-Abusing Licensees.

(a) In reaching a decision on a disciplinary action under the Administrative Procedures Act (Government Code Section 11400 et seq.), the ~~Dental Board of California~~Board shall consider the disciplinary guidelines entitled “Dental Board of California Disciplinary and Denial Guidelines With Model Language”, revised ~~08/30/2010~~February 409, 2023, which are hereby incorporated by reference. Deviation from these guidelines and orders, including the standard terms of probation, is appropriate where the ~~Dental Board of California~~Board, in its sole discretion, determines that the facts of the particular case warrant such deviation - for example: the presence of mitigating or aggravating factors; the age of the case; evidentiary problems.

(b) Notwithstanding subsection (a), the Board shall use the uniform standards for substance-abusing licensees as provided in Section 1018.01, without deviation, for each individual determined to be a substance-abusing licensee.

(c) Notwithstanding the disciplinary guidelines, any proposed decision issued by an Administrative Law Judge in accordance with Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code that contains any findings of fact that: (1) the licensee engaged in any act of sexual contact with a patient, client or customer; or, (2) the licensee has been convicted of or committed a sex offense, shall contain an order revoking the license. The proposed decision shall not contain an order staying the revocation of the license or placing the licensee on probation.

(d) For the purposes of this section, “sexual contact” has the same meaning as defined in subdivision (c) of Section 729 of the Business and Professions Code and “sex offense” has the same meaning as defined in Section 44010 of the Education Code.

Note: Authority cited: Sections 315, 315.2, 315.4 and 1614, Business and Professions Code; and Section 11400.20, Government Code. Reference: Sections 315, 315.2, 315.4, 726, 729, 1680 and 1687, Business and Professions Code; Sections 11400.20 and 11425.50(e), Government Code; and Section 44010, Education Code.

DENTAL BOARD OF CALIFORNIA
DISCIPLINARY AND DENIAL GUIDELINES WITH MODEL
LANGUAGE

~~August 30, 2010~~ February 10, 2023

Issued by
Dental Board of California
2005 Evergreen Street, Suite 1550
Sacramento, California 95815
Telephone (916) 263-2300
Fax (916) 263-2140

Table of Contents

INTRODUCTION	1
CRITERIA AND FACTORS TO BE CONSIDERED	2
PROBATION TERMS AND CONDITIONS	6
LIST OF STANDARD PROBATIONARY TERMS AND CONDITIONS	6
LIST OF OPTIONAL PROBATIONARY TERMS AND CONDITIONS	6
MODEL INTRODUCTORY LANGUAGE	8
A. ACCUSATION	8
Revocation of License	8
Revocation Stayed and License Placed on Probation	8
Public Repeval	9
Surrender of License	9
B. PETITION FOR REINSTATEMENT	9
Grant Petition with No Restrictions on License	9
Grant Petition and Place License on Probation	9
Grant Petition and Place License on Probation After Completion of Conditions Precedent	10
Deny Petition	10
C. PETITION TO REVOKE PROBATION	10
Revocation of Probation	10
Extension of Probation	11
D. STATEMENT OF ISSUES (APPLICANTS)	11
Grant License Application and Issue License with No Restrictions	11
Grant License Application and Place License on Probation	11

<u>Grant License Application and Place License on Probation After</u>	
<u>Completion of Conditions Precedent</u>	<u>12</u>
<u>Deny License Application</u>	<u>12</u>
<u>STANDARD PROBATIONARY TERMS AND CONDITIONS FOR ALL DECISIONS</u>	
<u>AND ORDERS</u>	<u>14</u>
<u>OPTIONAL PROBATIONARY TERMS AND CONDITIONS</u>	<u>25</u>
<u>RECOMMENDED PENALTIES</u>	<u>40</u>

INTRODUCTION

In keeping with its obligation to protect the consumers of dental services from the unsafe, incompetent, negligent, or impaired dentists and dental auxiliaries, and to establish consistency in disciplinary penalties for similar offenses on a statewide basis, the Dental Board of California ("Board") has adopted the following recommended guidelines for license denial and disciplinary orders and terms and conditions of probation for violations of the Dental Practice Act and supporting regulations (Division 10 (commencing with section 1000) of Title 16 of the California Code of Regulations ("CCR")).

The Board carefully considers the totality of the facts and circumstances in each individual case, with the safety of the public being paramount and to the extent not inconsistent with public protection, disciplinary actions shall be calculated to aid in the rehabilitation of the licensee. Consequently, the Board requests that the Administrative Law Judge ("ALJ") clearly state the factual basis for ~~his or her~~ reaching the decision. This is especially important should the ALJ deviate from the recommended guidelines. The rationale for the deviation should be reflected in the decision to enable the Board to understand the reasons for the deviation and to evaluate the appropriateness of the decision.

These guidelines are for use by administrative law judges, attorneys, and any licensee or individual involved in settlement of disciplinary actionsaccusations or statements of issues proceedings. It is emphasized that these are guidelines, and the Board acknowledges that there may be departures in individual cases depending upon mitigating or aggravating circumstances. Probation terms and conditions are divided into ~~three~~two categories: (1) Standard terms and conditions, to be used in all cases of probation; and (2) Optional terms and conditions, to be imposed dependent upon the circumstances and nature of an individual case; and (3) Uniform Standards for Substance-Abusing Licensees Probationary Terms and Conditions ("Uniform Standards"), to be imposed in accordance with CCR, title 16, section 1018.01, subsection (a), if the individual is found to be a substance-abusing licensee.

Optional terms and conditions will be used to define the extent of the disciplinary action if a given case warrants a penalty above the minimum established but below the established maximum. In a Statement of Issues, ~~e~~Optional terms and conditions also should ~~also~~ be used if a probationary license is issued depending upon the nature and circumstances of the matter.

If after notice and hearing conducted in accordance with Chapter 5 (commencing with Section 11500) of Part 1 of Division 3 of Title 2 of the Government Code, the Board finds that the evidence establishes that an individual is a substance-abusing licensee, then the terms and conditions listed in the Board's "Uniform Standards Related to Substance-Abusing Licensees with Standard Language for Probationary Orders" ("Uniform Standards") document shall be used in accordance with CCR, title 16, section 1018.01, subsection (a). Users of these guidelines are directed to use those Uniform Standards terms and conditions exactly as written in that document and in lieu of any similar Standard or Optional terms and conditions that are listed in these guidelines for formulating the penalty in each substance-abusing licensee's case.

If, at the time of hearing, the ALJ finds that the Respondent for any reason is not capable of safe practice, the Board favors outright revocation of the license. If, however, the Respondent has demonstrated a capacity to practice dentistry safely, a stayed revocation order with probation is recommended.

Suspension of a license may also be appropriate where the public may be better protected if the practice of the dentist or dental auxiliary is suspended in order to correct deficiencies in skills, education, or rehabilitation. If there is action taken against a license and the licensee has additional registrations and/or permits issued by the Board, then the Accusation must identify the license and all registrations and/or permits issued to the licensee, and the disciplinary order should reflect action against all of Respondent's licenses, registrations, and/or permits identified in the Accusation.

CRITERIA AND FACTORS TO BE CONSIDERED

~~In determining whether revocation, suspension or probation should be imposed in a given case, factors such as the following should be considered:~~

- ~~1. Nature and severity of the act(s), offense(s), or crime(s) under consideration.~~
- ~~2. Actual or potential harm to the public.~~
- ~~3. Actual or potential harm to any patient.~~
- ~~4. Prior disciplinary record.~~
- ~~5. Number and variety of violations.~~
- ~~6. Mitigation evidence.~~
- ~~7. Aggravating evidence.~~
- ~~8. Rehabilitation evidence.~~

- ~~9. In case of a criminal conviction, compliance with conditions of sentence and court-ordered probation.~~
- ~~10. Criminal record.~~
- ~~11. Time passed since the act(s) or offense(s) occurred.~~
- ~~12. If applicable, evidence of expungement proceedings pursuant to Penal Code Section 1203.4.~~

Substantially Related Criteria. The Board may deny, suspend, or revoke a license if the applicant or licensee has been convicted of a crime, professional misconduct, or act that is substantially related to the qualifications, functions, or duties of a dentist or dental auxiliary based on the criteria specified in CCR, title 16, section 1019.

Rehabilitation Criteria. When considering the denial, revocation, or suspension of a license, the Board shall consider whether the applicant or licensee has made a showing of rehabilitation in accordance with the criteria specified in CCR, title 16, section 1020.

Evidence of Rehabilitation:

The following documents are examples of evidence the Respondent may submit, and the Board shall consider, to demonstrate ~~his or her~~ the Respondent's rehabilitative efforts and dental competency:

- Successful completion of drug or alcohol treatment program
- Individual or group counseling
- Random, documented biological fluid screening
- Participation in ~~dental~~ recovery support groups
- Education courses taken related to addictive ~~diseases~~ disorders
- Adherence to a 12-step recovery program philosophy, or equivalent
- Written documentation of participation in 12-step recovery groups, or equivalent
- Recent, dated letters from counselors regarding the Respondent's participation in a rehabilitation or recovery program, where appropriate. These should include a description of the program, the number of sessions the Respondent has

Disciplinary and Denial Guidelines CCR §1018

Page 3

attended, the counselor's diagnosis of the Respondent's condition and current state of rehabilitation improvement, the counselor's basis for determining improvement, and the credentials of the counselor and records from a treatment facility.

- For licensees, statements from employers documenting that the employer is aware of the previous drug or alcohol abuse problems. Statements must also substantiate that while employed, there was no evidence of continued alcohol or drug use and that the Respondent performed dental functions in a safe and competent manner. Each statement should include the period of time and capacity in which the person worked with the Respondent and should contain the following sentence at the end: "I declare, under penalty of perjury, under the laws of the State of California, that the foregoing is true and correct." It should be signed by the one making the statement and dated.
- Recent, dated laboratory analyses or drug screen reports, where appropriate.
- Recent, dated performance evaluations from the Respondent's employer.
- Recent, dated physical examination reports by a licensed physician and surgeon, nurse practitioner, or physician assistant.
- Recent, dated Certificates or transcripts of courses related to dentistry that the Respondent completed since the date of the violation. A dentist or dental auxiliary whose license has been revoked can use ~~his or her~~ their former license number to obtain continuing education credit or hours or for any other purpose.
- Recent, dated, written statements and/or performance evaluations from persons in positions of authority who have on-the-job knowledge of the Respondent's work as a dentist or dental auxiliary that include the period of time and capacity in which the person worked with the Respondent. Such reports must be signed under penalty of perjury and will be subject to verification by Board staff.
- Recent, dated, letters from persons familiar with Respondent in either a personal or professional capacity regarding their knowledge of: the Respondent's character; the Respondent's rehabilitation, if any; the conduct of which the Respondent is accused; or any other pertinent facts that would enable the Board to better decide the case. Such letters must be signed under penalty of perjury and will be subject to verification by Board staff.

- Recent, dated, letters from probation or parole officers regarding the Respondent's participation in and/or compliance with terms and conditions of criminal probation or parole, which should include at least a description of the terms and conditions, and the officer's basis for determining compliance. Such letters and reports will be subject to verification by Board staff.

Mitigation Evidence:

- Length of time in practice
- No prior disciplinary action
- Illness or death of a family member or other personal circumstances affecting licensee's performance at the time of the incident
- Early admissions

OTHER SITUATIONS IN WHICH REVOCATION IS THE RECOMMENDED PENALTY

Failure to file a notice of defense or to appear at a disciplinary hearing, where the Board has requested revocation.

Violation of a condition(s) of the Board's Probation Program.

~~Substantiated evidence or convictions of physical abuse or sexual offenses.~~

PROBATION TERMS AND CONDITIONS

The Board's primary responsibility is consumer protection. The Board believes that in disciplinary matters where probation has been imposed, terms and conditions should be established to provide for consumer protection and to allow the probationer to demonstrate rehabilitation.

The following terms and conditions of probation provide for consumer protection and establish a mechanism to monitor the rehabilitation progress of a probationer.

Generally, the Board recommends a minimum of three years of probation unless a longer or shorter term is warranted.

For purposes of implementation of these terms and conditions of probation, any reference to the Board also means staff working for the Dental Board of California or its designee.

LIST OF STANDARD PROBATIONARY TERMS AND CONDITIONS

1. Obey ~~a~~All ~~L~~Laws
2. Quarterly Reports
3. Comply with the Board's Probation Program
4. Address Change, Name Change, License Status
5. Meetings and Interviews
6. ~~Status of Residency, Practice, or Licensure Outside of State~~ Tolling of Probationary Period
7. Submit Documentation
8. Cost Recovery
9. Probation Monitoring Costs
10. License Surrender
11. ~~Function as a Licensee~~
12. Continuance of Probationary Term/Completion of Probation
13. Sale or Closure of an Office or Practice
14. Notification to Employer
15. Disclosure of Probation Status to Patients
16. Civil Penalty

LIST OF ~~ADDITIONAL~~ OPTIONAL PROBATIONARY TERMS AND CONDITIONS

16. Suspension of License

Disciplinary and Denial Guidelines CCR §1018

Page 6

- ~~16-17.~~ Remedial Education
- ~~17-18.~~ Examination
- ~~18-19.~~ Supervised Practice
- ~~19-20.~~ Restricted Practice
- ~~20-21.~~ Third-Party Chaperone-Monitor (Chaperone)
- ~~21-22.~~ Restitution
- ~~22-23.~~ Community Service
- ~~23-24.~~ Psychological Evaluation
- ~~24-25.~~ Psychotherapy
- ~~25-26.~~ Physical Evaluation
- ~~26-27.~~ Diversion Program
- ~~27-28.~~ Biological Testing
- ~~28-29.~~ Abstain from Use of Alcohol, Controlled Substances, and Dangerous Drugs
- ~~29-30.~~ Surrender/Partial Surrender of Drug Enforcement Agency Permit
- ~~30-31.~~ Ethics Course
- ~~31-32.~~ Billing Monitor
- ~~32-33.~~ Solo Practice
- ~~33-34.~~ Controlled Substance - Maintenance of Records and Inventory
- ~~34-35.~~ Clinical Training Program

**MODEL INTRODUCTORY LANGUAGE
TO BE USED FOR ALL PROBATIONARY-DISCIPLINARY OR OTHER
ENFORCEMENT ORDERS**

The following introductory order language should be used is to be included in decisions that place the respondent's license on probation to ensure consistency in proposed decisions and stipulated settlements.

A. ACCUSATION

Revocation of License

IT IS HEREBY ORDERED that [INSERT APPROPRIATE LICENSE/PERMIT CATEGORY] Number [INSERT LICENSE/PERMIT NUMBER(S)] issued to Respondent is revoked.

Respondent shall relinquish and forward or deliver the license and/or permits and wall certificate(s) to the Board within ten (10) days of the effective date of this Decision and Order.

Respondent shall pay to the Board its costs of investigation and prosecution in the amount of \$ _____ within thirty (30) days of the effective date of this Decision and Order.

Option: As a condition precedent to reinstatement of the revoked license(s) and/or permit(s), Respondent shall reimburse the Board for its costs of investigation and prosecution in the amount of \$ _____. Said amount shall be paid in full prior to the reinstatement of the license(s) and/or permit(s) unless otherwise ordered by the Board.

Revocation Stayed and License Placed on Probation

IT IS HEREBY ORDERED that [{INSERT APPROPRIATE LICENSE/PERMIT CATEGORY}] Number [{INSERT LICENSE/PERMIT NUMBER(S)}] issued to Respondent is revoked. However, the revocation is stayed, and Respondent's [{INSERT LICENSE/PERMIT CATEGORY}] is placed on probation for [{INSERT NUMBER OF YEARS}] years on the following terms and conditions. [{INSERT TERMS AND CONDITIONS}]

~~In order to provide clarity and consistency in its decisions, the following language should be used in proposed decisions or stipulated agreements for exam applicants, credential~~

Disciplinary and Denial Guidelines CCR §4018

Page 8

applicants ~~[those who hold a license in another state(s)], and for petitioners for reinstatement who are issued a license that is placed on probation.~~

Public Repeal

IT IS HEREBY ORDERED that [INSERT APPROPRIATE LICENSE/PERMIT CATEGORY] Number [INSERT LICENSE/PERMIT NUMBER(S)] issued to Respondent is publicly repealed. This repeal constitutes disciplinary action by the Board and shall become a part of Respondent's license history with the Board.

Surrender of License

Respondent [INSERT NAME OF RESPONDENT] hereby surrenders [INSERT APPROPRIATE LICENSE/PERMIT CATEGORY] Number [INSERT LICENSE/PERMIT NUMBER(S)] as of the effective date of this Decision and Order. Respondent shall relinquish and forward or deliver the license(s) and/or permit(s) and wall certificate(s) to the Board within ten (10) days of the effective date of this Decision and Order.

This Decision and Order constitutes disciplinary action by the Board and shall become a part of Respondent's license history with the Board.

B. PETITION FOR REINSTATEMENT

Grant Petition with No Restrictions on License

IT IS HEREBY ORDERED that ~~t~~he petition for reinstatement filed by petitioner [INSERT NAME OF PETITIONER] is hereby granted, and [INSERT APPROPRIATE LICENSE/PERMIT CATEGORY] Number [INSERT LICENSE/PERMIT NUMBER(S)] shall be fully restored.

