



California State Board of Pharmacy
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STATE AND CONSUMER SERVICES AGENCY
DEPARTMENT OF CONSUMER AFFAIRS
ARNOLD SCHWARZENEGGER, GOVERNOR

ORGANIZATIONAL DEVELOPMENT COMMITTEE

Stan Weisser, RPh, Chairperson, Board President
Randy Kajjoka, PharmD, Vice-President

The Organizational Development Committee met on July 20, 2010. A summary of the meeting is provided in the report below.

a. FOR DISCUSSION: Proposed Meeting Dates for 2011

During this meeting, board members will be asked to set tentative dates for meetings next year. Typically the board meets four times a year: January, April, July and October. (In recent years however, because of pressing issues requiring more frequent board action, additional meetings have been scheduled.)

The following board meeting dates are being offered for board consideration. It was suggested that the board's traditional schedule be adjusted to align better with the legislative cycle. The below schedule is one possible alternative schedule.

January 26 – 27, 2011
May 4 – 5, 2011
July 27 – 28, 2011
October 19 – 20, 2011

We currently have one remaining board meeting scheduled for this year, October 20-21, 2011.

b. FOR ACTION: Approval of the Committee's Strategic Goals for 2010/11

Attachment 1

Background

Each fiscal year, the board updates its strategic plan. The current plan was developed in 2006-07 with the assistance of a consultant. Since then, each year the board has reviewed and as necessary revised its strategic plan. These are typically minor adjustments and additions.

Committee Discussion/Action

The committee reviewed its strategic plan for 2010/11 and did not recommend any changes to its plan.

c. **FOR ACTION: Approval of the Board of Pharmacy's Strategic Plan for 2010/11**

Attachment 2

The board needs to approve the strategic plan in its totality. A copy of the proposed strategic plan is provided in **Attachment 2**.

d. **FOR INFORMATION: Budget Report**

1. Budget Reports for 2009/10

Attachment 3

Final budget figures for the fiscal year that ended June 30, 2010, will be available in August. A full, final report will be provided to the board at the next board meeting.

As of July 1, 2010, the board has collected \$11,103,581 in revenue. Eighty-five percent of the revenue comes from fees, with cite and fine and cost recovery and interest generating fifteen percent of the board's revenue. **Attachment 3** contains a graphic depiction of estimated revenue and expenditure charts for 2009-10. The final figures will be available until mid-August.

2. Fund Condition Report

Attachment 4

According to a fund condition report prepared by the department (**Attachment 4**): the board will have the following fund conditions at the end of the identified fiscal years:

2008/09	\$11,001,000	13.5 months in reserve (actual)
2009/10	\$10,771,000	10.9 months in reserve
2010/11	\$9,608,000	8.4 months in reserve
2011/12	\$6,632,000	5.6 months in reserve

With the passage of the board's fee bill last year, AB 1071 (Emmerson, Chapter 270, Statutes of 2009) the board's reimbursements increased the last 6 months of the fiscal year with the higher fee schedule. The board will continue to closely monitor its fund condition before increasing any additional fees, however with the new fee structure

incorporated in AB 1071, the board does have the ability to raise fees via the regulation process when necessary.

3. Budget Report for 2010/11

Attachment 5

The new fiscal year started July 1, 2010. Included in the governor's proposed budget is a budget augmentation of \$ 2,668,000 this year to establish 22.5 new positions in the board's enforcement unit and 2 new positions in the licensing unit. These staff are necessary to meet the department established goal to ensure the average case closure time for formal discipline, from receipt of the complaint to final vote of the board, occurs within 12 to 18 months. This is a primary outcome of the Consumer Protection Enforcement Initiative (CPEI). The additional licensing staff are necessary to address the significant increase in pharmacy technician applications the board continues to receive as well as the increase in workload associated with processing several other types of applications (including change in pharmacist in charge form and processing discontinuance of business forms.)

As indicated in the fund condition report provided earlier, the board estimates that it will receive \$8,778,000 in licensing fees in FY 2010/11. Traditionally the board underestimates its licensing revenue and projections do not include other fees such as cost recovery and fines assessed.

Attachment 5 displays various graphs depicting actual board revenue and expenditures for 2008-09, estimated board expenses for 2009-10 (the final numbers will not be available until August 2010), and projected expenses for 2010-11.

4. Reimbursement to Board Members

Attachment 6

Expenses and per diem payments to board members are provided in **Attachment 6**. These are hours and expenses claimed by board members during the indicated periods. Board members are paid for each day of a board meeting, but in accordance with board policy, may also submit hours for work performed doing additional board business.

5. BreEZe Update

For a number of years the department has worked to replace and/or enhance the legacy licensing and enforcement tracking systems. A few years ago, the department initiated an I-Licensing project which would offer online application and renewal of licenses (a much needed relief from mail-in renewals).

This project was recently replaced as a component in DCA's proposed Enforcement

System upgrades with a new proposal, BreEZe, which will allow for online renewal and application processing, and will also replace the board's Consumer Affairs Systems and the Applicant Tracking System. Both systems are legacy systems. This new project will piggyback on the efforts of the initial I-Licensing system sought and will ultimately allow for improved services for applicants and licensees as well as provide for a more robust computer system internally.

The board is about 2-3 years away from changing to this new system. The executive officer has been an executive sponsor of this project, and periodic meetings have resumed after some staff changes in the Office of Information Services. In addition, we have staff working with the department to ensure the new solution can fulfill business requirements necessary to carry out our functions.

e. **FOR INFORMATION: Recognition Program of Pharmacists Who Have Been Licensed 50 Years in California**

Since July 2005, the board has acknowledged 1031 pharmacists with 50 or more years of licensure as pharmacists in California. Ninety-four pharmacists reached this milestone between April and July 2010. Each was sent a certificate and invited to a future board meeting for public recognition.

f. **FOR INFORMATION: Personnel Update**

1. Board Member Changes

Attachment 7

There are currently ten board members, and three board member vacancies. The vacant positions are all governor appointments and are for one public member and two pharmacist members.