Grant Petition and Place License on Probation

IT IS HEREBY ORDERED that ~~t~~he petition for reinstatement filed by petitioner [INSERT NAME OF PETITIONER] is hereby granted, and [INSERT APPROPRIATE LICENSE/PERMIT CATEGORY] Number [INSERT LICENSE NUMBER] shall be reinstated and immediately revoked; however, the revocation shall be stayed and the petitioner shall be placed on probation for a period of [INSERT NUMBER OF YEARS] years on the following terms and conditions: [INSERT TERMS AND CONDITIONS]

Grant Petition and Place License on Probation After Completion of Conditions Precedent

IT IS HEREBY ORDERED that ~~the~~ The petition for reinstatement filed by petitioner [INSERT NAME OF PETITIONER] is ~~hereby~~ granted, and [INSERT APPROPRIATE LICENSE/PERMIT CATEGORY] Number [INSERT LICENSE/PERMIT NUMBER(S)] shall be fully reinstated upon the following conditions precedent: [INSERT CONDITIONS] (for example: paying restitution, cost recovery, completion of continuing or remedial education, completion of rehabilitation or recovery program, take licensing examination (American Board of Dental Examiners, Inc. exam (ADEX)))

Upon completion of the conditions precedent above and satisfaction of all statutory and regulatory requirements for issuance of a license, [INSERT APPROPRIATE LICENSE/PERMIT CATEGORY] Number [INSERT LICENSE/PERMIT NUMBER(S)] shall be reinstated and immediately revoked; however, the revocation shall be stayed, and petitioner shall be placed on probation for a period of [INSERT NUMBER OF YEARS] years on the following terms and conditions: [INSERT STANDARD AND APPLICABLE OPTIONAL TERMS AND CONDITIONS]

NOTE: If cost recovery was ordered in the revocation (by an Administrative Law Judge or per stipulated settlement) or surrender of a license (per stipulated settlement) and the cost recovery has not been paid in full by a petitioner, a term of probation requiring payment of the original cost recovery on a payment plan must be included in the reinstatement and decision per Business and Professions Code section 125.3.

Deny Petition

IT IS HEREBY ORDERED that ~~the~~ The petition for reinstatement filed by petitioner [INSERT NAME OF PETITIONER] is ~~hereby~~ denied.

C. PETITION TO REVOKE PROBATION

Revocation of Probation

IT IS HEREBY ORDERED that the petition to revoke probation of Respondent is granted, and [INSERT APPROPRIATE LICENSE/PERMIT CATEGORY] Number [INSERT LICENSE/PERMIT NUMBER(S)] issued to Respondent is revoked. Petitioner is not eligible to apply for reinstatement for [INSERT APPLICABLE TIME PERIOD OF THREE YEARS, TWO YEARS OR ONE YEAR AS SPECIFIED BY BUSINESS AND PROFESSIONS CODE SECTION 1686] from the effective date of this decision.

Extension of Probation

IT IS HEREBY ORDERED that [INSERT APPROPRIATE LICENSE/PERMIT CATEGORY] Number [INSERT LICENSE/PERMIT NUMBER(S)] issued to Respondent is revoked; however, the revocation is stayed, and Respondent is placed on probation for an additional [INSERT NUMBER OF YEARS] year(s) from the effective date of this decision on the following terms and conditions:

D. STATEMENT OF ISSUES (APPLICANTS)**Grant License Application and Issue License with No Restrictions**

IT IS HEREBY ORDERED that the application filed by Respondent [INSERT RESPONDENT'S NAME] for licensure is ~~hereby~~ granted, and a [INSERT LICENSE/PERMIT CATEGORY] shall be issued to Respondent upon completion of all licensing requirements, including successful completion of the licensing examination and payment of all licensing fees.

If Respondent fails to successfully complete all licensing requirements within twelve (12) months from the effective date of this Decision and Order, a license shall not be issued to Respondent, ~~then~~ Respondent's application shall be deemed abandoned pursuant to California Code of Regulations, title 16, section 1004, subsection (c), ~~and~~ and if Respondent subsequently seeks a [INSERT LICENSE/PERMIT CATEGORY] from the Board, Respondent shall be required to file a new application and meet all of the requirements in effect at the time of reapplication.

Grant License Application and Place License on Probation

IT IS HEREBY ORDERED that ~~t~~he application filed by Respondent [INSERT NAME OF RESPONDENT] for licensure is ~~hereby~~ granted, and a [INSERT LICENSE/PERMIT CATEGORY] shall be issued to Respondent upon completion of all licensing requirements, including successful completion of the licensing examination and payment of all licensing fees. If Respondent fails to successfully complete all licensing requirements within twelve (12) months from the effective date of this Decision and Order, a license shall not be issued to Respondent, and Respondent's application for licensure shall be deemed abandoned pursuant to California Code of Regulations, title 16, section 1004, subsection (c). If Respondent subsequently seeks a license from the Board, Respondent shall be required to file a new license application and meet all of the requirements in effect at the time of reapplication.

If a [INSERT LICENSE/PERMIT CATEGORY] is issued to Respondent, However, the license shall be immediately revoked, the revocation shall be stayed, and Respondent shall be placed on probation for [INSERT NUMBER OF YEARS] years on the following terms and conditions: [INSERT STANDARD AND ANY APPLICABLE OPTIONAL PROBATION TERMS AND CONDITIONS]

~~If Respondent fails to successfully complete all licensing requirements within twelve (12) months from the effective date of this Decision and Order, then Respondent's application shall be deemed abandoned pursuant to California Code of Regulations, title 16, section 1004, subsection (c), and Respondent shall be required to file a new application and meet all of the requirements which are in effect at the time of reapplication.~~

Grant License Application and Place License on Probation After Completion of Conditions Precedent

IT IS HEREBY ORDERED that ~~t~~The application filed by Respondent [INSERT NAME OF RESPONDENT] for [INSERT TYPE OF APPLICATION – LICENSURE OR EXAMINATION FOR LICENSURE] is hereby granted, and a [INSERT LICENSE/PERMIT CATEGORY] shall be issued to Respondent upon completion of all licensing requirements, including successful completion of the licensing examination and payment of all licensing fees, and the following conditions precedent: [INSERT CONDITIONS PRECEDENT] (for example: paying restitution, cost recovery, completion of continuing or remedial education, completion of rehabilitation or recovery program, take licensing examination (American Board of Dental Examiners, Inc. exam – “ADEX”)).

If Respondent fails to successfully complete all licensing requirements and conditions precedent within twelve (12) months from the effective date of this Decision and Order, Respondent's application shall be deemed abandoned pursuant to Business and Professions Code section 142, subdivision (b), and California Code of Regulations, title 16, section 1004, subsection (c). **If Respondent subsequently seeks a license from the Board, and** Respondent shall be required to file a new application and meet all of the requirements ~~which are~~ in effect at the time of reapplication.

Upon completion of the conditions precedent and satisfaction of all statutory and regulatory requirements for issuance of a license, Respondent shall be issued a [INSERT LICENSE/PERMIT CATEGORY]. However, the license shall be immediately revoked, the revocation shall be stayed, and Respondent shall be placed on probation for (INSERT NUMBER OF YEARS) years on the following terms and conditions:

Disciplinary and Denial Guidelines CCR §4018

Page 12

[INSERT STANDARD AND ANY APPLICABLE OPTIONAL PROBATION TERMS AND CONDITIONS]

Deny License Application

IT IS HEREBY ORDERED that ~~the~~ the application filed by Respondent [INSERT NAME OF RESPONDENT] for licensure is ~~hereby~~ denied.

~~Exam applicants who are placed on probation:~~

~~The application of respondent _____ for licensure is hereby granted. Upon successful completion of the licensure examination and all other licensing requirements including payment of all fees, a license shall be issued to respondent. Said license shall immediately be revoked, the order of revocation stayed and respondent's license placed on probation for a period of _____ years on the following conditions:~~

~~Credential applicants who are placed on probation:~~

~~The application of respondent _____ licensure is hereby granted and a license shall be issued to respondent upon successful completion of all licensing requirements including payment of all fees. Said license shall immediately be revoked, the order of revocation stayed and respondent's license placed on probation for a period of _____ years on the following conditions:~~

~~Reinstatement of licensure with conditions of probation:~~

~~The application of respondent _____ for reinstatement of licensure is hereby granted. A license shall be issued to respondent. Said license shall immediately be revoked, the order of revocation stayed and respondent's license placed on probation for a period of _____ years on the following conditions:~~

NOTE: ~~If cost recovery was ordered in the revocation or surrender of a license and the cost recovery has not been paid in full by a petitioner, a probation condition requiring payment of the original cost recovery on a payment plan must be included in the reinstatement and decision.~~

Language for Additional Permits

~~It is further ordered that (INSERT TYPE OF ADDITIONAL LICENSE OR PERMIT) Number (INSERT LICENSE OR PERMIT NUMBER) issued to Respondent is revoked. However, the revocation is stayed and Respondent's (INSERT TYPE OF ADDITIONAL LICENSE OR PERMIT) name the certificates) is placed on probation for (INSERT NUMBER OF YEARS) years on the following conditions.~~

**STANDARD PROBATIONARY TERMS AND CONDITIONS FOR ALL DECISIONS
AND ORDERS**

NOTE FOR SUBSTANCE-ABUSING LICENSEE CASES: In addition to the following standard terms and conditions of probation (except standard term No. 13 “Notification to Employer” as explained below), the Board shall use all of the Uniform Standards terms and conditions listed in the document entitled “Uniform Standards Related to Substance-Abusing Licensees with Standard Language for Probationary Orders” as specified in California Code of Regulations CCR, title 16, section 1018.01 in every probationary order where the Board finds that the evidence establishes that an individual is a substance-abusing licensee.

SEVERABILITY CLAUSE – Each term and condition of probation is a separate and distinct ~~condition~~. If any term or condition of this Decision and Order, or any application thereof, is declared unenforceable in whole, in part, or to any extent, the remainder of this Decision and Order, and all other applications thereof, shall not be affected. Each term and condition of this Decision and Order shall separately be valid and enforceable to the fullest extent permitted by law.

RATIONALE: The severability clause is required for all decisions and orders and stipulated ~~agreements-settlements~~ where there are terms and conditions of probation, to avoid the possibility of all probation terms and conditions being invalidated upon a successful appeal.

(1) OBEY ALL LAWS - Respondent shall obey all federal, state, and local laws and all rules and regulations governing the practice of dentistry in California, and remain in full compliance with any court-ordered criminal probation, criminal court-ordered payments (fines and fees) and other requirements. A full and detailed account of all misdemeanor and felony arrests and convictions occurring during the period of probation shall be reported by Respondent to the Board in writing within seven (7) days of occurrence. To permit monitoring of compliance with this term and conditions, Respondent shall submit a completed California Department of Justice state and federal Livescan fingerprint form, unless previously submitted as part of the licensure application process. Fingerprints shall be submitted within fifteen (15) calendar days of the effective date of ~~the~~this Decision and Order.

CRIMINAL COURT ORDERS: If Respondent is under criminal court orders by any governmental agency, including probation or parole, and the orders are violated, this

shall be deemed a violation of probation and may result in the filing of an accusation or petition to revoke probation or both.

OTHER BOARD OR REGULATORY AGENCY ORDERS: If Respondent is subject to any other disciplinary order from any other ~~health-care~~healthcare related board or any professional licensing or certification regulatory agency in California or elsewhere, and violates any of the orders or conditions imposed by other agencies, this shall be deemed a violation of probation and may result in the filing of an accusation or petition to revoke probation or both.

RATIONALE: All licensees are responsible for abiding by federal, state, and local laws. Licensees are also responsible for complying with criminal court orders. If a licensee is subject to other ~~health-care~~healthcare related board or regulatory agency orders, violations of those orders may adversely impact the licensee's status of his or her disciplinary status with ~~by the Board~~ since disciplinary actions taken by those other agencies for acts substantially related to the practice is cause for discipline of the license per Business and Professions Code section 141. This ~~term~~condition emphasizes the Respondent's responsibility and specifies the Board's authority to take more immediate and severe action if other violations occur. If a licensee whose license is on probation with the Board violates other probationary conditions or orders as imposed by other boards or agencies, violations of those other agencies' orders may indicate that the licensee is ~~they may be unsafe to practice in this state.~~

(2) QUARTERLY REPORTS - Respondent shall submit quarterly reports signed under penalty of perjury stating whether there has been compliance with all ~~the~~terms and conditions of probation. Respondent shall submit a quarterly report no later than seven (7) calendar days from the beginning of the assigned quarter.

RATIONALE: This provides the Board with a mechanism for maintaining communication with the Respondents between meetings, ~~;~~ gathering pertinent information from the Respondent's; and obtaining written materials, ~~(other than routine reports);~~ that might be deemed necessary on an individual basis. This also allows coordination with other state agencies that discipline dentists and dental auxiliaries.

(3) COMPLY WITH THE BOARD'S PROBATION PROGRAM - Respondent shall fully comply with the terms and conditions of probation established by the Board and all requirements necessary to implement the terms and conditions of probation. Respondent shall cooperate with the Board in its monitoring and investigation of ~~the~~ Respondent's compliance with the terms and conditions of probation. Respondent shall

respond to all requests and inquiries from the Board within the time period specified by the Board.

~~Upon successful compliance with the conditions of probation, and completion of the probation term, Respondent's license shall be fully restored.~~

RATIONALE: Full compliance with the terms and conditions of probation demonstrate a Respondent's commitment to rehabilitation and the to correctioning of those the problems which that provided cause for led to the disciplinary action. This also provides the Board with a mechanism for maintaining communication with the Respondent between meetings, gathering pertinent information from the Respondent, and obtaining written materials (other than routine reports) that might be deemed necessary on an individual basis.

(4) ADDRESS CHANGE, NAME CHANGE, LICENSE STATUS – Respondent shall inform the Board, in writing, within fifteen (15) calendar days of any change in ~~his or her~~ Respondent's address of record, physical employment address, physical residence address, and any legal name change. Respondent shall at all times maintain an active, current license with the Board, including ~~while suspended from practice of dentistry during any period of non-practice (see Term No. 6 "Tolling of Probationary Period") or suspension from practice~~ unless otherwise specified by in the disciplinary orders.

Any misrepresentation to the public by Respondent of ~~his or her~~ Respondent's restricted license status ~~to the public~~ shall be a violation of the probation terms and conditions.

RATIONALE: Informing the Board of address and name changes is necessary to ensure ongoing Board monitoring and contact with the Respondent.

(5) MEETINGS AND INTERVIEWS - Respondent shall appear in person for meetings and shall be available by telephone for interviews, unless otherwise ~~as~~ directed by the Board.

RATIONALE: This provides a means for ~~the~~ Board representatives to make periodic assessments of the Respondent, ~~to determine compliance with probation terms and conditions,~~ and to give guidance and directions to licensees on probation.

~~(6) STATUS OF RESIDENCY, PRACTICE, OR LICENSURE OUTSIDE OF STATE~~
TOLLING OF PROBATIONARY PERIOD - ~~In the event Respondent should leave California to reside or practice outside the state,~~ Respondent's probation is tolled when Respondent ceases practicing in California ("non-practice"). Respondent ~~must provide~~

~~written notification to shall notify the Board in writing within fifteen (15) calendar days of any periods of non-practice lasting more than thirty (30) calendar days and notify the Board within fifteen (15) calendar days of the date of Respondent's return to practice. Any period of non-practice shall not count toward the probationary period and shall result in the Respondent's probationary period being tolled, of the dates of departure and anticipated return to the state. Respondent's probation is tolled, if and when he or she ceases practicing in California. Period of practice outside of California will not apply to the reduction of the probationary period.~~

Non-practice is defined as any period of time exceeding thirty (30) calendar days in which Respondent is not engaging in dental practice as defined in Business and Professions Code section 1625 or providing dental supportive procedures as a dental auxiliary as defined in California Code of Regulations Section 1067, as applicable, in California for a minimum of sixteen (16) hours per week or sixty-four (64) hours per calendar month. Engaging in [INSERT APPROPRIATE LICENSING CATEGORY, e.g. dentistry, registered dental assistant procedures, registered dental assistant in extended functions procedures, etc.] shall include volunteer dental practice or work in any non-direct patient care position that requires licensure.

It shall be a violation of probation if Respondent's periods of non-practice total two (2) years. However, it shall not be considered a violation of probation if Respondent is residing and practicing in another state in the United States and is on active probation with the licensing authority of that state, in which case the two-year tolling limitation period shall begin on the date probation is completed or terminated in that state.

Periods of non-practice do not relieve Respondent of the responsibility to comply with the terms and conditions of probation. At all times during the probationary period and during any period of non-practice, Respondent shall continue to comply with all of the terms and conditions of probation, including the obligation to maintain an active and current license with the Board (see Term No. 4 "Address Change, Name Change, License Status"), meetings in person for interviews (see Term No. 5 "Meetings and Interviews"), and cost recovery (see Term No. 8 "Cost Recovery").

Respondent shall provide a list of all states, United States territories, and elsewhere in the world where he or she has ever been licensed as a dentist or dental auxiliary or held any health-care related professional license or certificate. Respondent shall further provide information regarding the status of each license and certificate and any changes in the license or certificate status during the term of probation. Respondent shall inform the Board if he or she applies for or obtains a dental or dental auxiliary license or certificate outside of California during the term of probation.

For purposes of this probationary term condition, non-practice due to Board ordered suspension or in compliance with any other condition of probation, shall not be considered a period of non-practice.

RATIONALE: This eEnsures that Respondents may not complete probation without being fully monitored for their period of probation in California. Also, this ensures that Respondents are not relieved from terms and conditions of probation necessary to ensure consumer protection and payment of probation and enforcement costs during any period of out-of-state residency. As such, this also prevents Respondents from avoiding the terms and conditions of probation by merely moving out of state. To ensure Board staff does not monitor tolled Respondents indefinitely and drain staff resources, the tolling provision would establish a two-year tolling period limitation for Respondents to begin and continue to satisfy the full terms of their probation to maintain Board licensure, but provide for situations where Respondents are completing probation in another state.

(7) SUBMIT DOCUMENTATION - Upon request, Respondent shall submit documentation to the Board including, but not limited to the following: Livescan forms, quarterly reports, authorization for release of confidential information.

Such documentation shall be submitted under penalty of perjury, as required by the Board. On a case-by-case basis, documents shall be required to contain statements relative to Respondent's compliance with all the conditions of probation, and compliance with Board instructions.

RATIONALE: This provides the Board with a mechanism for maintaining communication with the Respondent between meetings; gathering pertinent information from the Respondent; and obtaining written materials, other than routine reports, that might be deemed necessary on an individual basis.