In June, Board President Weisser made board member appointments to committees. A copy of this list is provided in **Attachment 7**.

2. Staff Changes

The board has three staff vacancies remaining: two inspector positions and one staff position unfilled. Here are our changes in our staff roster:

- Brenda Barnard, a board inspector, retired on June 30, 2010. The board is conducting the civil service exam, to establish of list of eligible candidates. This must be done prior to filling this vacancy.
- Victor Perez was promoted to an Associate Information Systems Analyst.
- Iran Serrano Borgmann transferred to the Bureau of Investigative and Security Services.

- Laura Hendricks was hired as the board's new budget analyst.

g. **FOR DISCUSSION: Fourth Quarterly Report on the Committee's Goals for 2009/10**

Attachment 8

The fourth quarterly report on the Organizational Development Committee's goals is provided at the back of the tab section in **Attachment 8**.

ATTACHMENT 1

ORGANIZATIONAL DEVELOPMENT COMMITTEE

Goal 5: Achieve the board's mission and goals.

Outcome: An effective organization.

Objective 5.1	Obtain 100 percent approval for identified program needs by June 30, 2011.
Measure:	Percentage approved for identified program needs.
Tasks:	<ol style="list-style-type: none"> 1. Review workload and resources to streamline operations, target backlogs and maximize services. 2. Develop budget change proposals to secure funding for needed resources. 3. Perform strategic management of the board through all committees and board activities. 4. Manage the board's financial resources to ensure fiscal viability and program integrity.
Objective 5.2	Maintain 100 percent staffing of all board positions.
Measure:	Percentage staffing of board positions.
Tasks:	<ol style="list-style-type: none"> 1. Continue active recruitment of pharmacists for inspector positions. 2. Vigorously recruit for any vacant positions. 3. Perform annual performance and training assessments of all staff.
Objective 5.3	Succession planning and workforce retention.
Measure:	Secure enhanced training of staff to improve job proficiency.
Tasks:	<ol style="list-style-type: none"> 1. Identify training for staff development.
Objective 5.4	Implement 10 strategic initiatives to automate board processes by June 30, 2011.
Measure:	Number of strategic initiatives implemented to automate board processes
Tasks:	<ol style="list-style-type: none"> 1. Implement automated applicant tracking (ATS). 2. Implement online license renewal and application submission features (BreZE). 3. Integrate telephone features to improve board services without adding staff resources. 4. Use the department's newly created "ad hoc" system to generate data for reports. 5. Secure equipment needed to perform staff duties optimally. 6. Implement automated program for staff-conducted drug audits. 7. Implement template for drug audits completed by pharmacies. 8. Develop template for hospital inspections to identify recalled heparin. (Completed April 2008) 9. Participate in Department of Consumer Affairs pilot program to achieve scanning of paper files.

Objective 5.5	Provide for communication venues to communicate within the board by June 30, 2011.
Measure:	Number of communication venues to communicate within the board.
Tasks:	<ol style="list-style-type: none"> 1. Continue the Communication Team to improve communication among staff and host biannual staff meetings. 2. Continue Enforcement Team meetings with board members and enforcement staff. 3. Convene annual inspector meetings to ensure standardized investigation and inspection processes, law and practice updates and earn continuing education credit. 4. Transition from paper packets for board meeting materials to e-copies. 5. Explore electronic voting of mail ballots for disciplinary decisions.
Objective 5.6	Annually conduct at least two outreach programs where public policy issues on health care are being discussed.
Measure:	Number of outreach programs conducted in one year.
Tasks:	<ol style="list-style-type: none"> 1. Outreach programs 2006/2007. 2. Outreach programs 2007/2008. 3. Outreach programs 2008/2009. 4. Professionals Achieving Consumer Trust Summit - November 2008. 5. Board provides three presentations at the annual California Pharmacists Association Meeting. 6. Workgroup on E-Pedigree holds March 2009 meeting where presentations made on FDA proposed standards for a unique identification number for serialization, Congressman Buyer's Office on federal legislation, and standards setting by GS1. 7. Executive Officer attends National Association of Boards of Pharmacy Meeting with other state boards of pharmacy. 8. Executive Staff attend Consumer Advisory Councils day-long presentation in San Francisco on substance abuse recovery programs for health care licensees. 9. Outreach programs 2009/2010.
Objective 5.7	Perform succession planning to ensure continuity for board operations during staff retirements.
Measure:	Number of staff trained for advanced duties and promoted.
Tasks:	
Objective 5.8	Respond to all public record requests within 10 days.
Measure:	Percentage response to public record requests within 10 days
Tasks:	<ol style="list-style-type: none"> 1. Respond to public records requests within 10 days (e.g., license verifications, investigative information, licensing information). 2. Respond to subpoenas within the timeline specified. 3. Respond to specific requests for data reports list.

ATTACHMENT 2

STRATEGIC PLAN



2006 – 2011



CALIFORNIA STATE BOARD OF PHARMACY
Healthy Californians Through Quality Pharmacist's Care

REVISED 2010

Strategic Plan

California State Board of Pharmacy

2006
2011

Members:

Stanley C. Weisser, Pharmacist Member, President
Randy Kajioka, Pharmacist Member, Vice President
Gregory N. Lippe, Public Member, Treasurer

Ryan Brooks, Public Member
Ramón Castellblanch, Pharmacist Member
Rosalyn Hackworth, Public Member
Kenneth Schell, Pharmacist Member
Deborah Veale, Pharmacist Member
Shirley Wheat, Public Member
Tappan Zee, Esq., Public Member

Virginia Herold, Executive Officer

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Revised June 2010

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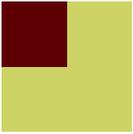
President's Message



The strategic planning process of the California State Board of Pharmacy is an annual effort of the board members, staff and the public to anticipate and plan for events and issues for the coming year. Although the board considers its current strategic plan when going through the planning exercise, the board also attempts to predict upcoming changes in pharmacy practice, consumer needs and demands and health care trends. After a lengthy discussion of potential and existing issues, the participants go through a process to categorize, consolidate and finally prioritize the issues and then set the goals for the coming year. The resulting strategic plan keeps the board focused on established goals while allowing the flexibility of handling new questions and challenges as they arise.