(8) COST RECOVERY – Pursuant to Business and Professions Code section 125.3, Respondent is hereby ordered to reimburse the Board the amount of \$_____ within ninety (90) calendar days from the effective date of this eDecision and Order, Respondent shall reimburse the Board the amount of \$ _____ for its enforcement costs, including investigation ~~and prosecution, costs~~ up to the date of the hearing. Failure to reimburse the Board's enforcement costs ~~of its investigation and prosecution~~ shall constitute a violation of ~~the probationary order~~, unless the Board or its designee agrees in writing to payment by an installment plan because of financial hardship. Any and all requests for a payment plan shall be submitted in writing by Respondent to the Board.

However, full payment of any and all enforcement costs required by this condition must be received by the Board no later than one (1) year prior to the scheduled termination of probation. ~~Periods of non-practice by Respondent shall not relieve Respondent of his or her obligation to reimburse the Board for its costs.~~

RATIONALE: The Board has statutory authority to ~~collect probation monitoring be~~ reimbursed the reasonable costs of investigation and enforcement of the case, and all orders should contain this provision or include discussion in the Decision as to why cost recovery is not ordered.

(9) PROBATION MONITORING COSTS: All costs incurred for probation monitoring during the entire probationary period shall be paid by ~~the~~ Respondent. The monthly cost may be adjusted as expenses are reduced or increased. Respondent's failure to comply with all terms and conditions of probation may also cause this amount to be increased. All payments for probation monitoring costs are to be sent directly to the Board and must be received by the dates specified.

If Respondent is unable to submit probation monitoring costs payments for any month, ~~he or she Respondent shall instead be required, instead~~ to submit an explanation of why ~~he or she Respondent~~ is unable to submit the probation monitoring costs payments, and the dates ~~he or she Respondent~~ will be able to submit the probation monitoring costs payments, including payment amounts. Supporting documentation and evidence of why ~~the~~ Respondent is unable to make such payments must accompany this submission.

~~In addition to any other disciplinary action taken by the Board, the probationary period will be extended.~~

RATIONALE: The Board has statutory authority to collect probation monitoring costs and all orders should contain this provision.

(10) LICENSE SURRENDER - If Respondent ceases practicing due to retirement, health reasons, or is otherwise unable to satisfy the terms and conditions of probation, Respondent may submit a written request to surrender his or her Respondent's license to the Board. The Board shall evaluate Respondent's request and ~~to~~ exercise its discretion whether to grant the request, or ~~to~~ take any other action deemed appropriate and reasonable under the circumstances. Such surrender shall be accomplished through a written stipulated settlement agreement, without the filing of an accusation or petition to revoke probation, and without further hearing. Upon the Board's formal acceptance of the surrender, Respondent shall deliver ~~his or her Respondent's~~ wallet

and wall certificates to the Board or its designee, and Respondent shall no longer practice dentistry or be subject to the terms and conditions of probation.

Surrender of Respondent's license shall be considered a disciplinary action and shall become a part of Respondent's license history with the Board. If Respondent re-applies for a ~~dental~~ license issued by the Board, the application shall be treated as a petition for reinstatement of a revoked license.

(11) FUNCTION AS A LICENSEE — Respondent, during the period of probation, shall engage in the practice of ~~[INSERT APPROPRIATE LICENSING CATEGORY, e.g. dentistry, dental hygiene, dental hygiene in extended functions, etc.]~~ in California for a minimum of sixteen (16) hours per week or sixty four (64) hours per calendar month. For the purpose of compliance with this section, "engaged in the practice of ~~[INSERT APPROPRIATE LICENSING CATEGORY]~~ may include, when approved by the Board, volunteer work in ~~[INSERT APPROPRIATE LICENSING CATEGORY]~~, or work in any non-direct patient position that requires licensure.

~~In the event Respondent should leave California to practice outside the state, Respondent must provide written notification to the Board of the dates of departure and anticipated return to the state. Respondent's probation is tolled, if and when he or she ceases practicing in California. Periods of practice outside of California will not apply to the reduction of the probationary period. In the event Respondent ceases to practice a minimum of sixteen (16) hours per calendar week or sixty four hours per calendar month in California, Respondent must provide written notification of that fact to the Board. The period when the Respondent is not practicing, the minimum number of hours, will not apply to the reduction of the probationary period. Absence from practice shall not relieve the Respondent from maintaining a current license or from fulfilling all of the terms and conditions of probation. For purposes of this condition, non-practice due to Board ordered suspension shall not be considered a period of non-practice. If Respondent stops practicing in California for a total of five (5) years, Respondent's license shall be automatically cancelled.~~

~~If Respondent has not complied with this condition during the probationary term, and Respondent has presented sufficient documentation of his or her good faith efforts to comply with this condition, and if Respondent is in compliance with all other probation conditions, the Board, in its sole discretion, may grant an extension of Respondent's probation period up to one year without further hearing in order to comply with this condition. During the one year extension, all original conditions of probation shall apply unless they have been modified by the Board via a petition for modification of probation.~~

RATIONALE: ~~This provides the Board with an opportunity to monitor Respondents and determine if they can perform the functions and duties of his or her licensing category in a competent manner. It also prevents Respondents from merely “sitting out” the probation and avoiding the necessity of demonstrating competence and compliance with probation conditions.~~

(112) CONTINUANCE OF PROBATIONARY TERM/COMPLETION OF PROBATION -

If Respondent violates the terms of this probation in any respect, the Board, after giving Respondent notice and the opportunity to be heard, may set aside the stay order and impose the revocation or suspension of ~~the~~ Respondent’s license. If, during the period of probation, an accusation and/or a petition to revoke probation or both has been filed against Respondent’s license, or the Attorney General's Office has been requested to prepare an accusation and/or a petition to revoke probation or both against Respondent’s license, the Board shall have continuing jurisdiction until the matter is final, and the probationary period shall automatically be automatically extended and shall not expire until the accusation and/or the petition to revoke probation has been acted upon by the Board. Upon successful completion of probation, Respondent’s license will be fully restored.

RATIONALE: The provision ensures that the Board will be able to continue monitoring the practice of licensees who are either out of compliance with ~~his or her~~ their probation terms and conditions or have allegedly committed further acts that constitute a violation of the Dental Practice Act. This is necessary to protect the public from licensees who have already demonstrated a lack of compliance with the Dental Practice Act.

(123) SALE OR CLOSURE OF AN OFFICE AND/OR PRACTICE - If Respondent sells or closes ~~his or her~~ Respondent’s office after the imposition of administrative discipline, Respondent shall ensure the continuity of patient care and the transfer of patient records. Respondent shall also ensure that patients are refunded money for dental work not completed, and shall not misrepresent to anyone the reason for the sale or closure of the office and/or practice. The provisions of this term of probation condition in no way authorize the practice of dentistry by ~~the~~ Respondent during any period of license suspension.

RATIONALE: This provision is intended to protect patients of the Respondent who ~~whose dentist of record has been disciplined and he or she needs to or chooses to sell or close his or her~~ their practice.

(134) NOTIFICATION TO EMPLOYER - Prior to engaging in the practice of dentistry or performing dental procedures as a dental auxiliary, as applicable, ~~the~~ Respondent shall provide a true copy of ~~the~~ this Decision and Order, including the underlying

Disciplinary and Denial Guidelines CCR §1018

~~and~~ Accusation, Statement of Issues, or Petition to Revoke Probation, to his or her Respondent's employer, supervisor, or contractor, or prospective employer or contractor, and at any other facility where Respondent engages in the practice of dentistry or performing dental procedures as a dental auxiliary, as applicable, before accepting or continuing employment. Respondent shall submit proof of compliance to the Board or its designee within fifteen (15) calendar days. This term of probation ~~condition~~ shall apply to any change(s) in Respondent's place of employment.

NOTE: If the Board finds that the evidence establishes that an individual is a substance-abusing licensee, then the Board shall use the term "**NOTIFICATION TO EMPLOYER**" as set forth in the document entitled "Uniform Standards Related to Substance-Abusing Licensees with Standard Language for Probationary Orders" incorporated by reference at California Code of Regulations, title 16, section 1018.01 in lieu of this term in the probationary order.

RATIONALE: ~~The condition~~ This term of probation provides the Board with a mechanism for ensuring that the employer providing dental services is informed of the license status of the Respondent so that, if necessary, the work environment can be structured to ensure consumer safety.

(14) DISCLOSURE OF PROBATION STATUS TO PATIENTS ~~-~~

[Required Only For Probationers Respondents Meeting Requirements in of Business and Professions Code BPC Section 1673]

[Users: Please review this notice prior to considering whether to include this term in any probationary order:

This term of probation is required pursuant to Business and Professions Code (BPC) section 1673 **ONLY** for ~~probationers-respondents~~ meeting any of the following criteria:

(1) A final adjudication by the Board following an administrative hearing or admitted findings or prima facie showing in a stipulated settlement establishing any of the following:

- 1(A) commission of any act of sexual abuse, misconduct, or relations with a patient or client, as defined in BPC sections 726 or 729;**
- 2(B) drug or alcohol abuse directly resulting in harm to patients or to the extent that such use impairs the ability of the Respondent to practice safely;**
- 3(C) criminal conviction directly involving harm to patient health; or,**

4(D) inappropriate prescribing resulting in harm to patients and a probationary period of five (5) years or more.

(2) The Accusation or Statement of Issues alleged that Respondent committed any of the acts described in subparagraphs (A) to (D), inclusive, of paragraph (1), and there is a stipulated settlement with the Board based upon a nolo contendere or other similar compromise that does not include any prima facie showing or admission of guilt or fact, but does include an express acknowledgment that the disclosure requirements of BPC section 1673 would serve to protect the public interest.

If any of the foregoing criteria specified in paragraphs (1) or (2) are established metafter established via admitted findings or a prima facie showing made in a stipulated settlement, then the following shall be added to the probationary order:]

Respondent shall provide to each patient or the patient's guardian or healthcare surrogate (authorized representative) a separate disclosure that includes Respondent's probation status, the length of the probation, the probation end date, all practice restrictions placed on Respondent by the Board, the Board's toll free telephone number (as currently listed on the Board's website at www.dbc.ca.gov under the tab "Contact Us"), and an explanation of how that the patient can find further information on Respondent's probation on Respondent's profile page on the Board's online license information internet website available at the Board's "License Verification" tab at <https://www.dbc.ca.gov/consumers/index.shtml>. The disclosure shall be provided before the patient's first visit following the probationary order while Respondent is on probation. Respondent shall obtain from the patient, or the patient's guardian or healthcare surrogate, a separate, signed copy of that disclosure, which shall be maintained in the patient's medical record for the entire probationary period. Respondent shall provide records requested by the Board within 15 days of the date of receipt of the request or within the time specified in the request, whichever is later, unless the licensee Respondent is unable to provide the documents within this time period for good cause. For the purposes of this section, "good cause" includes physical inability to access the records in the time allowed due to illness or travel.

Respondent shall not be required to provide the disclosures specified in this term in the following circumstances: 1) the patient is unconscious or otherwise unable to comprehend the disclosure and sign the copy of the disclosure and a guardian or healthcare surrogate is unavailable to comprehend the disclosure and sign the copy; 2) the visit occurs in an emergency room or an urgent care facility or the visit is unscheduled, including consultations in inpatient facilities; 3) Respondent will be

treating the patient during the visit and is not known to the patient until immediately prior to the start of the visit; or 4) Respondent does not have a direct treatment relationship with the patient. A direct treatment relationship is where the health care provider delivers health care, provides services or products, or reports the diagnosis and/or results associated with health care, to the patient and not through a third party.

RATIONALE: This disclosure requirement is mandated to be provided in those cases where BPC section 1673 applies, and placement of this disclosure language in the Board's Disciplinary Guidelines ensures consistent implementation and notice to the Respondent of these legal requirements. The method of providing such a requirement is through a disciplinary order issued in accordance with the Administrative Procedure Act or through settlement agreement with the Respondent. In cases where this term does not apply as specified in BPC section 1673, it would not be included in any proposed disciplinary order.

(15) CIVIL PENALTY

[Users: This term of probation shall be included only for Respondents found to have violated BPC section 1684.1.]

Respondent shall pay to the Board a fine civil penalty in the amount of \$ _____ [INSERT DOLLAR AMOUNT pursuant to BPC section 1684.1(a)(1) or (b)(1)] pursuant to Business and Professions Code section 1684.1. Respondent shall make the payments as follows: [INSERT CONDITIONS OF PAYMENT THAT SPECIFY WHEN TO PAY THE BOARD, for example: "by the end of the first year of probation."]

Respondent shall pay the civil penalty by check or money order payable to the Dental Board of California and shall indicate on the check or money order the following: "Civil Penalty: Case No. _____". In lieu of a check or money order, Respondent may make an electronic payment via credit card through the Department of Consumer Affairs' BreEZe online system, which can be accessed at <https://www.breeze.ca.gov>.

RATIONALE: This term of probation is required pursuant to BPC section 1684.1 for a Respondent who fails or refuses to comply with a request for patient dental records or fails or refuses to comply with a court order mandating the release of records to the Board. This term shall only be used if the Accusation specifically alleges violation of BPC section 1684.1 and provides notice that imposition of civil penalties in accordance with BPC section 1684.1 are sought by the Board.

ADDITIONAL OPTIONAL PROBATIONARY TERMS AND CONDITIONS
MODEL LANGUAGE

(165) SUSPENSION - Commencing from the effective date of this ~~decision~~ Decision and Order, Respondent shall be suspended from the practice of dentistry choose either (A) for a minimum period of {[minimum of 14 days]}, or (B) until Respondent satisfies the continuing education requirements under BPC section 1645 (Note: The continuous suspension provision noted in (B) shall be used in the case of continuing education violations only.). Respondent shall not mislead patients regarding the reasons for the suspension from practicing dentistry.

During the suspension, Respondent shall not practice dentistry directly or indirectly, including the supervision of dental auxiliaries, nor shall Respondent receive or have set aside for future receipt, any ~~new~~ monies derived from the practice of dentistry occurring during the suspension period. as defined by the provisions of Business and Professions Code §section 1625 defines the practice of dentistry and, which includes managing or conducting as manager, proprietor, conductor, lessor, or otherwise, a place where dental operations are performed.

If Respondent operates ~~his or her own~~ a dental office as a solo practitioner or as a one-person professional corporation, said office is to be closed except for administrative purposes (e.g., making future appointments for when the suspension is over, opening mail, referring patients, accepting payments on accounts receivable for monies earned prior to the period of suspension, and general office administration); ~~and~~ Respondent shall not lease the dental office ~~nor~~ make any monetary gain from the practice earned during the suspension period of time that the office is closed. During the suspension period, all probation terms and conditions are in full force and effect except those relating to the actual practice of [INSERT APPROPRIATE LICENSE CATEGORY.]

RATIONALE: This provision is necessary for the protection of the public because in some cases the licensee needs to stop practicing and participate in either rehabilitation or remedial education before resuming practice. ~~And, it is also~~ appropriate in cases where the serious nature of the misconduct warrants a period of suspension from practice or as required for continuing education violations as set forth in BPC section 1645.

(176) REMEDIAL EDUCATION – Within ninety (90) days of the effective date of this ~~decision~~ Decision and Order, Respondent shall submit to the Board for its prior approval, an appropriate program of remedial education related to [(the cause of disciplinary Disciplinary and Denial Guidelines CCR §4018

action]) in an educational facility or program ~~which that~~ must also ~~to~~ be approved by the Board. [(If appropriate, add: Respondent shall be evaluated by a dental educational institution prior to submitting remedial education courses for approval.)] The exact number of hours and specific content of the program shall be ~~determined~~ approved by the Board or its designee and shall be granted where the course is directly relevant to the subject matter of the causes for discipline in the Board's decision, offered by an approved provider (an American Academy of General Dentistry PACE Program approved organization, an American Dental Association (ADA) Continuing Education Recognition Program (CERP) recognized provider, or a Board approved provider as set forth in CCR section 1016) and where Respondent has met the other requirements of this Term.

Respondent shall submit to the Board, along with the written request for approval, the name of the course provider and a copy of the course outline, syllabus, or a description for the proposed course. The request shall contain, at a minimum, the following:

- (1) A short, descriptive title of the educational program;
- (2) A statement of educational objectives;
- (3) Length of the educational program;
- (4) Sequential and detailed outline of subject matter to be addressed or a list of skills to be learned and how those skills are to be measured; and,
- (5) Instructional mode or methods.

Respondent shall successfully complete the remedial education program and may be required to pass an examination administered by the Board or its designee related to the program's content. [(If appropriate, add: Respondent shall be restricted from the practice of {areas where a deficiency has been identified} until the remedial education program has been successfully completed.)] Failure to satisfactorily complete the required course within the first year of probation shall constitute a violation of probation. Respondent shall pay all costs of the remedial education program.

RATIONALE: In those instances where a licensee has demonstrated negligence or incompetence, or has been found to have performed work or ~~attempting~~ attempted treatment beyond the scope of training or experience, the Board will impose a program of remedial education. This program shall specify the areas and hours of remedial education ~~remediation~~ required, and may also dictate the institution(s) where the education will be received. A remedial education program is usually required prior to allowing the licensee to return to the identified deficient area of practice, and requires prior approval by the Board. Continuing education courses used for renewal of licensure will do not apply to fulfill the remedial education requirement. This program is for

dentists and dental auxiliaries who have demonstrated deficiencies in skill but do not constitute a present danger to patients in other areas of practice.

(187) EXAMINATION – Respondent shall not practice dentistry until ~~he or she~~ Respondent has passed the ~~California clinical examination or American Board of Dental Examiners (ADEX) the Western Regional Examination Board~~ examination. Respondent shall pay all fees related to the examination. If Respondent fails the examination three times, a period of one year must pass prior to retaking the required examination. Under the condition of failure for three times, ~~the~~ Respondent must also show evidence of remediation in the deficient area(s) prior to retaking the examination. Respondent must be successful in each section of the examination in order to fulfill this requirement and may not practice until totally successful. The probationary period is tolled until Respondent passes either examination.