Each board committee considers its individual strategic plan goals at every meeting and the progress on the goals are reviewed at each of the quarterly full board meetings. The careful planning and continuous monitoring of the strategic plan assures that the board achieves its stated objectives and performs with optimal efficiency.

The board publishes advance notice for each strategic planning meeting and encourages participation and contribution by all interested citizens of California who attend. Involvement of the board, its staff and the public results in a strategic plan that truly represents the public interest and serves the consumers of this state.



CALIFORNIA STATE BOARD OF PHARMACY

VISION STATEMENT

Healthy Californians through quality pharmacist's care.

MISSION STATEMENT

The Board of Pharmacy protects and promotes the health and safety of Californians by pursuing the highest quality of pharmacist's care and the appropriate use of pharmaceuticals through education, communication, licensing, legislation, regulation, and enforcement.

ABOUT THE CALIFORNIA STATE BOARD OF PHARMACY

The California State Board of Pharmacy (board) was established in 1891 to protect consumers by licensing and regulating those responsible for dispensing medications to the public. Today the board oversees all aspects of the practice of pharmacy in California: the practitioner (the pharmacists), the practice site (the pharmacies), and the product (drugs and devices). Additionally the board regulates drug wholesalers and other practitioners and specialized facilities. With an annual budget of nearly \$9.8 million and a staff of over 60, the board licenses nearly 125,000 individuals and firms, and enforces 12 complex and varied regulatory programs.

The board has five policy development committees to fulfill its charge. The five committees are: Enforcement, Communication and Public Education, Licensing, Legislation and Regulation, and Organizational Development. Each of these committees corresponds to a mission-related goal.



The board supports an active Web site, www.pharmacy.ca.gov, that provides consumer education material, application material for licensing and information for ensuring compliance with California Pharmacy Law. The Web site also provides times and information on board meetings as well as other critical forums vital to pharmacy services where public comments and input are sought and encouraged. ■ ■

STRATEGIC ISSUES TO BE ADDRESSED

1. Cost of medical/pharmaceutical care

Providing necessary medication for all Californians is a concern; there is an increasing demand for affordable health care services. Also, spiraling medical care and prescription drug costs may influence people to take short cuts on their drug therapy or to seek medications from nontraditional pharmacy sources. Tiered pricing is a global reality. Due to global communication, patients can access drugs at different prices, worldwide. Patients seek lower cost medications from these sources because patients assume that prescription drugs are of the same quality as they are accustomed to obtaining from their neighborhood pharmacies. However, the cost of drugs drives unscrupulous individuals (such as counterfeiters and diverters) as well as conscientious health care providers to operate in this marketplace, the former endanger public health and confidence in the prescription drugs patients take.

2. Aging population



There are increasingly more senior citizens, and that population is living longer. Aging consumers often have decreased cognitive skills, eyesight and mobility. Consequently as the senior population increases so will the volume of prescriptions and the impact on pharmacists and pharmacy personnel to meet the demand. Specialized training of pharmacists may be necessary to better serve the needs of aging patients.

Many senior citizens, who previously may not have had prescription drug insurance coverage, will benefit from the new prescription drug benefit of Medicare that started in January 2006. However, this new benefit has been implemented with significant problems for some seniors, and as a complicated new program, will require public education and perhaps statutory modification.

3. Pharmacists' ability to provide care

The ability of pharmacy to provide optimal care for patients with chronic conditions is being challenged. Drugs are becoming more powerful and it is anticipated that more intervention by pharmacists will be required. The challenge is even greater when consumers fill multiple prescriptions at different pharmacies. The pharmacist shortage, increased consumer demand for prescription drugs, patient compliance in taking medications and polypharmacy are issues which will impact pharmacists' ability to provide care.

4. **Changing demographics of California patients**

The diversity of California's population is growing with respect to race, ethnicity and linguistic skills, as is the segment that seeks drugs and products from foreign countries. This requires greater knowledge, understanding and skills from health care practitioners. The increasing diversity of patients is coupled with culturally-based beliefs that undervalue the need for licensed pharmacists and pharmacies, and instead encourage purchase of prescription drugs from nontraditional locations and providers.



There also is widespread belief that there must be a medication solution for every condition or disease state.

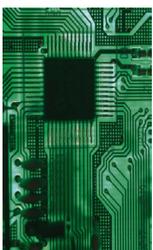
5. **Laws governing pharmacists**

New laws enhancing pharmacists' roles as health care providers are needed. The laws must address several key issues including: expansion of the scope of pharmacy practice, the ratio of personnel overseen by pharmacists, delineation of the role of pharmacists relative to selling versus nonselling duties of personnel, and the responsibility for legal and regulatory compliance of the pharmacist-in-charge.

6. **Integrity of the drug delivery system**

Implementation of the e-pedigree for prescription drugs will reduce the growing incidence of counterfeit, damaged, adulterated or misbranded medications in California's pharmacies. Additionally the federal government has demonstrated an increasing interest in regulating health care to safeguard consumer interests. New legislation and regulation may be created in response to emergency preparedness, disaster response and pandemics. Changes in the prescription drug benefits provided to Medicare beneficiaries will continue to command attention.