RATIONALE: This term of probation~~condition~~ concerns itself with those individuals who are significantly deficient in the practice of dentistry or who have had a prior revocation and are petitioning the Board for reinstatement of their license. This term of probation~~condition~~ will also apply to licensees who have had prior restrictions on practicing in a particular area or specialty field. This term of probation~~condition~~ is particularly recommended in cases where the Respondent has been found to have committed gross negligence, incompetence, or repeated negligence.

(198) SUPERVISED PRACTICE - Within sixty (60) days of the effective date of this ~~d~~Decision and Order, Respondent shall submit to the Board, for its prior approval, the name and qualifications of one or more proposed supervisors and a plan for each such supervisor by which Respondent's practice [of dentistry/general anesthesia or deep sedation/moderate sedation/oral conscious sedation on adult patients/minimal sedation] would be supervised. The Board will advise Respondent within two (2) weeks whether ~~or not~~ the proposed supervisor and plan of supervision are approved. Respondent shall not practice [of dentistry/general anesthesia or deep sedation/moderate sedation/oral conscious sedation on adult patients/minimal sedation] until receiving notification of Board approval of Respondent's choice of a supervisor and plan of supervision.

The plan of supervision shall be [~~direct and require the physical presence of the supervising dentist in the dental office during the time dental procedures are performed-~~] [~~general and not require the physical presence of the supervising dentist during the time dental procedures are performed but does require an occasional random check of the work performed on the patient as well as quarterly monitoring visits at the office or place of practice~~]. Additionally, the supervisor shall have full and random

access to all patient records of Respondent. The supervisor may evaluate all aspects of Respondent's practice regardless of Respondent's areas of deficiencies.

Each proposed supervisor shall be a California licensed dentist who shall submit written reports to the Board on a quarterly basis verifying that supervision has taken place as required and include an evaluation of Respondent's performance. It shall be Respondent's responsibility to ~~assure~~ ensure that the required reports are filed in a timely manner. Each supervisor shall have been licensed in California for at least five (5) years and shall not have ~~ever~~ been subject to any prior disciplinary action by the Board. An administrative citation and fine does not constitute discipline and, therefore, in and of itself is not a reason to deny an individual as a supervisor.

The supervisor shall be independent, with no prior or current business, ~~or~~ professional, ~~relationship with Respondent and the supervisor shall not be in a~~ or familial relationship with ~~or be an employee, partner or associate of~~ Respondent. If the supervisor terminates or is otherwise no longer available, Respondent shall not practice until a new supervisor has been approved by the Board. All costs of the supervision shall be borne by ~~the~~ Respondent.

NOTE: If the Board finds that the evidence establishes that an individual is a substance-abusing licensee, then the Board shall use the term "**SUPERVISED PRACTICE**" in the probationary order as set forth in the document entitled "Uniform Standards Related to Substance-Abusing Licensees with Standard Language for Probationary Orders" incorporated by reference at California Code of Regulations, title 16, section 1018.01 **in lieu of** this term in this section.

RATIONALE: This ~~term of probation condition~~ allows the Board to monitor the competency of the Respondent by use of a fellow practitioner. It is most appropriate in those cases involving incompetence, negligence, and sexual misconduct. The type of supervision needs to be clearly defined relative to the necessity for the presence of the supervisor. Direct supervision would require the physical presence of the supervisor during the time dental procedures are performed. General supervision does not require the physical presence of the ~~supervisor~~ supervising dentist. The type of required supervision depends on the severity of the violation(s). In cases where the Respondent's general practice of dentistry has not been determined to require supervision, but instead involves the Respondent's practice of ordering or administering general anesthesia, deep sedation, moderate sedation, oral conscious sedation to adult patients, or pediatric minimal sedation, the area of practice requiring supervision must be identified.

(1209) RESTRICTED PRACTICE - Respondent shall not practice (which includes ~~consulting~~consultation, ~~examining~~examination, and ~~treating~~treatment) in [(area of noted deficiency)] [(shall not treat {male}{female}{minors} patients {without the presence of another party})]. Within thirty (30) days from the effective date of this ~~d~~Decision and Order, Respondent shall submit to the Board, for prior approval, a plan to implement this restriction. Respondent shall submit proof satisfactory to the Board of compliance with this term of probation.

Respondent shall notify all current and prospective patients of the inability to perform the dental procedure of ____ by posting a written notification visible to all patients before they receive any dental treatment. Respondent shall submit documentation ~~which~~that provides satisfactory evidence of compliance with this term of probation.

RATIONALE: ~~The condition~~This term of probation prevents the Respondent from engaging in the practice of dentistry in situations where there is no close supervision and/or where the ~~r~~Respondent could have undue authority over others and access to controlled substances.

(210) THIRD-PARTY CHAPERONE-MONITOR (CHAPERONE) - During probation, Respondent shall have a ~~third-party~~third party Board-approved monitor present at all times while consulting, examining, or treating [(INSERT PATIENT CATEGORY, e.g., male, female, or minors)] patients. Respondent shall, within thirty (30) calendar days of the effective date of ~~the~~this Decision and Order, submit to the Board for prior approval names of persons who will act as the ~~third-party~~third party monitor. Each ~~third-party~~third party monitor shall initial and date each patient dental record at the time the monitor's services are provided. Each ~~third-party~~third party monitor shall read the Decision and Order(s) and the Accusation(s), Statement of Issues, and/or Petition to Revoke Probation and fully understand the role of the ~~third-party~~third party monitor.

Respondent shall maintain a log of all patients seen for whom a ~~third-party~~third party monitor is required. The log shall contain the; 1) monitor's name, 2) patient name, age, gender, address, and telephone number; and 3) date of service. Respondent shall keep this log in a separate file or ledger, in chronological order, and shall make the log available for immediate inspection and copying on the premises at all times during business hours by the Board, ~~and shall~~. Respondent shall retain the log for the entire term of probation. Failure to maintain a log of all patients requiring a ~~third-party~~third party monitor, or to make the log available for immediate inspection and copying on the premises, is a violation of probation.

Respondent shall provide written notification prior to treatment to Respondent's affected patients that a ~~third-party~~ third party monitor shall be present during all consultations, examinations, and/or treatments with [INSERT TYPE OF PATIENT, (e.g., male, female, or minor)] patients. Respondent shall maintain in the patient's file a copy of the written notification, ~~shall~~ make the notification available on the premises at all times during business hours for immediate inspection and copying ~~on the premises at all times during business hours~~ by the Board, and ~~shall~~ retain the notification for the entire term of probation. Respondent shall submit documentation to the Board that provides satisfactory evidence of compliance with this term of probation.

RATIONALE: This term of probation ~~condition~~ should only be imposed in those rare instances where the Respondent has shown evidence of rehabilitation and is no longer considered a danger to patients. In those instances where the Respondent is still considered a danger to patients, revocation should be imposed.

NOTE: In those cases where practice is restricted by either scope of practice or by the age or gender of patients, the Respondent must notify all current and prospective patients of the restriction. Respondents found to have violation(s) or conviction(s) of sexual misconduct shall also be placed in a supervised/monitored environment.

(221) RESTITUTION - Within ~~[(30 to 90)]~~ days of the effective date of this ~~d~~Decision and Order, Respondent shall make arrangements for restitution to ~~[(patient or entity)]~~ in the amount of \$ _____ ~~(dollar amount)~~. ~~[(Insert to whom payment is to be made and when it is due. If a payment plan is imposed, insert specifics regarding payment plan.)]~~

RATIONALE: Where there has been patient harm resulting from negligent or incompetent treatment or a determination has been made concerning fraudulent billing, restitution may be warranted. Careful scrutiny should be made to ensure that proper restitution is made to either the patient or any other applicable entity. Restitution may be made within a specific time frame or on a payment schedule. Restitution should cover those amounts that are a direct result of the actions of the Respondent.

(232) COMMUNITY SERVICE - Within sixty (60) days of the effective date of this ~~decision~~Decision and Order, Respondent shall submit to the Board, for its prior approval, a community service program for the ~~[(first year of probation or a specified period of probation)]~~ in which Respondent shall provide volunteer services on a regular basis to a non-profit community or charitable facility or agency for at least ~~[(number of hours per month/year for the first year or specified period of probation)]~~. Such community service shall be ~~[(dental or non-dental)]~~ related.

Community service required by this ~~term condition~~ shall be performed in ~~the State of California~~. Community service performed prior to the effective date of ~~the~~this Decision and Order shall not be accepted in fulfillment of this ~~term condition~~.

Prior to engaging in any community service, Respondent shall provide a true copy of ~~the~~this Decision and Order, including the related Accusation(s), Statement of Issues, and/or Petition to Revoke Probation, to the chief of staff, director, office manager, program manager, officer, or the chief executive officer ~~at~~of every community or non-profit organization where Respondent provides community service, ~~and~~Respondent shall also submit proof of compliance to the Board or its designee within fifteen (15) calendar days. This ~~term condition~~ shall also ~~comply~~apply to any change(s) in community service. All community services must be completed no later than one hundred and twenty (120) calendar days prior to the scheduled termination of probation.

RATIONALE: ~~The Dental Practice Act~~Business and Professions Code section 1671, subdivision (e), authorizes the Board to impose the fulfillment of community service as a ~~term condition~~of probation ~~the fulfillment of community service~~. This is appropriate in those cases where the Respondent has violated the public's trust. If the violation relates to quality of care, the community service shall not be dentally related.

(243) PSYCHOLOGICAL EVALUATION - Within sixty (60) days of the effective date of this ~~d~~Decision and Order, and on a periodic basis thereafter as required by the Board or its designee, Respondent shall undergo a psychological evaluation by a licensed psychiatrist or psychologist approved by the Board. The psychiatrist or psychologist shall have been licensed for a minimum of five (5) years and shall not have been subject to discipline by a regulatory agency. The evaluator shall furnish a detailed written report to the Board regarding Respondent's judgment and ability to practice dentistry independently and safely and other information as the Board may require. The cost of the psychological evaluation shall be paid by Respondent. Respondent shall execute a Release of Information form authorizing the evaluator to release all information to the Board. Respondent shall comply with all of the recommendations of the evaluator ~~unless excused by the Board in its sole discretion~~. This ~~The Board shall consider this~~ evaluation shall be to be confidential ~~by the Board~~ and is not subject to discovery. Psychological evaluations conducted prior to the effective date of ~~the~~this Decision and Order shall not be accepted towards the fulfillment of this requirement.

OPTION: Respondent shall not engage in the practice of dentistry until notified by the Board in writing of its determination that Respondent is safe to practice dentistry independently and safely. The period of time that Respondent is not practicing shall not be counted toward completion of the term of probation.

Respondent's failure to undergo and complete the psychological evaluation, recommended therapy or to comply with any other recommendations by the evaluator is a violation of probation.

NOTE: If the Board finds that the evidence establishes that an individual is a substance-abusing licensee, then the Board shall use the term "**CLINICAL DIAGNOSTIC EVALUATION**" in the probationary order as set forth in the document entitled "Uniform Standards Related to Substance-Abusing Licensees with Standard Language for Probationary Orders" incorporated by reference at California Code of Regulations, title 16, section 1018.01 **in lieu of** this term in this section.

RATIONALE: This term of probation condition shall be applied, but not limited to, any licensee who may be affected by a psychological problem, who has committed an act of sexual misconduct, or who has suffered a substantially related conviction. This evaluation may be ordered and the results evaluated prior to allowing practice by the Respondent.

(254) PSYCHOTHERAPY - Within forty-five (45) days of the effective date of this ~~d~~Decision and Order, or within forty-five (45) days of a determination that psychotherapy is required, Respondent shall submit a proposed therapist and plan of therapy to be approved by the Board. The cost of therapy shall be borne by Respondent. The plan of therapy shall include the nature of the treatment and its proposed duration. The psychotherapist shall agree to submit quarterly reports to the Board regarding the progress and participation of Respondent. The treatment program shall not be terminated except upon Board approval after submission of the results of the program by the psychotherapist.

If there is a need for ongoing psychiatric psychological treatment, Respondent shall, within thirty (30) days of the requirement notice, submit to the Board for its prior approval the name and qualifications of a psychotherapist psychiatrist licensed mental health professional of Respondent's choice. If the psychological evaluation recommends that Respondent seek treatment from a specific type of mental health professional (e.g. psychiatrist, psychologist, licensed clinical social worker or marriage and family therapist), Respondent shall only submit for consideration those who meet that recommendation. Respondent shall undergo and continue psychotherapy until further notice from the Board or its designee. Respondent shall have the treating psychotherapist mental ~~health care~~healthcare professional submit quarterly status reports to the Board or its designee indicating whether ~~the~~ Respondent is capable of practicing dentistry safely.

RATIONALE: This ~~term of probation condition~~ should be imposed whenever there is evidence that the Respondent may have a psychological problem that may impact ~~his or her being able~~ Respondent's ability to practice safely. If the Respondent is already in therapy, this ~~term of probation condition~~ should be imposed to ensure that ~~he or she~~ the Respondent continues to receive help.

(265) PHYSICAL EVALUATION - Within forty-five (45) days of the effective date of this ~~decision~~ Decision and Order, Respondent, at ~~his or her~~ Respondent's expense, shall have a licensed physician and surgeon, who is approved by the Board before the assessment is performed, submit an assessment of ~~the~~ Respondent's physical condition and capability to perform the duties of a dentist or dental auxiliary, as applicable. If medically determined, a recommended treatment program will be instituted and followed by ~~the~~ Respondent with the physician providing written reports to the Board.

If Respondent is determined to be unable to practice dentistry or perform the duties of a dental auxiliary, as applicable, safely with or without restrictions, the licensed physician and surgeon making this determination shall immediately notify the Board and Respondent by telephone, and the Board shall request that the Attorney General's office prepare an accusation and/or petition to revoke probation. Upon **written** notification from the Board or its designee of this determination, Respondent shall immediately cease practice and shall not resume practice until notified by the Board in writing that practice may be resumed. During this period of cessation of practice, Respondent shall not engage in any practice for which a license issued by the Board is required until the Board has notified Respondent that a medical determination permits Respondent to resume practice. This period of cessation of practice shall not apply to the reduction of this probationary time period.

If ~~the~~ Respondent fails to have the above assessment submitted to the Board within the 45-day requirement, Respondent shall receive a **written** notification from the Board or its designee to cease practicing dentistry within three (3) calendar days after being notified. Respondent's license is immediately suspended, and he or she Respondent shall ~~immediately~~ cease practice and shall not resume practice until notified by the Board in writing that practice may resume. This period of suspension of practice shall not apply to the reduction of this probationary time period. The Board may waive or postpone this suspension only if significant, documented evidence of mitigation is provided. Such evidence must establish good faith efforts by ~~the~~ Respondent to obtain the assessment, and a specific date for compliance must be provided. Only one such waiver or extension may be permitted.

Physical evaluations conducted prior to the effective date of ~~the~~ this Decision and Order shall not be accepted towards the fulfillment of this requirement.

OPTION: Respondent shall not engage in the practice of dentistry until notified by the Board in writing of its determination that Respondent is safe-able to practice dentistry independently and safely. The period of time that Respondent is not practicing shall not be counted toward completion of the term of probation.

RATIONALE: This term of probation condition shall be applied, but not limited to, any licensee whose ability to practice safely may be affected by a physical condition. This evaluation may be ordered and the results evaluated prior to the Board allowing the Respondent to practice, ~~by the Respondent~~.

(276) DIVERSION PROGRAM - Within seven (7) days of the effective date of this Decision and Order, Respondent shall contact the ~~Program Manager of the Board's~~ Diversion Program or his or her ~~its~~ designee to schedule an intake, ~~and assessment,~~ and drug testing for evaluation by the Diversion Evaluation Committee (DEC). If Respondent fails to participate in the time required by the Diversion Program in the initial intake and assessments before ~~his or her~~ Respondent's meeting with the DEC, this shall constitute a violation of probation and shall be reported to the enforcement program. If the Board notifies Respondent in writing of such failure to participate in the time required for the initial intake and assessment, ~~he or she~~ Respondent shall immediately cease practicing dentistry or the performance of duties as a dental auxiliary, as applicable, and shall not resume practice until notified by the Board or its designee that practice may be resumed. If the DEC determines that Respondent is not appropriate for the program for reasons other than Respondent's failure to cooperate or make a good faith effort to participate, this ~~condition~~ term of probation will have been met. If accepted into the program, Respondent shall fully comply with the terms and conditions of treatment and any other requirements imposed by the DEC. Any costs incurred shall be paid by Respondent. Failure to successfully complete the DEC treatment Diversion Program shall constitute a violation of probation.

NOTE: If the Board finds that the evidence establishes that an individual is a substance-abusing licensee, then the Board shall use the term "DRUG OR ALCOHOL ABUSE TREATMENT PROGRAM" in the probationary order as set forth in the document entitled "Uniform Standards Related to Substance-Abusing Licensees with Standard Language for Probationary Orders" incorporated by reference at California Code of Regulations, title 16, section 1018.01 in lieu of this term in this section.

RATIONALE: ~~Where~~When it has been determined that in order to protect the public, a licensee or applicant should be evaluated to determine if ~~he or she~~the Respondent should participate in the Board's Diversion Program due to drug or alcohol impairment, this ~~condition~~term of probation should be imposed.

(287) BIOLOGICAL TESTING - Respondent shall submit to and pay for any random biological fluid testing, or hair sample testing, breath alcohol testing or any other mode of testing required by the Board. Respondent shall have the test(s) performed by a Board-approved laboratory within twelve (12) hours upon request by the Board, or sooner if so requested by the Board, and ~~this shall~~ ensure that the test results are sent immediately to the Board. Failure to comply within the time specified shall be considered an admission of a positive drug screen and constitutes a violation of probation. If a test results in a determination that the urine admission was too diluted for testing, the result shall be considered an admission of a positive urine screen and constitutes a violation of probation. If an "out of range result" is obtained, the Board may require Respondent to immediately undergo a physical examination and to complete laboratory or diagnostic testing to determine if any underlying physical condition has contributed to the diluted result and to cease practice. Any such examination or laboratory and testing costs shall be paid by Respondent. An "out of range result" is one ~~in which~~that, based on scientific principles, indicates ~~the~~that Respondent attempted to alter the test results in order to either render the test invalid or obtain a negative result when a positive result should have been the outcome. If it is determined that Respondent altered the test results, the result shall be considered an admission of a positive urine screen and constitutes a violation of probation, ~~and~~ Upon written notification from the Board or its designee, Respondent shall ~~must~~ cease practicing. Respondent shall not resume practice until notified by the Board.