7. **Technology Adaptation**



Technology will greatly impact the processing and dispensing of medication. Electronic prescribing and "channeling" to locations other than a traditional pharmacy may become the business model. Automated pharmacy systems and electronic prescribing will impact pharmacy. New methods of dispensing medications raise additional liability issues. New medication, perhaps engineered for specific patients, will become available at high costs and require special patient monitoring systems.

8. Internet issues

The availability of prescription drugs over the Internet is on the rise. Multiple and easy access of drugs without pharmacist participation is dangerous. Entities promoting illegal drug distribution schemes have taken advantage of the Internet. Monitoring and protecting the public from improper drug distribution from these Internet pharmacies is severely impaired with continued resource constraints by both the federal and state agencies with jurisdiction.

9. Disaster planning and response

Pharmacists need to be ready to be positioned to provide emergency care and medication in response to natural disasters, pandemics and terrorism. This requires specialized knowledge, advance planning and integration of local, state and federal resources that can be quickly mobilized. Specialized drug distribution channels will need to be authorized to permit emergency response.



Additionally, regulatory adjustments to the September 11 terrorism may affect persons' rights to privacy.

10. Qualified staff and Board Members

The state's fiscal crisis has affected the board's ability to investigate customer complaints or hire staff. The board lost 20 percent of its staff positions during the prior five years due to the state's hiring freezes. Loss of these staff has altered the provision of services by the board. The salary disparity between the private and public sectors in compensation for pharmacists will make it difficult to recruit and retain pharmacist inspectors. Moreover, for all staff, if wages remain essentially frozen, the retention of current employees could be impacted.

The diversity and involvement of all board members in policy development is important for public health and protection. At least a quorum of board members is needed to ensure the board can make decisions and act timely.

11. Pharmacy/health care in the 21st century

The state's health care practitioners (pharmacists, physicians, nurses) are being influenced by a variety of internal and external factors that affect and will continue to effect health care provided to patients. Improved patient care will result from improved integration among these professions. Also, a renewed emphasis on patient consultation will benefit patient knowledge about their drug therapy and thus improve their care.

12. Information Management

Creation, maintenance and transfer of electronic patient records and prescription orders will be the norm in the future. Patient records need to remain confidential and secured from unauthorized access. Pharmacies and wholesalers need to ensure the availability of an e-pedigree for drugs obtained, transferred and dispensed. It is likely that all controlled drugs dispensed in California will be tracked electronically by the CURES system.

Patient records need to remain confidential and secured from unauthorized access. Pharmacies and wholesalers need to ensure the availability of an e-pedigree for drugs obtained, transferred and dispensed.

Summary of Goals



Goal One

Exercise oversight on all pharmacy activities.

Goal Two

Ensure the qualifications of licensees.

Goal Three

Advocate legislation and promulgate regulations that advance the vision and mission of the Board of Pharmacy.

Goal Four

Provide relevant information to consumers and licensees.

Goal Five

Achieve the board's mission and goals.

GOALS, OUTCOMES, OBJECTIVES, AND MEASURES

ENFORCEMENT COMMITTEE

Goal 1: Exercise oversight on all pharmacy activities.

Outcome: Improve consumer protection.

Objective 1.1	Achieve 100 percent closure on all board investigations within 6 months.
Measure:	Percentage of cases closed.
Tasks:	<ol style="list-style-type: none"> 1. Complete all desk investigations within 90 days (for cases closed during quarter). 2. Complete all field investigations within 120 days (for cases closed during quarter). 3. Close (e.g., no violation, issue citation and fine, refer to the AG's Office) all board investigations and mediations within 180 days.
Objective 1.2	Manage enforcement activities for achievement of performance expectations
Measure:	Percentage compliance with program requirements
Tasks:	<ol style="list-style-type: none"> 1. Administer the Pharmacists Recovery Program. 2. Administer the probation monitoring program. 3. Issue citations and fines within 30 days 4. Issue letters of admonition within 30 days 5. Obtain immediate public protection sanctions for egregious violations. 6. Submit petitions to revoke probation within 30 days for noncompliance with terms of probation.
Objective 1.3	Achieve 100 percent closure on all administrative cases (excluding board investigation time) within one year by June 30, 2011.
Measure:	Percentage closure of administrative cases within one year.
Objective 1.4	Inspect 100 percent of all licensed facilities once every 3 years by June 30, 2011.
Measure:	Percentage of licensed facilities inspected once every 3 year cycle.
Tasks:	<ol style="list-style-type: none"> 1. Inspect licensed premises to educate licensees proactively about legal requirements and practice standards to prevent serious violations that could harm the public. 2. Inspect sterile compounding pharmacies initially before licensure and annually before renewal. 3. Initiate investigations based upon violations discovered during routine inspections.

<p>Objective 1.5</p> <p>Measure:</p> <p>Tasks:</p>	<p>Initiate policy review of 25 emerging enforcement issues by June 30, 2011.</p> <p>The number of issues.</p> <ol style="list-style-type: none"> 1. Monitor the implementation of e-pedigree on all prescription medications sold in California. 2. Implement federal restrictions on ephedrine, pseudoephedrine or phenylpropanolamine products. 3. Monitoring the efforts of the Drug Enforcement Administration and Department of Health and Human Services to implement e-prescribing for controlled substances. 4. Evaluate establishment of an ethics course as an enforcement option. 5. Participate in emerging issues of the national level affecting the health of Californians regarding their prescription medicine. 6. Provide information about legal requirements involving e-prescribing to support the Governor's Health Care Initiative and its promotion of e-prescribing. 7. Implement in California the Center for Medicare and Medicaid Service requirements for security prescription forms that will be required in only four months for all written Medicaid and Medicare prescriptions. 8. Liaison with other state and federal agencies to achieve consumer protection. 9. Work with the California Integrated Waste Management Board to implement requirements for model programs to take back unwanted prescription medicine from the public. 10. Inspect California hospitals to ensure recalled heparin has been removed from patient care areas. 11. Promulgate regulations required by SB 1441 (Ridley-Thomas, Chapter 548, Statutes of 2008) for recovery programs administered by Department of Consumer Affairs health care boards. 12. Develop and release Request for Proposal for vendor for Department of Consumer Affairs health care boards that operate license recovery programs. 13. Participate in Department of Consumer Affairs Consumer Protection Enforcement Initiative to strengthen board enforcement activities and reduce case investigation completion times for formal discipline. 14. Initiate criminal conviction unit to review and investigate rap sheets received on licenses for arrests or convictions. 15. Complete comprehensive review of investigative and enforcement internal processing to identify process improvements.
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LICENSING COMMITTEE