NOTE: If the Board finds that the evidence establishes that an individual is a substance-abusing licensee, then the Board shall use the term "DRUG AND ALCOHOL TESTING" as set forth in the document entitled "Uniform Standards Related to Substance-Abusing Licensees with Standard Language for Probationary Orders" incorporated by reference at California Code of Regulations, title 16, section 1018.01 in lieu of this term in the probationary order.

RATIONALE: This term of probation ~~condition~~ will allow the Board to monitor the Respondent in order to ascertain if he/she is substance and/or chemical free. It is to be required when the Respondent has violated any alcohol and/or substance abuse prohibitions.

(298) ABSTAIN FROM USE OF ALCOHOL, CONTROLLED SUBSTANCES, AND DANGEROUS DRUGS - Respondent shall abstain completely from the possession, injection, or consumption ~~of by~~ any route, including inhalation, of all psychotropic (mood altering) drugs, ~~including alcohol, and including~~ controlled substances as defined in the California Uniform Controlled Substances Act (Health and Safety Code section 11007), dangerous drugs as defined by Business and Professions Code ~~S~~section 4022, and any drugs requiring a prescription. This prohibition does not apply to medications lawfully prescribed by a physician and surgeon, dentist, or nurse practitioner for a bona fide illness or condition. Within fifteen (15) calendar days of receiving any lawfully ~~prescription prescribed~~ medications, Respondent shall notify the Board in writing of the following: prescriber's name, address, and telephone number; medication name and strength; ~~issuing pharmacy's~~ name, address, and telephone number; and specific medical purpose for medication. Respondent shall also provide a current list of prescribed medication with the prescriber's name, address, and telephone number on each quarterly report submitted. Respondent shall provide the Board with a signed and dated medical release covering the entire probationary period.

Respondent shall identify for the Board's approval a single coordinating physician and surgeon who shall be aware of Respondent's history of substance abuse and who will coordinate and monitor any prescriptions for Respondent ~~for to use~~ dangerous drugs, controlled substances, or psychotropic or mood altering drugs. Once a Board-approved physician and surgeon has been identified, Respondent shall provide a copy of ~~the accusation and decision~~ this Decision and Order, including the related Accusation, Statement of Issues, or Petition to Revoke Probation, to the physician and surgeon. The coordinating physician and surgeon shall report to the Board on a quarterly basis Respondent's compliance with this term of probation ~~condition~~. If any substances considered addictive have been prescribed, the report shall identify a program for the time limited use of such substances.

The Board may require that only a physician and surgeon who is a specialist in addictive medicine be approved as the coordinating physician and surgeon.

If Respondent has a positive drug screen for any substance not legally authorized, and the Board files a petition to revoke probation or an accusation, Respondent shall be automatically suspended from practice pending the final decision on the petition to revoke probation or accusation. This period of suspension will not apply to the reduction of this probationary period.

NOTE: If the Board finds that the evidence establishes that an individual is a substance-abusing licensee, then the Board shall use the term "ABSTAIN FROM USE

OF ALCOHOL, CONTROLLED SUBSTANCES AND DANGEROUS DRUGS” as set forth in the document entitled “Uniform Standards Related to Substance-Abusing Licensees with Standard Language for Probationary Orders” incorporated by reference at California Code of Regulations, title 16, section 1018.01 **in lieu of** this term in the probationary order.

RATIONALE: Abstinence from mood altering substances (alcohol/drugs) is necessary for compliance with the Board’s Probation Program and to ensure successful rehabilitation. Abstinence from any psychotropic drug is required to prevent the substitution of one addicting substance with another.

(2309) SURRENDER/PARTIAL SURRENDER OF DRUG ENFORCEMENT AGENCY PERMIT -

Option 1:

~~Controlled Substances~~—Within sixty (60) days of the effective date of this ~~d~~Decision and Order, Respondent shall submit to the Board proof of surrender of Respondent’s Drug Enforcement Agency (DEA) Permit. Respondent shall not apply for a new DEA permit without prior written approval from the Board.

OR

Option 2:

Respondent shall not prescribe, administer, dispense, order, or possess any controlled substances as defined by the California Uniform Controlled Substances Act (Health and Safety Code section 11007), [~~(except for those drugs listed in Schedule(s)_____)~~] of the Act and/or prescribed to Respondent for a bona fide illness or condition by another practitioner. Respondent shall ensure that ~~the~~Respondent’s Drug Enforcement Agency (DEA) Permit is modified to reflect this restriction and submit proof submitted to the Board of this modification within sixty (60) days of the modification.

RATIONALE: In cases of substance abuse ~~/or~~ violation of statutes regulating the procurement, dispensing, or administration of controlled substances and dangerous drugs, this term of probation condition must be imposed.

(3130) ETHICS COURSE - Within thirty (30) days of the effective date of this ~~d~~Decision and Order, Respondent shall submit for prior Board approval a course in ethics that will be completed within the first year of probation. Units obtained for an approved course in

ethics shall not be used for continuing education units required for renewal of licensure. No correspondence or Internet courses shall be allowed. An ethics course taken after the acts or omissions that gave rise to the charges in the ~~a~~Accusation, but prior to the effective date of ~~the~~this Decision and Order may, in the sole discretion of the Board, be accepted towards the fulfillment of this term of probation~~condition~~.

Respondent shall submit to the Board, along with the written request for approval, the name of the course provider and a copy of the course outline, syllabus, or a description for the proposed course. The request shall contain, at a minimum, the following:

- (1) A short, descriptive title of the educational program;
- (2) A statement of educational objectives;
- (3) Length of the educational program;
- (4) Sequential and detailed outline of subject matter to be addressed or a list of skills to be learned and how those skills are to be measured; and,
- (5) Instructional mode or methods.

RATIONALE: In those cases involving fraud, false advertising, excessive billing, or negligence, ~~this condition~~term of probation will be imposed and may also be imposed in other cases, if applicable.

(324) BILLING MONITOR – Within sixty (60) days of the effective date of this ~~d~~Decision and Order, Respondent shall submit to the Board, for its prior approval, the name and qualifications of one or more persons to act as a billing monitor. The proposed billing monitor(s) shall have been a licensed dentist for at least five (5) years ~~be approved and shall~~ not have ~~ever~~ been subject to any prior disciplinary action by the Board. Once the Board has approved a billing monitor, Respondent shall submit a plan by which the billing monitor will provide monitoring of Respondent's billing practices.

All proposed billing monitors shall be independent and have, ~~with~~ no professional or personal relationship with Respondent, including a friendship, intimate, romantic or familial relationship with Respondent or be an employee, contractor, partner, or associate of Respondent. If, at any time during the period of probation, the billing monitor quits or is otherwise unavailable to perform ~~his or her~~ the monitoring duties, ~~within fifteen (15) calendar days of the same,~~ Respondent, within fifteen (15) calendar days thereof, shall submit to the Board, for its prior approval, the name and qualifications of one or more persons to become a replacement~~the~~ monitor.

The billing monitor shall submit written reports to the Board on a quarterly basis verifying that monitoring has taken place as required. It shall be Respondent's responsibility to ensure that the required reports are filed in a timely manner.

Respondent shall give the billing monitor access to all of Respondent's dental practice business records including financial and patient records. Monitoring shall consist of at least four (4) hours, per quarter, of review of Respondent's records. This review shall take place in Respondent's office and/or place of employment. If the billing monitor prepares a quarterly report to the Board ~~which~~ that finds substantial errors or omissions in Respondent's billing, and/or that otherwise reports questionable billing practices, monitoring may be increased at the discretion of the Board and Respondent shall immediately comply therewith. All costs of monitoring shall be borne by ~~the~~ Respondent.

Each ~~supervising~~ billing monitor shall have read this Decision and Order and the related Accusation.

RATIONALE: Recommended in cases involving capping, steering, fees for patient referrals, or any other type of billing irregularities or fraud.

(332) SOLO PRACTICE - Respondent is prohibited from engaging in the solo practice of dentistry.

RATIONALE: Like similar terms and conditions, this term of probation condition prevents the ~~Respondent~~ from engaging as a sole practitioner in the practice of dentistry in situations where there is no close supervision and/or where the ~~Respondent~~ could have undue authority over others and/or access to controlled substances.

(343) CONTROLLED SUBSTANCE - MAINTENANCE OF RECORDS AND INVENTORIES - Respondent shall maintain a record of all controlled substances ordered, prescribed, dispensed, administered, or possessed by Respondent, during probation, showing all the following: 1) the name and address of patient; 2) the date; 3) the character and quantity of controlled substances involved; and 4) the indications and diagnosis for which the controlled substances were furnished. Respondent shall keep these records in a separate file or ledger, in chronological order. All records and any inventories of controlled substances shall be available for immediate inspection and copying on the premises by the Board or its designee at all times during business hours and shall be retained for the entire term of probation. Failure to maintain all records, to provide immediate access to the inventory, or to make all records available for immediate inspection and copying on the premises, is a violation of probation.

RATIONALE: This should only be used for dentist license/permit cases. In cases of substance abuse/or violation of statutes regulating the procurement, dispensing, or administration of controlled substances and dangerous drugs, this term and condition must be imposed.

(354) CLINICAL TRAINING PROGRAM - Within sixty (60) days of the effective date of this Decision and Order, Respondent shall enroll in a clinical training or educational program offered by an approved California Dental School. The program shall consist of 1) a comprehensive assessment comprised of a two-day assessment of Respondent's basic clinical and communication skills common to all clinicians; ~~and~~ 2) dental knowledge, skill, and judgment pertaining to Respondent's specialty or sub-specialty (if ~~he or she~~ Respondent has one); and 3) at a minimum, a 40-hour program of clinical education in the area of practice for which Respondent was alleged to be deficient and that takes into account data obtained from the assessment, administrative decisions and accusations, and any other information that the Board deems relevant. Respondent shall pay all expenses associated with the clinical training program.

Based on Respondent's performance and test results in the assessment and clinical education, the program will advise the Board of its recommendations for the scope and length of any additional education or clinical training or anything else affecting Respondent's practice of dentistry.

At the completion of any additional education or training, Respondent shall submit to and pass an examination. The program's determination as to whether or not Respondent passed the examination or successfully completed the program shall be binding.

Respondent shall complete the program no later than six (6) months after Respondent's initial enrollment unless the Board agrees in writing to a later time for completion.

Failure to participate in and successfully complete ~~successfully~~ all phases of the clinical training program as outlined above is a violation of probation.

Option #1: Condition Precedent

Respondent shall not practice dentistry until ~~he or she~~ Respondent has successfully completed the program and has been so notified by the Board in writing, except that Respondent may practice in a clinical training program approved by the Board.

Respondent's practice of dentistry shall be restricted to that which is required by the program.

Option #2: Condition Subsequent

If Respondent fails to complete the clinical training program within the designated time period, Respondent shall cease the practice of dentistry within seventy-two (72) hours after being notified by the Board that Respondent failed to successfully complete the program.

RECOMMENDED PENALTIES

Unless otherwise noted, all sections listed in this section B&P refers to the Business and Professions Code.

Section 123-B&P Subversion of Examinations

Maximum Penalty: Revocation or denial of license or ~~Statement of Issues denying~~ denial of admission into examination.

Minimum Penalty: Revocation stayed, five (5) years' probation

- 1. Standard Terms and Conditions (1-134)
- 2. Community Service, 40 hours per year (232)
- 3. Ethics Course (3130)

Section 125.6-B&P Refusal to Treat Patient

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, three (3) years' probation.

- 1. Standard Terms and Conditions (1-134)
- 2. Ethics Course (3130)

Additional ~~T~~erms and Conditions if ~~W~~arranted Based ~~U~~pon Nature and ~~E~~xtent of ~~V~~iolation(s):

- 1. Suspension, 30 days (165)

Section 125.9B&P Failure to Comply with Citation

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, three (3) years' probation

- 1. Standard Terms and Conditions (1-134)
- 2. Suspension, 30 days (~~15~~), as an additional terms and conditions, if warranted (16)

3. Compliance with citation, if applicable

Section 480(a)(1) Conviction of a Crime (Applicants)
Section 1628.5

Maximum Penalty: Denial of license application. License application denial is recommended for criminal convictions involving physical abuse or sexual offenses.

Minimum Penalty: License issued; revoked; revocation stayed, three (3) to five (5) years' probation depending upon the nature of the criminal offense

- 1. Standard Terms and Conditions (1-13 and 14 if BPC section 1673 applies)
- 2. Community Service, 40 hours per year (23)
- 3. Ethics Course (31)

For individuals determined to be substance-abusing, also use the Uniform Standards terms and conditions listed in the document entitled "Uniform Standards Related to Substance-Abusing Licensees with Standard Language for Probationary Orders" as specified in California Code of Regulations, title 16, section 1018.01.

Conviction with sex offender registry, see Section 1687

Section 480(a)(2) Formal Discipline by a Licensing Board for Professional Misconduct

Maximum Penalty: License denial

Minimum Penalty: License issued; revoked; revocation stayed, three (3) to five (5) years' probation, depending upon the nature of the professional misconduct

- 1. Standard Terms and Conditions (1-13 and 14 if BPC section 1673 applies)
- 2. Impose similar any Optional Terms and eConditions similar to those terms and conditions used as indicated by in other licensing board's disciplinary order

Section 498-B&P License Secured by Fraud or Misrepresentation

Maximum Penalty: Revocation, Revocation in all cases in which the licensee Respondent is not qualified for the license.

Minimum Penalty: Revocation stayed, five (5) years' probation

- 1. Standard Terms and Ceonditions (1-134)
- 2. Suspension, 30 days (165)
- 3. Community Service, 40 hours per year (232)
- 4. Ethics Course (3130)

**Section 650-B&P Accepting or Receiving Rebates
Section 1680(g)-B&P**

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, three (3) years' probation

- 1. Standard Terms and Ceonditions (1-134)
- 2. Suspension, 30 days (165)
- 3. Community Service-, 40 hours per year (232)
- 4. Ethics Course (3130)

For more serious cases, the following additional terms and conditions should be imposed:

- 1. Suspension, 30 days (165)

Section 650.2(i)-B&P Patient Referral Service-Failure to Disclose

Maximum Penalty: Revocation of registration of dental service.

Minimum Penalty: Revocation stayed, two (2) years' probation

- 1. Standard Terms and Ceonditions (1-134)
- 2. Community Service-, 40 hours per year (232)
- 3. Ethics Course (3130)

Also see Section 1680(g)

Section 651-B&P False, Misleading, or Deceptive Public Communications

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, two (2) years' probation and correct advertising

- 1. Standard Terms and Conditions (1-134)
- 2. Community Service-, 40 hours per year (232)
- 3. Ethics Course (3130)

See Section 1680(h)-(l)

**Section 654.1-B&P Prohibits Patient Referral of Patients to Laboratories
wWithout Disclosure of Beneficial Interest**

Maximum Penalty: Revocation of registration of dental referral service.

Minimum Penalty: Revocation stayed, two (2) years' probation

- 1. Standard Terms and Conditions (1-134)
- 2. Ethics Course (3130)

**Section 654.2-B&P Prohibits cCharges, bBillings, sSolicitations, or
rReferrals wWithout dDisclosure of bBeneficial iInterest.**

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, two (2) years' probation

- 1. Standard Terms and Conditions (1-134)
- 2. Community Service, -40 hours per year (232)
- 3. Ethics Course (3130)

Section 725-B&P **Repeated Acts of Clearly Excessive Prescribing, Furnishing, Dispensing or Administration of Drugs or Treatment or Administration of Drugs**

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, five (5) years' probation

- 1. Standard Terms and Conditions (1-14)
- 2. Remedial Education, Prescribing Practice Course (176)
- 3. Community Service, -40 hours per year (232)
- 4. Surrender/Partial Surrender of DEA Permit (4309)
- 5. Ethics Course (3130)
- 6. Controlled Substance - Maintenance of Records and Inventories (343)

In more serious cases the following additional terms and conditions should be imposed:

- 1. Suspension, 60 days (165)
- 2. Examination (187)
- 3. Supervised Practice (198)

See Section 1680(p)

Section 726-B&P **Commission of Act of Sexual Abuse or Misconduct With Patient-**

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, five (5) years' probation for consensual sex with one patient

- 1. Standard Terms and Conditions (1-14)
- 2. Ethics Course (3130)
- 3. Professional Boundaries program
- 4. Psychological/iatric Evaluation (24)
- 5. Third-Party Chaperone/Monitor (Chaperone) (2120)
- 6. Suspension, 60 days, as additional terms and conditions, if warranted (16)
- 7. Psychotherapy, as additional terms and conditions, if warranted (25)
- 8. Restricted Practice, as additional terms and conditions, if warranted (20)

See also Sex Offender Registry, Section 1687.

Section 732-B&P Failure to Refund Overpayments to Patients

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, three (3) years' probation

- 1. Standard Terms and Conditions (1-134)
- 2. Restitution (224)
- 3. Ethics Course (3130)

Section 810-B&P Insurance Fraud

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, Five (5) years' probation

- 1. Standard Terms and Conditions (1-143)
- 2. Suspension, 60 days (165)
- 3. Remedial Education, in book keeping (176)
- 4. Restitution (224)
- 5. Community Service-, 50 hours (232)
- 6. Ethics Course (3130)
- 7. Billing Monitor (324)

See Section 1680(a)

Section 822-B&P Psychological or Physical Illness

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, three (3) years' probation, depending on severity.