Goal 2: Ensure the qualifications of licensees.

Outcome: Qualified licensees

<p>Objective 2.1</p> <p>Measure:</p>	<p>Issue licenses within three working days of a completed application by June 30, 2011.</p> <p>Percentage of licenses issued within three work days</p>
<p>Tasks:</p>	<ol style="list-style-type: none"> 1. Review 100 percent of all applications within seven work days of receipt. 2. Process 100 percent of all deficiency documents within five work days of receipt. 3. Make a licensing decision within three work days after all deficiencies are corrected. 4. Issue professional and occupational licenses to those individuals and firms that meet minimum requirements. <ul style="list-style-type: none"> • Pharmacists • Intern pharmacists • Pharmacy technicians • Pharmacies • Non-resident pharmacies • Wholesaler drug facilities • Veterinary food animal drug retailers • Designated Representatives (the non-pharmacists who may operate sites other than pharmacies) • Out-of-state distributors • Clinics • Hypodermic needle and syringe distributors • Sterile Compounders 5. Withdrawn licenses to applicants not meeting board requirements. 6. Deny applications to those who do not meet California standards. 7. Respond to e-mail status requests and inquiries to designated e-mail addresses. 8. Respond to telephone status request and inquiries.
<p>Objective 2.2</p> <p>Measure:</p>	<p>Cashier 100 percent of all revenue received within two working days of receipt by June 30, 2011.</p> <p>Percentage of revenue cashiered application within 2 working days.</p>
<p>Tasks:</p>	<ol style="list-style-type: none"> 1. Cashier application fees. 2. Cashier renewal fees. 3. Cashier citations with fines. 4. Cashier probation and cost recovery fees. 5. Cashier request for information/license verification fees. 6. Cashier fingerprint fees.

<p>Objective 2.3</p> <p>Measure:</p>	<p>Update 100 percent of all information changes to licensing records within five working days by June 30, 2011.</p> <p>Percentage of licensing records changes within five working days</p>
<p>Tasks:</p>	<ol style="list-style-type: none"> 1. Make address and name changes. 2. Process off-site storage applications. 3. Transfer intern hours to other states
<p>Objective 2.4</p> <p>Measure:</p>	<p>Implement at least 25 changes to improve licensing decisions by June 30, 2011.</p> <p>Number of implemented changes</p>
<p>Tasks:</p>	<ol style="list-style-type: none"> 1. Determine why 26 states do not allow the use of a CA license as the basis for transfer a pharmacist license to that state. 2. Evaluate the drug distribution system of clinics and their appropriate licensure. 3. Work with the Department of Corrections on the licensure of pharmacies in prisons. 4. Work with local and state officials on emergency preparedness and planning for pandemic and disasters. Planning to include the storage and distribution of drugs to assure patient access and safety. 5. Evaluate the need to issue a provisional license to pharmacy technician trainees. 6. Evaluate use of a second pharmacy technician certification examination (ExCPT) as a possible qualifying route for registration of technicians. 7. Review requirements for qualifications of pharmacy technicians with stakeholders. 8. Implement the Department of Consumer Affairs Applicant Tracking System to facilitate implementation of I-Licensing system, allowing online renewal of licenses by 2008. Note: I-Licensing system has been cancelled and the BreZE system will take its place. 9. Participate with California's Schools of Pharmacy in reviewing basic level experiences required of intern pharmacists, in accordance with new ACPE standards. 10. Implement new test administration requirements for the CPJE. 11. Participate in ACPE reviews of California Schools of Pharmacy. 12. Initiate review of Veterinary Food Animal Drug Retailer Designated Representative training. 13. Convene Committee to evaluate drug distribution within hospitals. 14. Improve reporting of and accounting for intern hours. 15. Participate in initiatives to increase the number of pharmacists in California to meet demand. 16. Assess the operations of specialty pharmacy services. 17. Encourage use of technology where it benefits the public. 18. Secure the implementation of e-prescribing in California by the earliest possible date. 19. Ensure the public receives necessary pharmaceuticals in emergency response activities to the H1N1 pandemic. 20. Automate fingerprint background results with the Department of Justice. 21. Evaluate pharmacy technician application process to identify areas for improvement. 22. Implement fingerprint requirement for Pharmacist renewal. 23. Evaluate licensing requirements for businesses seeking licensure under common ownership.

LEGISLATION AND REGULATION COMMITTEE

Goal 3: Advocate legislation and promulgate regulations that advance the vision and mission of the Board of Pharmacy.

Outcome: Improve the health and safety of Californians.