Psychological Illness:

- 1. Standard Terms and Ceonditions (1-134)

- 2. Psychological Evaluation (243)
- 3. Psychotherapy (254)

Additional terms and conditions if the licensee Respondent is suffering from a serious psychological illness:

- 1. Suspension from practice until determined safe to practice after completing psychological evaluation (243)-
- 2. Supervised pPractice (198)
- 3. Solo pPractice (332)

Physical Illness:

- 1. Standard Terms and Ceonditions (1-134)
- 2. Physical eEvaluation (265)
- 3. Solo pPractice (332)

Additional terms and conditions if the licensee Respondent is suffering from a serious physical illness:

- 1. Suspension from practice until determined safe to practice after completing physical evaluation (265)
- 2. Supervised pPractice (198)
- 3. Solo pPractice (332)

Section 1611.5-B&P Inspection of Books, Records, and Premises

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, three (3) years' probation

- 1. Standard Terms and Conditions (1-134)
- 2. Ethics Course (3130)

Sections 1638.1(j) Violation of Elective Facial Cosmetic Surgery (EFCS) Requirements

Maximum Penalty: Revocation of license/permit and/or denial of permit

Minimum Penalty: Revocation stayed, five (5) years' probation

1. Standard Terms and Conditions (1-13)
2. Suspension, 30 days if practicing without ever having been issued a permit (16)
3. Ethics Course (31)

Section 1638.5 Oral and Maxillofacial Surgery (OMS) Permit - Failure to Possess Current Valid License to Practice Medicine

Minimum Penalty: Automatic suspension during any time in which the OMS permit holder does not possess a current valid license to practice medicine in California.

5*****
**

Sections 1645, 1680(n) B&P Continuing Education Violations

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, three (3) years' probation, 30 days actual suspension until compliance with BPC section 1645 is obtained, and compliance within one (1) year

1. Standard Terms and Conditions (1-143)
2. Community sService, 40 hours per year (232)
3. Ethics Course (3130)

For More Serious Cases, the Following Additional terms and Conditions Should be Imposed:

14. Suspension, 30 days (165)

Section 1680(n)

Sections 1646.1, 1646.7 B&P Administration of General Anesthesia (GA) Without a Permit/Failure to Renew a Permit

Maximum Penalty: Revocation of Licensure license and/or Denial of Ppermit

Minimum Penalty: Revocation stayed, five (5) years' probation

1. Standard Terms and Conditions (1-134)

- 2. Suspension, 30 days ~~(15)~~ if practicing without ever having been issued a permit (16).
- 3. Ethics Course (31)

Sections 1646.1(b), 1646.7 Administration of General Anesthesia to Patient Under 7 Years of Age Without a Pediatric Endorsement/Failure to Possess a Pediatric Endorsement

Maximum Penalty: Revocation of license and or general anesthesia permit and/or denial of pediatric endorsement

Minimum Penalty: Revocation stayed, five (5) years' probation

- 1. Standard Terms and Conditions (1-13)
- 2. Suspension, 30 days if practicing without ever having been issued a permit (16)
- 3. Ethics Course (31)

Sections 1646.1(d), 1646.7 Violation of Requirements for Administration of General Anesthesia or Deep Sedation to Patients Under 13 Years of Age

Maximum Penalty: Revocation of license, general anesthesia permit, and/or pediatric endorsement

Minimum Penalty: Revocation stayed, five (5) years' probation

- 1. Standard Terms and Conditions (1-13)
- 2. Suspension, [30] days (16)
- 3. Remedial Education (17)
- 4. Supervised Practice (19)
- 5. Restricted Practice (20)
- 6. Ethics Course (31)

See also Section 1682 for additional grounds for discipline and corresponding penalties.

Sections 1647.2, 1647.9 ~~B&P~~ Administration of ~~Conscious~~Moderate Sedation Without a Permit/Failure to Renew a Permit

Maximum Penalty: Revocation of License/revocation of license and/or Denial of Permit

Minimum Penalty: Revocation stayed, five (5) years' probation

1. Standard Terms and Conditions (1-13)
2. Suspension, 30 days (15) if practicing without ever having been issued a permit (16).
3. Ethics Course (31)

Sections 1647.2(b), 1647.9 Administration of Moderate Sedation to a Patient Under 13 Years of Age Without a Pediatric Endorsement/Failure to Renew a Pediatric Endorsement

Maximum Penalty: Revocation of license and/or general anesthesia, and/or moderate sedation permit (as applicable) and/or denial of pediatric endorsement

Minimum Penalty: Revocation stayed, five (5) years' probation

1. Standard Terms and Conditions (1-13)
2. Suspension, 30 days if practicing without ever having been issued a pediatric endorsement (16)
3. Ethics Course (31)

Sections 1647.2(c), 1646.9 Violation of Requirements for Administration of Moderate Sedation to Patients Under 13 Years of Age

Maximum Penalty: Revocation of license, general anesthesia and/or moderate sedation permit (as applicable), and/or pediatric endorsement

Minimum Penalty: Revocation stayed, five (5) years' probation

1. Standard Terms and Conditions (1-13)

- 2. Suspension, [30] days (16)
- 3. Remedial Education (17)
- 4. Supervised Practice (19)
- 5. Restricted Practice (20)
- 6. Ethics Course (31)

See also Section 1682 for additional grounds for discipline and corresponding penalties.

~~**Sections 1647.11, 1647.17 B&P Administration of Oral Conscious Sedation Without a pPermit – Minors**~~

~~Maximum Penalty: Revocation of Licensure license and/or Ddenial of Ppermit~~

~~Minimum Penalty: Revocation stayed, five (5) years' probation~~

- ~~1. Standard Terms and Conditions (1-134)~~
- ~~2. Suspension, 30 days (15) if practicing without ever having been issued a permit (16).~~
- ~~3. Ethics Course (3130)~~

~~**Sections 1647.19, 1647.25 B&P Administration of Oral Conscious Sedation Without a pPermit -Adults**~~

~~Maximum Penalty: Revocation of Licensure license and/or Ddenial of Permit~~

~~Minimum Penalty: Revocation stayed, five (5) years' probation~~

- ~~1. Standard Terms and Conditions (1-134)~~
- ~~2. Suspension, 30 days (15) if practicing without ever having been issued a permit (16).~~
- ~~3. Ethics Course (3130)~~

~~**Sections 1647.31, 1647.34 Administration of Pediatric Minimal Sedation Without a Permit and/or Pediatric Endorsement**~~

~~Maximum Penalty: Revocation of license and/or general anesthesia and deep sedation permit and/or moderate sedation permit, and/or the pediatric~~

endorsement for the moderate sedation permit, and/or denial of pediatric minimal sedation permit

Minimum Penalty: Revocation stayed, five (5) years' probation

- 1. Standard Terms and Conditions (1-13)
- 2. Suspension, 30 days if practicing without ever having been issued a permit (16)
- 3. Ethics Course (31)

Sections 1647.31(b), (c), 1647.34 Violation of Requirements for Administration of Pediatric Minimal Sedation

Maximum Penalty: Revocation of license, general anesthesia and deep sedation permit, and/or moderate sedation permit (as applicable), and/or the pediatric endorsement for the moderate sedation permit, and/or pediatric minimal sedation permit

Minimum Penalty: Revocation stayed, five (5) years' probation

- 1. Standard Terms and Conditions (1-13)
- 2. Suspension, [30] days (16)
- 3. Remedial Education (17)
- 4. Supervised Practice (19)
- 5. Restricted Practice (20)
- 6. Ethics Course (31)

Section 1658.6 Failure to Comply with Additional Office Requirements

Maximum Penalty: Revocation of permit

Minimum Penalty: Revocation stayed, five (3) years' probation

- 1. Standard Terms and Conditions (1-13)
- 2. Remedial Education (17)
- 3. Ethics Course (31)

Section 1670-B&P Gross Negligence, Incompetence, Repeated Acts of Negligence

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, three (3) to five (5) years' probation depending on nature and extent of the violation

- 1. Standard Terms and Conditions (1-13)
- 2. Remedial Education (176)
- 3. Supervised Practice (198)
- 4. Community Service, 40 hours per year (22), as an additional terms and conditions, if warranted (23)

Additional terms and conditions, if warranted based on nature and extent of violation(s):

- 1. Suspension (165)
- 2. Examination (187)
- 3. Restricted pPractice (4209)
- 4. Solo pPractice (332)
- 5. Clinical tTraining pProgram (354)

Section 1670.1-B&P Conviction of a Crime (Licensees)
Section 490

Maximum Penalty: Revocation. Revocation is recommended for criminal convictions involving physical abuse or sexual offenses.

Minimum Penalty: Revocation stayed, three (3) to five (5) years' probation depending upon the nature of the criminal offense

- 1. Standard Terms and Conditions (1-143) and 14 if BPC section 1673 applies)
- 2. Suspension, 30 days (15)-depending on the nature of the criminal offense (16)
- 3. Community Service-, 40 hours per year (232)
- 4. Ethics Course (3130)

For individuals determined to be substance-abusing, also use the Uniform Standards terms and conditions listed in the document entitled "Uniform Standards Related to Substance-Abusing Licensees with Standard Language for Probationary Orders" as specified in California Code of Regulations, title 16, section 1018.01.

Conviction with sex offender registry, see Section 1687

Section 1671-B&P Violation of Probation

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed and extension of probationary period ~~extended probation~~ depending upon the nature of the violation

The maximum penalty should be given for repeated similar offenses.

**Sections 1670 and 1680 Unprofessional Conduct – Failure to Provide
Records to Board
CCR Section 1018.05(a)**

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, two (2) years' probation

1. Standard Terms and Conditions (1-13)
2. Remedial Education (17)
3. Community Service-, 50 hours (23)
4. Ethics Course (31)

**Section s 1670 and 1680 Unprofessional Conduct – Failure to Report
CCR Section 1018.05(b)**

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, two (2) years' probation

1. Standard Terms and Conditions (1-13)
2. Remedial Education (17)
3. Community Service-, 50 hours (23)
4. Ethics Course (31)

**Section s 1670 and 1680 Unprofessional Conduct – Failure to Provide
Records to Patient
Health and Safety Code Section 123110(h)**

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, two (2) years' probation

1. Standard Terms and Conditions (1-13)
2. Suspension, 60 days (16)
3. Community Service-, 50 hours (23)
4. Ethics Course (31)

**Section ~~1680(a) B&P~~ or ~~Section 810 B&P~~ Obtaining Any Fee by Fraud or Misrepresentation
Insurance Fraud**

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, five (5) years' probation

1. Standard Terms and Conditions (1-143)
2. Suspension, 60 days (165)
3. Remedial Education (176)
4. Restitution (224)
5. Community Service-, 50 hours (232)
6. Ethics Course (3130)
7. Billing Monitor (3234)

**Section ~~1680(b) B&P~~ Employment of Any Student or Suspended or
Unlicensed Dentist**

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, three (3) years' probation

1. Standard Terms and Conditions (1-134)
2. Suspension, 60 days (15), as an additional terms and conditions, if warranted (16)

- 3. Community Service-, 40 hours (~~222~~)
- 4. Ethics Course (~~3130~~)

Section 1680(c)-B&P Aiding or Abetting Unlicensed Practice

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, three (3) years' probation

- 1. Standard Terms and Conditions (1-134)
- 2. Suspension, 60 days (~~15~~), as an additional terms and conditions, if warranted (14)
- 3. Community Service-, 50 hours per year (~~232~~)
- 4. Ethics Course (~~3130~~)

**Section 1680(d)-B&P Aiding or Abetting Licensed Person to Practice
Dentistry Unlawfully**

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, three (3) years' probation

- 1. Standard Terms and Conditions (1-134)
- 2. Suspension, 60 days (~~15~~), as an additional terms and conditions, if warranted (16)
- 3. Remedial Education (~~176~~)
- 4. Restitution (~~224~~)
- 5. Community Service-, 40 hours per year (~~232~~)
- 6. Ethics Course (~~3130~~)

Section 1680(e)-B&P Sexual Abuse, Misconduct, or Relations with a Patient

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, Five (5) years' probation

- 1. Standard Terms and Conditions (1-14)
- 2. Suspension, 60 days (~~165~~)
- 3. Remedial Education (~~176~~)

- 4. Supervised Practice (198)
- 5. Third-Party ~~Chaperone~~ Monitor (Chaperone) (2120)
- 6. Community Service, 50 hours per year (232)
- 7. Psychological Evaluation (243)
- 8. Psychotherapy (254)
- 9. Ethics Course (3130)
- 10. Solo Practice (332)

Sex offender registry, see Section 1687.

Section 1680(f) ~~B&P~~ Use of False or Fictitious Name

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, two (2) years' probation

- 1. Standard Terms and Conditions (1-134)
- 2. Suspension, 30 day ~~(15)-~~suspension where the use of the name involved substantial deception of the public related to the practice of dentistry (16).
- 3. Ethics Course (3130)

Section 1680(g) Accepting or Receiving Commission or Rebates

Section 650 ~~B&P~~

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, three (3) years' probation

- 1. Standard Terms and Conditions (1-13)
- 2. Community Service, 40 hours per year (23)
- 3. Ethics Course (31)

Section 1680(h) ~~B&P~~ Use of Deceptive or Misleading Advertising Statements

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, three (3) years' probation and correct advertising

- 1. Standard Terms and Conditions (1-134)
- 2. Community Service-, 40 hours per year_(232)
- 3. Ethics Course (3130)

Section 1680(i) ~~B&P~~ Advertising of Professional Superiority

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, three (3) years' probation and correct advertising

- 1. Standard Terms and Conditions (1-134)
- 2. Community Service-, 40 hours per year (232)
- 3. Ethics Course (3130)

Section 1680(j) ~~B&P~~ Employing or Making uUse of Solicitors

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, three (3) years' probation

- 1. Standard Terms and Conditions (1-134)
- 2. Community Service-, 40 hours per year (232)
- 3. Ethics Course (3130)

Section 1680(k) ~~B&P~~ Any Advertising that Violates Section 651 of the Business and Professions Code

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, two (2) years' probation and correct advertising

Please ~~s~~See Section 651 ~~B&P~~ for proposed penalty.

Section 1680(l)-B&P Advertising to Guarantee Any Dental Service or to Perform Dental Operations Painlessly

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, two (2) years' probation and correct advertising as appropriate

- 1. Standard Terms and Conditions (1-134)
- 2. Community Service-, 50 hours per year (232)
- 3. Ethics Course (3130)

Section 1680(m)-B&P Violation of any Law Regulating the Dispensing or Administration of Dangerous Drugs or Controlled Substances

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, three (3) years' probation

- 1. Standard Terms and Conditions (1-143 and 14 if BPC section 1673 applies)
- 2. Suspension-, 60 days (~~15~~), as additional terms and conditions, if warranted (16)
- 3. Remedial Education (176)
- 4. Supervised ~~environment~~Practice (198)
- 5. Ethics Course (3130)
- 6. Controlled Substances - Maintenance of Records and Inventories (343)

Additional terms and conditions:

- 1. Community Service, 40 hours per year (232)
- 2. Diversion Program (276)
- 3. Biological Testing (287)
- 4. Abstain from ~~u~~Use of aAlcohol, ~~e~~Controlled sSubstances, and ~~d~~Dangerous dDrugs (298)
- 5. Surrender/~~p~~Partial sSurrender of DEA ~~p~~Permit (2309)

For individuals determined to be substance-abusing, also use the Uniform Standards terms and conditions listed in the document entitled "Uniform Standards Related to

Substance-Abusing Licensees with Standard Language for Probationary Orders” as specified in California Code of Regulations, title 16, section 1018.01.

Section 1680(o) ~~B&P~~ Permitting any Person to Operate Radiographic eEquipment in Violation of the Law

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, ~~F~~five (5) years’ probation

- 1. Standard Terms and Conditions (1-134)
- 2. Suspension, 60 days (165)
- 3. Community Service-, 40 hours per year (232)
- 4. Ethics Course (3130)

Section 1680(p) ~~B&P~~ Clearly Excessive Prescribing or Administering Drugs or Treatment

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, five (5) years’ probation

- 1. Standard Terms and Conditions (1-14)
- 2. Remedial Education (174)
- 3. Community Service, 40 hours per year (232)
- 4. Surrender/Partial Surrender of DEA Permit (2309)
- 5. Ethics Course (3130)
- 6. Controlled ~~s~~Substance - Maintenance of Records and Inventories (343)

For more serious cases, the following additional terms and conditions should be imposed:

- 1. Suspension, 60 days (163)
- 2. Supervised ~~p~~Practice (198)
- 3. Restitution (224)
- 4. Clinical Training Program (354)

See Section 725.

Section 1680(q)-B&P Use of Threats or Harassment to Dissuade Testimony

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, five (5) years' probation

- 1. Standard Terms and Conditions (1-134)
- 2. Suspension, 60 days (165)
- 3. Community Service, 40 hours per year (232)
- 4. Ethics Course (3130)

Section 1680(r)-B&P Suspension or Revocation by Another State

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, five (5) years' probation

- 1. Standard Terms and Conditions (1-134)
- 2. Impose similar conditions as indicated by other state-
- 3. Ethics Course (3130)

For individuals determined to be substance-abusing, also use the Uniform Standards terms and conditions listed in the document entitled "Uniform Standards Related to Substance-Abusing Licensees with Standard Language for Probationary Orders" as specified in California Code of Regulations, title 16, section 1018.01.

Section 1680(s)-B&P Alteration of Patient Records

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, five (5) years' probation, correction of condition

- 1. Standard Terms and Conditions (1-134)
- 2. Remedial Education (176)
- 3. Supervised Environment Practice (198)
- 4. Community Service, 40 hours per year (232)
- 5. Ethics Course (3130)

For more serious violations, the following additional terms and conditions should be imposed:

Suspension, 60 days (165)

Section 1680(t) Unsanitary Conditions

Maximum Penalty: Revocation

Minimum Penalty: Revocation, stayed three (3) years' probation

- 1. Standard Terms and Conditions (1-134)
- 2. Remedial Education (176)

If violation does not warrant a ~~3~~-three-year probationary period, consideration should be given to a lesser probationary period with a requirement to take a course in infection control approved by the Board.