Objective 3.1	Annually identify and respond with legislative changes to keep pharmacy laws current and consistent with the board’s mission.
Measure:	100 percent successful enactment of promoted legislative changes.
Tasks:	<ol style="list-style-type: none"> 1. Secure extension of board’s sunset date. 2. Sponsor legislation to update pharmacy law. 3. Advocate the board’s role and its positions regarding pharmacists’ care and dispensing of dangerous drugs and devices. 4. Secure statutory standards for pharmacies that compound medications. 5. Secure implementation of e-pedigrees on prescription drugs dispensed in California. 6. Advocate the board’s position on pending legislation affecting pharmacy practice and/or the board’s jurisdiction. 7. Expand the conditions under which a pharmacist may administer an immunization independent of physician protocol. 8. Advocate the board’s role as an advocate for consumers by redesigning prescription label for all medicines dispensed to California patients. 9. Secure statutory fee increase to ensure sufficient funding to fulfill all of the boards statutory obligations as a consumer protection agency. 10. Advocate legislation to enhance the board’s enforcement activities.

<p>Objective 3.2</p>	<p>Annually identify and respond with regulatory changes to keep pharmacy regulations current and consistent with the board's mission.</p>
<p>Measure:</p>	<p>Percentage successful enactment of promoted regulatory changes</p>
<p>Tasks:</p>	<ol style="list-style-type: none"> 1. Authorize technicians to check technicians in inpatient pharmacies with clinical pharmacist programs (sections 1793.7-1793.8). 2. Authorize the use of prescription drop boxes and automated delivery machines for outpatient pharmacies (sections 1713 and 1717(e)). 3. Make technical changes in pharmacy regulations to keep the code updated. <ul style="list-style-type: none"> Section 1706.2 criteria for abandonment of files Section 1775.4 contested citations Section 1709.1 designation of pharmacist-in-charge Section 1780 standards for wholesalers Section 1780.1 standards for veterinary food animal drug retailers Section 1781 Designated Representative certificate Section 1786 Designated Representative 4. Repeal the requirement to post a notice regarding electronic files (section 1717.2). 5. Revise and update Disciplinary Guidelines revision and update (section 1760). 6. Self-assessment of a wholesaler by the designated representative (section 1784). 7. Exempt the address of records of interns from display on the board's Web site (section 1727.1). 8. Modification of building standards for pharmacies – rulemaking by the California Building Standards Commission. 9. Update Notice to Consumers Poster in conformance with AB 2583 (Chapter 487, Statutes 2006)(Section 1707.2). 10. Secure changes without regulatory effect (Section 100 changes) to pharmacy regulations to keep them accurate and current. 11. Increase fees to keep the board's contingency fund solvent and maintain operations. 12. Secure regulatory standards for pharmacies that compound. 13. Establish an ethics course. 14. Pharmacist renewal requirements. 15. Dishonest conduct during pharmacist examination; confidentiality of exam questions. 16. Standardized, patient-centered prescription labels. 17. Update protocol for pharmacists furnishing emergency contraception (EC). 18. Board issued continuing education (CE) credit. 19. Notice to Consumers re: Patient-Centered Prescription Labels.
<p>Objective 3.3</p>	<p>Review five areas of pharmacy law for relevancy, currency and value for consumer protection by June 30, 2011.</p>
<p>Measure:</p>	<p>Number of areas of pharmacy law reviewed</p>
<p>Tasks:</p>	<ol style="list-style-type: none"> 1. Initiate review of the pharmacist-in-charge requirement.

COMMUNICATION AND PUBLIC EDUCATION COMMITTEE

Goal 4: Provide relevant information to consumers and licensees.

Outcome: Improved consumer awareness and licensee knowledge.

Objective 4.1	Develop a minimum of 10 communication venues to the public by June 30, 2011.
Measure:	Number of communication venues developed to the public.
Tasks:	<ol style="list-style-type: none"> 1. Assess the effectiveness of the board's educational materials and outreach: survey consumers to identify whether board-produced materials are valued and what new materials are desired. 2. Restructure the board's Web site to make it more user friendly. 3. Work with the California Health Communication Partnership on integrated public information campaigns on health-care topics. 4. Continue collaboration with schools of pharmacy for pharmacist interns to develop consumer fact sheets on health topics. 5. Develop a Notice to Consumers to comply with requirements of AB 2583 (Nation) on patients' rights to secure legitimately prescribed medication from pharmacies. 6. Evaluate the practice of pill splitting as a consumer protection issue. 7. Evaluate the SCR 49 Medication Errors Report for implementation. 8. Develop patient-centered standardized prescription container labels by 2011. 9. Address and promote licensee and public education on minimizing prescription errors. 10. Educate consumers about steps they can take to prevent receiving a medication error.
Objective 4.2	Develop 10 communication venues to licensees by June 30, 2011.
Measure:	Number of communication venues developed to licensees
Tasks:	<ol style="list-style-type: none"> 1. Publish <i>The Script</i> two times annually. 2. Develop board-sponsored continuing education programs in pharmacy law and coordinate presentation at local and annual professional association meetings throughout California. 3. Maintain important and timely licensee information on Web site.
Objective 4.3	Participate in 12 forums, conferences and public education events annually.
Measure:	Number of forums participated.
Tasks:	<ol style="list-style-type: none"> 1. Participate in forums, conferences and educational fairs.

ORGANIZATIONAL DEVELOPMENT COMMITTEE

Goal 5: Achieve the board's mission and goals.

Outcome: An effective organization.