In more serious cases:

Suspension, 30 days (165)

Section 1680(u)-~~B&P~~ Abandonment of Patient

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, five (5) years' probation

- 1. Standard Terms and Conditions (1-134)
- 2. Community Service, 40 hours per year (232)
- 3. Ethics Course (3130)

For those more serious violations, the following condition should be imposed:

Suspension, 30 days (165)

Section 1680(v)-~~B&P~~ Misrepresenting the Facts Regarding Disciplinary Action

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, three (3) years' probation.

- 1. Standard Terms and Conditions (1-134)
- 2. Ethics Course (3130)

Section 1680(w)-B&P Fraud in the Procurement of Any License

Maximum Penalty: Revocation. Revocation in all cases in which Respondentthe licensee is not qualified for the license.

Minimum Penalty: Revocation, five (5) years' probation

- 1. Standard Terms and Conditions (1-143)
- 2. Suspension, 30 days (165)
- 3. Community Service, 40 hours per year (232)
- 4. Ethics Course (3130)

Section 1680(x)-B&P Actions that would Warrant Denial of a License

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, five (5) years' probation

- 1. Standard Terms and Conditions (1-134); and

Any other conditions as appropriate and consistent with these guidelines based on the particular action.

Section 1680(y)-B&P Aiding or Abetting Negligent or Incompetent Practice

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, five (5) years' probation

- 1. Standard Terms and Conditions (1-134)
- 2. Suspension, 30 days (165)

- 3. Remedial Education (176)
- 4. Examination ~~(17)~~ if appropriate (18)
- 5. Supervised ~~Environment~~ Practice (198)
- 6. Restricted ~~p~~ Practice (209)
- 7. Ethics Course (3130)

Section 1680(z) B&P Failure to Report Patient Death or Hospitalization

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, five (5) years' probation

- 1. Standard Terms and Conditions (1-134)
- 2. Ethics Course (3130)

For more serious cases, the following additional terms and conditions should be imposed:

- ~~1.~~ Suspension, 30 days (165)

Section 1680(aa) B&P Participating In or Operating Any Group Advertising or Referral Services that is not Registered by the Board
Section 650.2

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, two (2) years' probation

- 1. Standard Terms and Conditions (1-134)
- 2. Suspension, six (6) months' suspension from advertising through referral services
- 3. Community Service, 40 hours per year (232)
- 4. Ethics Course (3130)

~~(Section 650.2 B&P)~~

Section 1680(ab) B&P Failure to uUse a Fail-Safe Machine

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, three (3) years' probation

- 1. Standard Terms and Conditions (1-134)
- 2. Proof of Correction Through Obtaining and Using Correct Machine
- 3. Remedial Education (176)

Section 1680(ac) Engaging in Practice of Dentistry with an Expired License

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, two (2) years' probation

- 1. Standard Terms and Conditions (1-134)
- 2. Suspension, 30 days (~~15~~), as an additional terms and conditions, if warranted (16)
- 3. Ethics (3130)

Section 1680(ad) ~~Unsafe and Sanitary Conditions~~Failure to Follow Infection Control Guidelines

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, three (3) years' probation

- 1. Standard Terms and Conditions (1-134)
- 2. Suspension, 30 days (165)
- 3. Remedial Education- in infection control (176)
- 4. Proof of correction of the condition

If violation is not severe enough to warrant a ~~3~~three-year probationary term, consideration should be given to a lesser probationary period with a requirement to take a course in infection control approved by the Board.

Section 1680(ae) ~~The Use of Dental Auxiliaries Beyond the Scope of the License~~

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, three (3) years' probation

1. Standard Terms and Conditions (1-134)
2. Suspension, -60 days (15), as an additional terms and conditions, if warranted (16)
3. Remedial Education -in scope of practice for dental auxiliaries (176)
4. Proof of correction of the condition

If violation is not severe enough to warrant a ~~3~~three-year probationary term, consideration should be given to a lesser probationary period with a requirement to take a course in the scope of practice of a dental auxiliary approved by the Board.

**Section 1680(af) Prescribing, Dispensing, or Furnishing Dangerous
Drugs or Devices Through the Internet Without
Examination and Medical Indication**

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, five (5) years' probation

1. Standard Terms and Conditions (1-13 and 14 if BPC section 1673 applies)
2. Remedial Education, Prescribing Practice Course (17)
3. Community Service, 40 hours per year (23)
4. Surrender/Partial Surrender of DEA Permit (30)
5. Ethics Course (31)

Section 1680(ag) Use of Non-Sterile Irrigation on Exposed Dental Pulp

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, three (3) years' probation

1. Standard Terms and Conditions (1-13)
2. Suspension, 30 days (16)
3. Remedial Education in infection control (17)
4. Proof of correction of the condition. **Proof of correction of the condition shall include the following:**

(a) Submit to inspection of new or repaired equipment, as applicable, upon demand by the Board or its designee at the Board's offices.

(b) Photographs or receipts showing repairs or improvements made to the equipment related to the violation.

(c) The provision of copies of office policies updated to include procedures for avoiding relapse or recurrence of the violation, and.

(d) Documentation that training directly related to the violation was provided to the staff (certificate or declaration of completion from the training provider and description of the type of training provided).

If violation is not severe enough to warrant a three-year probationary term based on the facts of the specific case, consideration should be given to a lesser penalty with a requirement to take a course in infection control approved by the Board pursuant to CCR section 1070.6.

.....
Section 1680(ah) Failure to Perform Examination

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, three (3) years' probation

- 1. Standard Terms and Conditions (1-13)
- 2. Remedial Education (17)
- 3. Community Service, 40 hours per year (23)
- 4. Ethics Course (31)

.....
Section 1681(a)-B&P Unlawfully Obtain or Possess Substance Abuse, Possession or Control, Alcohol Abuse, or Conviction related to Controlled Substances or Dangerous Drug

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, five (5) years' probation

- 1. Standard Terms and Conditions (1-143 and 14 if BPC section 1673 applies)
- 2. Supervised Practice (198)

3. Abstain from uUse of aAlcohol, Controlled sSubstances, and dDangerous dDrugs (298)
4. Surrender/Partial sSurrender of DEA pPermit (2309)
5. Ethics Course (3130)
6. Controlled Substance - Maintenance of Records and Inventories (343)

Optional Conditions Where Appropriate:

1. Psychological Evaluation (243)
2. Psychotherapy (254)
3. Diversion Program (276)
4. Biological Fluid-Testing (287)

For individuals determined to be substance-abusing, also use the Uniform Standards terms and conditions listed in the document entitled "Uniform Standards Related to Substance-Abusing Licensees with Standard Language for Probationary Orders" as specified in California Code of Regulations, title 16, section 1018.01.

Section 1681-(b)-B&P Use of dDrugs/aAlcohol eCausing dDanger to pPatient

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, seven (7) years' probation

1. Standard Terms and Conditions (1-14 3 and 14 if BPC section 1673 applies)
2. Suspension, 60 days (165)
3. Supervised Practice (198)
4. Psychological Evaluation (243)
5. Psychotherapy (254)
6. Diversion Program (276)
7. Biological Fluid-Testing (287)
8. Abstain from Use of Alcohol, Controlled Substances, and Dangerous Drugs (298)
9. Surrender/Partial Surrender of DEA pPermit (2309)
10. Ethics Course (3130)
11. Controlled Substance - Maintenance of Records and Inventories (343)
12. Disclosure of Probation Status to Patients – shall be included if drug or alcohol abuse directly resulted in harm to patients or the extent that such use impaired the ability of Respondent to practice safely (14)

For individuals determined to be substance-abusing, also use the Uniform Standards terms and conditions listed in the document entitled "Uniform Standards Related to Substance-Abusing Licensees with Standard Language for Probationary Orders" as specified in California Code of Regulations, title 16, section 1018.01.

Section 1681-(c) ~~B&P~~ Drug or Alcohol Criminal Conviction of violating state drug statutes

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, five (5) years' probation

1. Standard Terms and Conditions (1-143 and 14 if BPC section 1673 applies)
2. Suspension, 60 days (165)
3. Supervised Practice (198)
4. Psychological Evaluation (243)
5. Psychotherapy (254)
6. Diversion Program (276)
7. Biological Testing (287)
8. Abstain from ~~u~~Use of Alcohol, Controlled Substances, and Dangerous Drugs (298)
9. Surrender/Partial Surrender of DEA ~~p~~Permit (2309)
10. Ethics Course (3130)
11. Controlled Substance ~~-~~ Maintenance of Records and Inventories (343)

For individuals determined to be substance-abusing, also use the Uniform Standards terms and conditions listed in the document entitled "Uniform Standards Related to Substance-Abusing Licensees with Standard Language for Probationary Orders" as specified in California Code of Regulations, title 16, section 1018.01.

Section 1682 ~~B&P~~ Violation of Requirements re Patients Undergoing Conscious Sedation or General Anesthesia

Maximum Penalty: Revocation of ~~licensure~~license, and/or Ppermit, and/or pediatric endorsement

Minimum Penalty: Revocation stayed, five (5) years' probation

1. Standard Terms and Conditions (1-134)
2. Remedial Education (176)
3. Examination (187)
4. Supervised Practice (198)
5. Restricted Practice (4209)
6. Ethics Course (3130)

See Sections 1647-B&P 1646.1(d), 1646.7 (general anesthesia and deep sedation); 1647.2(c), 1646.7 (moderate sedation)

Section 1683-B&P Treatment Entries in Patient Records

Maximum Penalty: Revocation of ~~license~~ license and/or Ppermit

Minimum Penalty: Revocation stayed, three (3) years' probation

1. Standard Terms and Conditions (1-135)
2. Remedial Education (176)

If violation is not severe enough to warrant a ~~3~~ three-year probation, consideration should be given to a lesser probationary period or public reprimand with a requirement to take a course approved by the Board in how to maintain patient records.

Section 1683.1 Telehealth Information Disclosure

Maximum Penalty: Revocation of license and/or permit

Minimum Penalty: Revocation stayed, three (3) years' probation

1. Standard Terms and Conditions (1-13)
2. Ethics Course (31)

Section 1683.2 Agreement Limiting Patient Ability to File Board Complaint

Maximum Penalty: Revocation of license and/or permit

Minimum Penalty: Revocation stayed, three (3) years' probation

- 1. Standard Terms and Conditions (1-13)
- 2. Ethics Course (31)

Section 1684-B&P Service Beyond the Scope of License

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, three (3) years' probation

- 1. Standard Terms and Conditions (1-134)
- 2. Community Service, 40 hours per year (232)
- 3. Ethics Course (3130)

Options and additions where appropriateAdditional terms and conditions, if warranted based upon nature and extent of violation(s):

- 1. Suspension (165)
- 2. Remedial Education (176)
- 3. Examination (187)
- 4. Supervised Practice (198)
- 5. Restricted Practice (4209)
- 6. Restitution (224)
- 7. Clinical Training Program (354)

Section 1684.1 Refusal to Release Patient Dental Records to Board

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, three (3) years' probation

- 1. Standard Terms and Conditions (1-13, 15)
- 2. Remedial Education (17)
- 3. Ethics Course (31)

Section 1685-B&P Permitting Dental Care that Discourages Necessary or Encourages Excessive or Improper Treatment

Maximum Penalty: Revocation

Minimum Penalty: Revocation stayed, five (5) years' probation

- 1. Standard Terms and Conditions (1-134)
- 2. Ethics Course (31~~30~~)

~~Options and additions where appropriate~~Additional terms and conditions, if warranted based upon nature and extent of violation(s):

- 1. Suspension, 30 days (16~~5~~)
- 2. Remedial Education (17~~6~~)
- 3. Examination (18~~7~~)
- 4. Restitution (22~~1~~)
- 5. Clinical Training Program (35~~4~~)

Section 1687 Registered Sex Offender

Maximum and Minimum Penalty: Revocation or denial of license



MEMORANDUM

DATE	January 22, 2024
TO	Members of the Dental Board of California
FROM	David Bruggeman, Legislative and Regulatory Specialist Dental Board of California
SUBJECT	Agenda Item 15.a.: 2024 Tentative Legislative Calendar – Information Only

Background

The Tentative 2024 Legislative Calendars for the Senate and the Assembly are attached.

Action Requested

No Board action is requested for this item.

2024 TENTATIVE LEGISLATIVE CALENDAR

COMPILED BY THE OFFICE OF THE SECRETARY OF THE SENATE AND THE OFFICE OF THE ASSEMBLY CHIEF CLERK
Revised 11/4/22

DEADLINES

JANUARY						
S	M	T	W	TH	F	S
	<u>1</u>	2	<u>3</u>	4	5	6
7	8	9	<u>10</u>	11	<u>12</u>	13
14	<u>15</u>	16	17	18	<u>19</u>	20
21	22	23	24	25	26	27
28	29	30	<u>31</u>			

- [Jan. 1](#) Statutes take effect (Art. IV, Sec. 8(c)).
- [Jan. 3](#) **Legislature Reconvenes** (J.R. 51(a)(4)).
- [Jan. 10](#) Budget must be submitted by Governor (Art. IV, Sec. 12(a)).
- [Jan. 12](#) Last day for **policy committees** to hear and report to **fiscal committees** fiscal bills introduced in their house in the **odd-numbered year** (J.R. 61(b)(1)).
- [Jan. 15](#) Martin Luther King, Jr. Day.
- [Jan. 19](#) Last day for any committee to hear and report to the **floor** bills introduced in that house in the odd-numbered year (J.R. 61(b)(2)).

Last day to **submit bill requests** to the Office of Legislative Counsel.
- [Jan. 31](#) Last day for each house to **pass bills introduced** in that house in the odd-numbered year (J.R. 61(b)(3), (Art. IV, Sec. 10(c)).

FEBRUARY						
S	M	T	W	TH	F	S
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	<u>16</u>	17
18	<u>19</u>	20	21	22	23	24
25	26	27	28	29		

- [Feb. 16](#) Last day for bills to be **introduced** (J.R. 61(b)(4), (J.R. 54(a)).
- [Feb. 19](#) Presidents' Day.

MARCH						
S	M	T	W	TH	F	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	<u>21</u>	22	23
24	25	26	27	28	<u>29</u>	30
31						

- [Mar. 21](#) **Spring Recess** begins upon adjournment of this day's session (J.R. 51(b)(1)).
- [Mar. 29](#) Cesar Chavez Day observed.

APRIL						
S	M	T	W	TH	F	S
	<u>1</u>	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	<u>26</u>	27
28	29	30				

- [Apr. 1](#) Legislature Reconvenes from **Spring Recess** (J.R. 51(b)(1)).
- [Apr. 26](#) Last day for **policy committees** to hear and report to **fiscal committees** fiscal bills introduced in their house (J.R. 61(b)(5)).

MAY						
S	M	T	W	TH	F	S
			1	2	<u>3</u>	4
5	6	7	8	9	<u>10</u>	11
12	13	14	15	16	<u>17</u>	18
19	<u>20</u>	21	22	23	<u>24</u>	25
26	<u>27</u>	<u>28</u>	29	30	31	

- [May 3](#) Last day for **policy committees** to hear and report to the floor **non-fiscal** bills introduced in their house (J.R. 61(b)(6)).
- [May 10](#) Last day for **policy committees** to meet prior to May 28 (J.R. 61(b)(7)).
- [May 17](#) Last day for **fiscal committees** to hear and report to the floor bills introduced in their house (J.R. 61(b)(8)).

Last day for **fiscal committees** to meet prior to May 28 (J.R. 61(b)(9)).
- [May 20- 24](#) **Floor Session only.** No committees, other than conference or Rules committees, may meet for any purpose (J.R. 61 (b)(10)).
- [May 24](#) Last day for each house to pass bills introduced in that house (J.R. 61(b)(11)).
- [May 27](#) Memorial Day.
- [May 28](#) Committee meetings may resume (J.R. 61(b)(12)).

*Holiday schedule subject to Senate Rules committee approval

2024 TENTATIVE LEGISLATIVE CALENDAR

COMPILED BY THE OFFICE OF THE SECRETARY OF THE SENATE AND THE OFFICE OF THE ASSEMBLY CHIEF CLERK
Revised 11/4/22

JUNE						
S	M	T	W	TH	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	<u>15</u>
16	17	18	19	20	21	22
23	24	25	26	<u>27</u>	28	29
30						

[June 15](#) Budget Bill must be passed by **midnight** (Art. IV, Sec. 12(c)(3)).

[June 27](#) Last day for a legislative measure to qualify for the Nov. 5 General Election ballot (Elections Code Sec. 9040).

JULY						
S	M	T	W	TH	F	S
	1	2	<u>3</u>	<u>4</u>	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

[July 3](#) Last day for **policy committees** to meet and report bills (J.R. 61(b)(13)).

Summer Recess begins upon adjournment provided Budget Bill has been passed (J.R. 51(b)(2)).

[July 4](#) Independence Day.

AUGUST						
S	M	T	W	TH	F	S
				1	2	3
4	<u>5</u>	6	7	8	9	10
11	12	13	14	15	<u>16</u>	17
18	<u>19</u>	20	21	22	<u>23</u>	24
25	26	27	28	29	30	<u>31</u>

[Aug. 5](#) Legislature Reconvenes from **Summer Recess** (J.R. 51(b)(2)).

[Aug. 16](#) Last day for **fiscal committees** to meet and report bills (J.R. 61(b)(14)).

[Aug. 19-31](#) **Floor Session only.** No committees, other than conference and Rules committees, may meet for any purpose (J.R. 61(b)(15)).

[Aug. 23](#) Last day to **amend** on the floor (J.R. 61(b)(16)).

[Aug. 31](#) Last day for **each house to pass bills.** (Art. IV, Sec. 10(c), (J.R. 61(b)(17)).

Final Recess begins upon adjournment (J.R. 51(b)(3)).

*Holiday schedule subject to Senate Rules committee approval

IMPORTANT DATES OCCURRING DURING FINAL STUDY RECESS

2024

[Sept. 30](#) Last day for Governor to sign or veto bills passed by the Legislature before Sept. 1 and in the Governor’s possession on or after Sept. 1 (Art. IV, Sec. 10(b)(2)).

[Nov. 5](#) General Election

[Nov. 30](#) Adjournment *Sine Die* at midnight (Art. IV, Sec. 3(a)).