Objective 5.1	Obtain 100 percent approval for identified program needs by June 30, 2011.
Measure:	Percentage approved for identified program needs.
Tasks:	<ol style="list-style-type: none"> 1. Review workload and resources to streamline operations, target backlogs and maximize services. 2. Develop budget change proposals to secure funding for needed resources. 3. Perform strategic management of the board through all committees and board activities. 4. Manage the board's financial resources to ensure fiscal viability and program integrity.
Objective 5.2	Maintain 100 percent staffing of all board positions.
Measure:	Percentage staffing of board positions.
Tasks:	<ol style="list-style-type: none"> 1. Continue active recruitment of pharmacists for inspector positions. 2. Vigorously recruit for any vacant positions. 3. Perform annual performance and training assessments of all staff.
Objective 5.3	Succession planning and workforce retention.
Measure:	Secure enhanced training of staff to improve job proficiency.
Tasks:	<ol style="list-style-type: none"> 1. Identify training for staff development.
Objective 5.4	Implement 10 strategic initiatives to automate board processes by June 30, 2011.
Measure:	Number of strategic initiatives implemented to automate board processes
Tasks:	<ol style="list-style-type: none"> 1. Implement automated applicant tracking (ATS). 2. Implement online license renewal and application submission features (BreZE). 3. Integrate telephone features to improve board services without adding staff resources. 4. Use the department's newly created "ad hoc" system to generate data for reports. 5. Secure equipment needed to perform staff duties optimally. 6. Implement automated program for staff-conducted drug audits. 7. Implement template for drug audits completed by pharmacies. 8. Develop template for hospital inspections to identify recalled heparin. (Completed April 2008) 9. Participate in Department of Consumer Affairs pilot program to achieve scanning of paper files.

Objective 5.5	Provide for communication venues to communicate within the board by June 30, 2011.
Measure:	Number of communication venues to communicate within the board.
Tasks:	<ol style="list-style-type: none"> 1. Continue the Communication Team to improve communication among staff and host biannual staff meetings. 2. Continue Enforcement Team meetings with board members and enforcement staff. 3. Convene annual inspector meetings to ensure standardized investigation and inspection processes, law and practice updates and earn continuing education credit. 4. Transition from paper packets for board meeting materials to e-copies. 5. Explore electronic voting of mail ballots for disciplinary decisions.
Objective 5.6	Annually conduct at least two outreach programs where public policy issues on health care are being discussed.
Measure:	Number of outreach programs conducted in one year.
Tasks:	<ol style="list-style-type: none"> 1. Outreach programs 2006/2007. 2. Outreach programs 2007/2008. 3. Outreach programs 2008/2009. 4. Professionals Achieving Consumer Trust Summit - November 2008. 5. Board provides three presentations at the annual California Pharmacists Association Meeting. 6. Workgroup on E-Pedigree holds March 2009 meeting where presentations made on FDA proposed standards for a unique identification number for serialization, Congressman Buyer's Office on federal legislation, and standards setting by GS1. 7. Executive Officer attends National Association of Boards of Pharmacy Meeting with other state boards of pharmacy. 8. Executive Staff attend Consumer Advisory Councils day-long presentation in San Francisco on substance abuse recovery programs for health care licensees. 9. Outreach programs 2009/2010.
Objective 5.7	Perform succession planning to ensure continuity for board operations during staff retirements.
Measure:	Number of staff trained for advanced duties and promoted.
Tasks:	
Objective 5.8	Respond to all public record requests within 10 days.
Measure:	Percentage response to public record requests within 10 days
Tasks:	<ol style="list-style-type: none"> 1. Respond to public records requests within 10 days (e.g., license verifications, investigative information, licensing information). 2. Respond to subpoenas within the timeline specified. 3. Respond to specific requests for data reports list.

Goal Alignment Matrix – Strategic Issues					
Strategic Issues	Goal 1: Exercise oversight on all pharmacy activities	Goal 2: Ensure the qualifications of licensees.	Goal 3: Advocate legislation and promulgate regulations that advance the Vision and Mission of BOP.	Goal 4: Provide relevant information to consumers and licensees.	Goal 5: Achieve the Board's Mission and Goals.
1. Cost of medical/ pharma-ceutical care	X		X	X	X
2. Aging population	X	X		X	X
3. Pharmacists' ability to provide care	X	X	X	X	X
4. Changing demographics of CA patients	X	X	X	X	X
5. Laws governing pharmacists	X	X	X	X	
6. Integrity of the drug delivery system	X	X	X		
7. Technology adaptation	X		X	X	X
8. Internet Issues	X			X	X
9. Disaster planning and Response	X	X	X	X	X
10. Qualified staff	X	X			X
11. Pharmacy/ Healthcare Integration in the 21st century	X	X	X	X	X
12. Information Management	X	X	X	X	X



SCANNING ASSESSMENT AND METHODOLOGY

In assessing the critical data that will influence the board's ability to fulfill its vision and mission, the strategic planning team completed several scanning activities in 2006. Board members, all staff and stakeholders participated in completing a survey questionnaire that was submitted to the strategic planning team for synthesis and analysis. This included review of the board's mission, vision, goals and strategic issues. Additionally a "SWOT" analysis (an acronym for strengths, weaknesses, opportunities and threats) was conducted during the survey as part of the scanning assessment.

In developing its strategic plan, the board relied upon the full participation of its entire staff, its board members and its interested stakeholders. The participation of each group has provided important information necessary for a dynamic strategic plan, capable of guiding the board in fulfilling its mission for several years.

In developing its strategic plan, the board relied upon the full participation of its entire staff, its board members and its interested stakeholders.

After each group performed the SWOT analyses described above, the board refined the strategic issues to be addressed during the April 2006 Meeting, and the results are summarized in this plan under **"Strategic Issues to be Addressed."**

Additional refinement of board objectives and activities was conducted during late spring 2006 by each of the board's strategic committees, and the final strategic plan for 2006-11 was approved at the July 2006 Board Meeting.

SHARED VALUES/CORE PRINCIPLES

The Board of Pharmacy will exhibit:

- Vision
- Integrity
- Flexibility
- Commitment
- Loyalty to its mission
- Relevance to important issues
- Compassion, and
- Open-mindedness

These values will be exhibited when considering all matters before the board affecting the consumers of California and the profession of pharmacy.

INTERNAL/EXTERNAL ASSESSMENT

The critical data stemming from the SWOT analysis is reflected below. The information represents a deliberative process of multiple iterations conducted with the board members, staff and stakeholders.