[Dec. 2](#) 12 Noon convening of the 2025-26 Regular Session (Art. IV, Sec. 3(a)).

2025

[Jan. 1](#) Statutes take effect (Art. IV, Sec. 8(c)).

2024 TENTATIVE LEGISLATIVE CALENDAR

COMPILED BY THE OFFICE OF THE ASSEMBLY CHIEF CLERK AND THE OFFICE OF THE SECRETARY OF THE SENATE
Revised 11-1-22

DEADLINES

- Jan. 1** Statutes take effect (Art. IV, Sec. 8(c)).
- Jan. 3** Legislature reconvenes (J.R. 51(a)(4)).
- Jan. 10** Budget must be submitted by Governor (Art. IV, Sec. 12(a)).
- Jan. 12** Last day for **policy committees** to hear and report to **fiscal committees** fiscal bills introduced in their house in the odd-numbered year (J.R. 61(b)(1)).
- Jan. 15** Martin Luther King, Jr. Day.
- Jan. 19** Last day for any committee to hear and report to the **Floor** bills introduced in that house in the odd-numbered year. (J.R. 61(b)(2)).
Last day to submit **bill requests** to the Office of Legislative Counsel.
- Jan. 31** Last day for each house to pass bills introduced in that house in the odd-numbered year (J.R. 61(b)(3)) (Art. IV, Sec. 10(c)).

- Feb. 16** Last day for bills to be **introduced** (J.R. 61(b)(4), J.R. 54(a)).
- Feb. 19** Presidents' Day.

- Mar. 21** **Spring Recess** begins upon adjournment (J.R. 51(b)(1)).
- Mar. 29** Cesar Chavez Day observed.

- Apr. 1** Legislature reconvenes from **Spring Recess** (J.R. 51(b)(1)).
- Apr. 26** Last day for **policy committees** to hear and report to fiscal committees **fiscal bills** introduced in their house (J.R. 61(b)(5)).

- May 3** Last day for **policy committees** to hear and report to the Floor **nonfiscal** bills introduced in their house (J.R. 61(b)(6)).
- May 10** Last day for **policy committees** to meet prior to May 28 (J.R. 61(b)(7)).
- May 17** Last day for **fiscal committees** to hear and report to the **Floor** bills introduced in their house (J.R. 61 (b)(8)).
Last day for **fiscal committees** to meet prior to May 28 (J.R. 61 (b)(9)).
- May 20-24** **Floor session only.** No committee may meet for any purpose except for Rules Committee, bills referred pursuant to Assembly Rule 77.2, and Conference Committees (J.R. 61(b)(10)).
- May 24** Last day for each house to pass bills introduced in that house (J.R. 61(b)(11)).
- May 27** Memorial Day.
- May 28** Committee meetings may resume (J.R. 61(b)(12)).

JANUARY							
	S	M	T	W	TH	F	S
Wk. 1		1	2	3	4	5	6
Wk. 2	7	8	9	10	11	12	13
Wk. 3	14	15	16	17	18	19	20
Wk. 4	21	22	23	24	25	26	27
Wk. 1	28	29	30	31			

FEBRUARY							
	S	M	T	W	TH	F	S
Wk. 1					1	2	3
Wk. 2	4	5	6	7	8	9	10
Wk. 3	11	12	13	14	15	16	17
Wk. 4	18	19	20	21	22	23	24
Wk. 1	25	26	27	28	29		

MARCH							
	S	M	T	W	TH	F	S
Wk. 1						1	2
Wk. 2	3	4	5	6	7	8	9
Wk. 3	10	11	12	13	14	15	16
Wk. 4	17	18	19	20	21	22	23
Spring Recess	24	25	26	27	28	29	30
Wk. 1	31						

APRIL							
	S	M	T	W	TH	F	S
Wk. 1		1	2	3	4	5	6
Wk. 2	7	8	9	10	11	12	13
Wk. 3	14	15	16	17	18	19	20
Wk. 4	21	22	23	24	25	26	27
Wk. 1	28	29	30				

MAY							
	S	M	T	W	TH	F	S
Wk. 1				1	2	3	4
Wk. 2	5	6	7	8	9	10	11
Wk. 3	12	13	14	15	16	17	18
No Hrgs.	19	20	21	22	23	24	25
Wk. 4	26	27	28	29	30	31	

*Holiday schedule subject to final approval by Rules Committee.

2024 TENTATIVE LEGISLATIVE CALENDAR

COMPILED BY THE OFFICE OF THE ASSEMBLY CHIEF CLERK AND THE OFFICE OF THE SECRETARY OF THE SENATE
Revised 11-1-22

JUNE							
	S	M	T	W	TH	F	S
Wk. 4							1
Wk. 1	2	3	4	5	6	7	8
Wk. 2	9	10	11	12	13	14	15
Wk. 3	16	17	18	19	20	21	22
Wk. 4	23	24	25	26	27	28	29
Wk. 1	30						

June 15 Budget Bill must be passed by midnight (Art. IV, Sec. 12(c)).

June 27 Last day for a legislative measure to qualify for the Nov. 5 General Election ballot (Elections Code Sec. 9040).

JULY							
	S	M	T	W	TH	F	S
Wk. 1		1	2	3	4	5	6
Summer Recess	7	8	9	10	11	12	13
Summer Recess	14	15	16	17	18	19	20
Summer Recess	21	22	23	24	25	26	27
Summer Recess	28	29	30	31			

July 3 Last day for **policy committees** to meet and report bills (J.R. 61(b)(13)).

Summer Recess begins upon adjournment, provided Budget Bill has been passed (J.R. 51(b)(2)).

July 4 Independence Day.

AUGUST							
	S	M	T	W	TH	F	S
Summer Recess					1	2	3
Wk. 2	4	5	6	7	8	9	10
Wk. 3	11	12	13	14	15	16	17
No Hrgs.	18	19	20	21	22	23	24
No Hrgs.	25	26	27	28	29	30	31

Aug. 5 Legislature reconvenes from **Summer Recess** (J.R. 51(b)(2)).

Aug. 16 Last day for **fiscal committees** to meet and report bills (J.R. 61(b)(14)).

Aug. 19 – 31 Floor session only. No committee may meet for any purpose except Rules Committee, bills referred pursuant to Assembly Rule 77.2, and Conference Committees (J.R. 61(b)(15)).

Aug. 23 Last day to **amend** bills on the Floor (J.R. 61(b)(16)).

Aug. 31 Last day for each house to pass bills (Art. IV, Sec 10(c), J.R. 61(b)(17)).

Final Recess begins upon adjournment (J.R. 51(b)(3)).

IMPORTANT DATES OCCURRING DURING FINAL RECESS

2024

Sept. 30 Last day for Governor to sign or veto bills passed by the Legislature before Sept. 1 and in the Governor's possession on or after Sept. 1 (Art. IV, Sec. 10(b)(2)).

Oct. 2 Bills enacted on or before this date take effect January 1, 2025. (Art. IV, Sec. 8(c)).

Nov. 5 General Election.

Nov. 30 Adjournment *sine die* at midnight (Art. IV, Sec. 3(a)).

Dec. 2 2025-26 Regular Session convenes for Organizational Session at 12 noon. (Art. IV, Sec. 3(a)).

2025

Jan. 1 Statutes take effect (Art. IV, Sec. 8(c)).

*Holiday schedule subject to final approval by Rules Committee.



MEMORANDUM

DATE	January 22, 2024
TO	Members of the Dental Board of California
FROM	David Bruggeman, Legislative and Regulatory Specialist Dental Board of California
SUBJECT	Agenda Item 15.b.: Update Regarding the Board's 2024 Sunset Review Oversight Hearing

Background

Since the Board approved the draft Sunset Review report at the October 12, 2023 meeting, Board staff worked to finalize the report and have it printed. The report was submitted to the Assembly Committee on Business and Professions and the Senate Committee on Business, Professions and Economic Development at the end of December 2023.

The submitted report can be viewed online in the Reports section of the Board's website (<https://dbc.ca.gov/formspubs/reports.shtml>). Volume 1 is the main report, while Volumes 2 and 3 contain the requested attachments listed in Section 12 of the main report.

The Board will go before the Assembly Committee on Business and Professions and the Senate Committee on Business, Professions and Economic Development in the spring. The Board President and Executive Officer will both present testimony and answer questions from the members of the Legislature, and the public will have an opportunity to provide public comment. The public can provide comment during the hearing, and they can also submit their comments in writing through the Position Letter Portal (<https://calegislation.lc.ca.gov/Advocates/faces/index.xhtml>).

In preparation for the hearing, the Committees will prepare a background paper concerning the Board, its operations, and other issues. The Board will prepare a response to that paper. The hearing, the background paper, and the Board's response will inform a "sunset bill" introduced by the Committees. The sunset bill, among other things, sets the next sunset date for the Board (most likely four years after the current sunset date, or January 1, 2029). The Board will submit recommended legislative proposals (discussed and approved at prior meetings) that could be part of this sunset bill.

Action Requested

No Board action is requested.

Agenda Item 15.b.: Update Regarding the Board's 2024 Sunset Review Oversight Hearing
Dental Board of California Meeting
February 9, 2024

Page 1 of 1



MEMORANDUM

DATE	January 22, 2024
TO	Members of the Dental Board of California
FROM	David Bruggeman, Legislative and Regulatory Specialist Dental Board of California
SUBJECT	Agenda Item 15.c.: Legislation of Interest

Background

The Dental Board of California (Board) has been tracking bills that impact the Board, the Department of Consumer Affairs (DCA), healing arts boards and their respective licensees, and all licensing boards. This memorandum includes information regarding each bill's status, location, date of introduction, date of last amendment, and a summary as of the date of this memorandum. The bills are listed in numerical order, with the Assembly Bills (AB XXX) first, followed by the Senate Bills (SB XXX).

The new legislative year began on January 4. As of this writing, Board staff have not identified any bills that may have a direct impact on the Board and would require discussion and possible action at the February meeting. As a result, Board staff will not be briefing on specific bills at this meeting.

As part of the sunset review process, a policy committee or individual member of the California State Legislature will introduce a sunset bill to extend the Board's authority, but that has not happened yet.

The following bills have been identified by staff as being of potential interest to the Board and/or licensees but do not require Board discussion at this time. Staff will continue to watch these bills and report on their progression at a future Board meeting. Information regarding the status, location, date of introduction, date of last amendment, and a summary of each of these bills has been included in this memorandum. Please note staff will not be presenting these bills; should a Board member desire to discuss one of these bills they may present the bill at the meeting and provide arguments for the Board to take a position.

[SB 607](#) (Portantino, 2023) Controlled substances.

[SB 782](#) (Limón, 2023) Gubernatorial appointments: report.

[SB 908](#) (Cortese, 2024) Public records: legislative records: electronic messages.

If you would like additional information on any of these bills, the following websites are resources for viewing proposed legislation and finding additional information:

<https://leginfo.legislature.ca.gov>

<https://assembly.ca.gov>

<https://senate.ca.gov>

Action Requested

If desired, the Board may take one of the following actions regarding a bill:

Support

Support if Amended

Oppose

Oppose unless Amended

Watch

Neutral

No Action

**Legislation Tracked by DBC Staff – 2023-2024 Legislative Session
2024 Legislative Year**

[SB 607](#) (Portantino, 2023) Controlled substances.

Introduced: February 15, 2023

Last Amended: January 4, 2024

Location: Senate Floor

Status: January 17, 2024, ordered to third reading

Summary: The bill was gutted and amended on January 3, 2024, and now would revise the requirements of controlled substance prescribers disclosures to patients.

Existing law, with certain exceptions, before directly dispensing or issuing for a minor patient a first prescription in a single course of treatment for a controlled substance containing an opioid, requires the prescriber to discuss information, as specified, with the minor, the minor's parent, or guardian, or another adult authorized to consent to the minor's treatment. The bill would expand those disclosure requirements to all patients.

Board Impact: None but would be of interest to licensees.

Recommended Board Position: None

[SB 782](#) (Limón, 2023) Gubernatorial appointments: report.

Introduced: February 17, 2023

Last Amended: January 3, 2024

Location: Senate Floor

Status: January 18, 2024, Senate Appropriations Committee passed the bill.

Summary: The bill was gutted and amended on January 3, 2024, and now would add new website posting requirements regarding gubernatorial appointments to state boards and commissions.

The bill would require the Governor's Office to maintain on its website, beginning January 1, 2026, a list of each state board or commission, and details, including membership lists and vacancies, for each board or commission.

The bill also would require, beginning January 1, 2027, and annually thereafter, the Governor's Office to create and publish on its website a report containing aggregate demographic information, as defined, of appointments made by the Office for the previous calendar year.

Board Impact: The Board membership list and vacancies would be published on the Governor's Office website. Board members could voluntarily self-report ethnicity, gender, disability status, region, party affiliation, and veteran status for inclusion in the aggregate demographic information collected by the Governor's Office under the bill.

Recommended Board Position: None

[SB 908](#) (Cortese, 2024) Public records: legislative records: electronic messages.

Introduced: January 8, 2024

Last Amended: N/A

Location: Senate Rules Committee

Status: Pending assignment

Summary: The bill would amend the California Public Records Act and Legislative Open Records Act to prohibit any elected or appointed official, employees of a public agency, Members of the California State Legislature, and employees of the Legislature from creating or sending a public or legislative record using a nonofficial electronic messaging system (e.g., email or text message) unless the official, public employee, legislative member, or legislative employee sends a copy of the public record to an official electronic messaging system, as defined, within 20 days of creation or sending of the public record.

A public record, as defined by Government Code 7920.530, includes “any writing containing information relating to the conduct of the public’s business prepared, owned, used, or retained by any state or local agency regardless of physical form or characteristics.”

Board Impact: The bill would apply to Board members and Board staff.

Recommended Board Position: None



MEMORANDUM

DATE	January 26, 2024
TO	Members of the Dental Board of California
FROM	Mirela Taran, Administrative Analyst Dental Board of California
SUBJECT	Agenda Item 16: Discussion and Possible Action Regarding Appointment of Dental Assisting Council (DAC) Members

Background

Pursuant to Business and Professions Code (BPC) section 1742, the Dental Assisting Council (DAC) considers all matters relating to dental assistants in California and makes appropriate recommendations to the Dental Board of California (Board) and the standing Committees of the Board. The DAC typically meets quarterly in conjunction with Board meetings and at other times as deemed necessary. The DAC is comprised of the Registered Dental Assistant (RDA) member of the Board, another member of the Board, and five RDAs, representing as broad a range of dental assisting experience and education as possible. (BPC, § 1742, subd. (b)(1).)

DAC members are appointed by the Board and serve at the Board's pleasure. Pursuant to BPC section 1742, subdivision (b)(2), the Board shall consider, in its appointments of the five RDA members, recommendations submitted by any incorporated, nonprofit professional society, association, or entity whose membership is comprised of RDAs within the state. Two of those members shall be employed as faculty members of an RDA educational program approved by the Board and shall have been employed for at least the prior five years (faculty members). Three of those members, which shall include one Registered Dental Assistant in Extended Functions (RDAEF), shall be employed clinically in private dental practice or public safety net or dental health care clinics (clinical members). All five of those members shall have possessed a current and active RDA or RDAEF license for at least the prior five years and shall not be employed by a current member of the Board.

In addition, DAC members shall comply with conflict-of-interest requirements that apply to Board members. Such requirements include prohibitions against members making, participating in making, or in any way attempting to use their official position to influence a governmental decision in which they know or have reason to know they have a financial

Agenda Item 16: Discussion and Possible Action Regarding Appointment of Dental Assisting Council (DAC) Members
Dental Board of California Meeting
February 9, 2024

interest. DAC members who have a financial interest shall disqualify themselves from making or attempting to use their official position to influence the decision. (Gov. Code, § 87100; California Code of Regulations (CCR), tit. 2, § 18730.) All DAC members are required to submit Statements of Economic Interests (Form 700) within 30 days of assuming office and annually. (Gov. Code, § 87202; CCR, tit. 2, § 18730.)

DAC Member Resignations – Clinical Members

The following DAC members, one who was appointed as an RDA and the other as an RDAEF, employed clinically in private dental practice or public safety net or dental health care clinics, have submitted their resignation from the DAC:

1. Kandice Rae Pliss, RDA – notified the Board of her resignation in November 2023.
2. Traci Reed-Espinoza, RDAEF – notified the Board of her resignation in January 2024.

DAC Member Recruitment – Clinical Members

Two separate recruitment notices were posted on the Board’s website to fill the DAC’s two open positions for clinical members. The deadline to apply for the RDA vacancy was Monday, January 8, 2024, and the deadline to apply for the RDAEF vacancy was Friday, January 26, 2024.

The Board received 32 applications for the RDA recruitment and 13 applications for the RDAEF recruitment.

Action Requested

The President is asked to appoint two Board members to a committee to review the applications, conduct interviews, and bring recommendations to fill these vacancies to the Board at a future meeting.



DENTAL BOARD OF CALIFORNIA

2005 Evergreen St., Suite 1550, Sacramento, CA 95815

P (916) 263-2300 | F (916) 263-2140 | www.dbc.ca.gov



MEMORANDUM

DATE	January 16, 2024
TO	Members of the Dental Board of California
FROM	Mirela Taran, Administrative Analyst Dental Board of California
SUBJECT	Agenda Item 17.: Public Comment on Future Agenda Items

Background

Stakeholders are encouraged to submit comments on future agenda items, including proposals, in writing to the Board before, during or after the meeting for possible consideration by the Board at a future Board meeting.

Action Requested

No action requested.

DENTAL BOARD OF CALIFORNIA

2005 Evergreen St., Suite 1550, Sacramento, CA 95815

P (916) 263-2300 | F (916) 263-2140 | www.dbc.ca.gov



MEMORANDUM

DATE	January 16, 2024
TO	Members of the Dental Board of California
FROM	Mirela Taran, Administrative Analyst Dental Board of California
SUBJECT	Agenda Item 23.: Board President's Report on Closed Session Items

Background

Dr. Alan Felsenfeld, President of the Dental Board of California, will provide a verbal report on closed session items.

Action Requested

No action requested.