Strengths	Weaknesses
<p>1. Staff/Inspectors: Staff’s teamwork, dedication, diversity, and knowledge. Pharmacist inspectors provide necessary, specialized knowledge.</p> <p>2. Leadership: Support and communication provided by management, diversity and experience of board members.</p>	<p>1. Resources: Budget constraints and insufficient resources to meet mandated duties at desired levels</p> <p>2. Staffing Shortages: Insufficient staff to perform, manage, and review consumer protection activities of licensing, enforcement, and education programs.</p>
Opportunities	Threats
<p>1. Pharmacist’s Role: Pharmacy profession has large potential role in healthcare delivery. Pharmacists have opportunities in roles associated with patient care and not exclusively dispensing.</p> <p>2. Technology/Automation: Promoting legislation and regulations to foster the use of technological advances by pharmacies, attainment of operational efficiencies, decreased administrative burdens, and enhanced patient care services.</p> <p>3. Consumer Safety/Privacy: Promoting a nonpunitive learning environment approach to improving pharmacy patient safety. Continuing emphasis on patient safety by involving the pharmacist in patient care.</p> <p>4. Public education: Increasingly informed consumers means the profession must be able to deliver public education on drug use safety and healthcare issues.</p>	<p>1. Board of Pharmacy staffing is insufficient to perform mandated duties at desired levels.</p> <p>2. Board funding: Lack of funding for new programs; lack of fiscal control of board over much of its budget; budget constraints and deficits; hiring freeze.</p> <p>3. Cost of pharmaceuticals: Impacts of the increasing costs of pharmaceuticals cannot be managed or controlled by the consumer or the board.</p> <p>4. Pharmacy personnel shortage: Lack of licensees impedes the ability of patients to receive quality pharmacist care.</p>



Healthy Californians Through Quality Pharmacist's Care

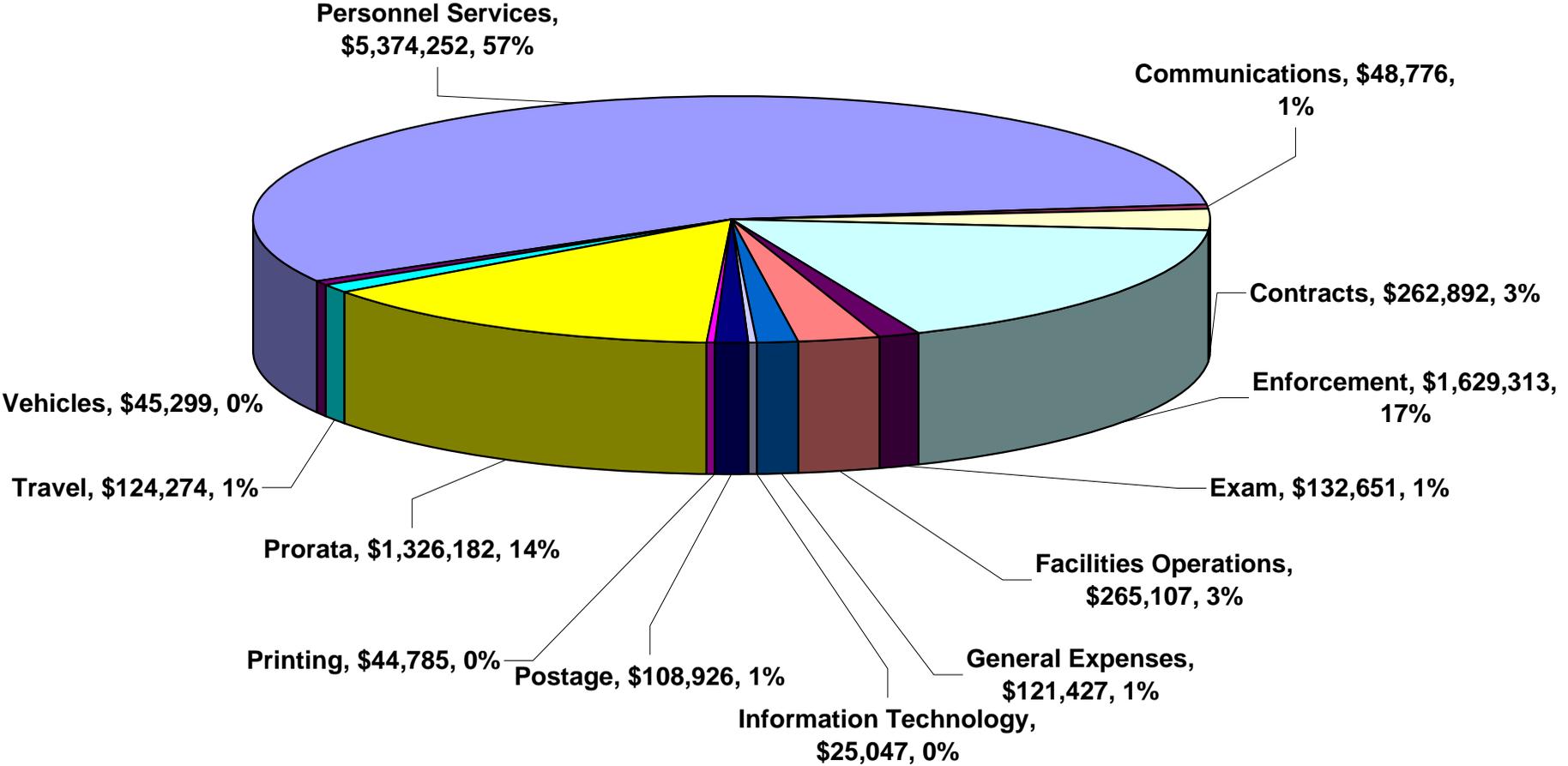


STRATEGIC PLAN

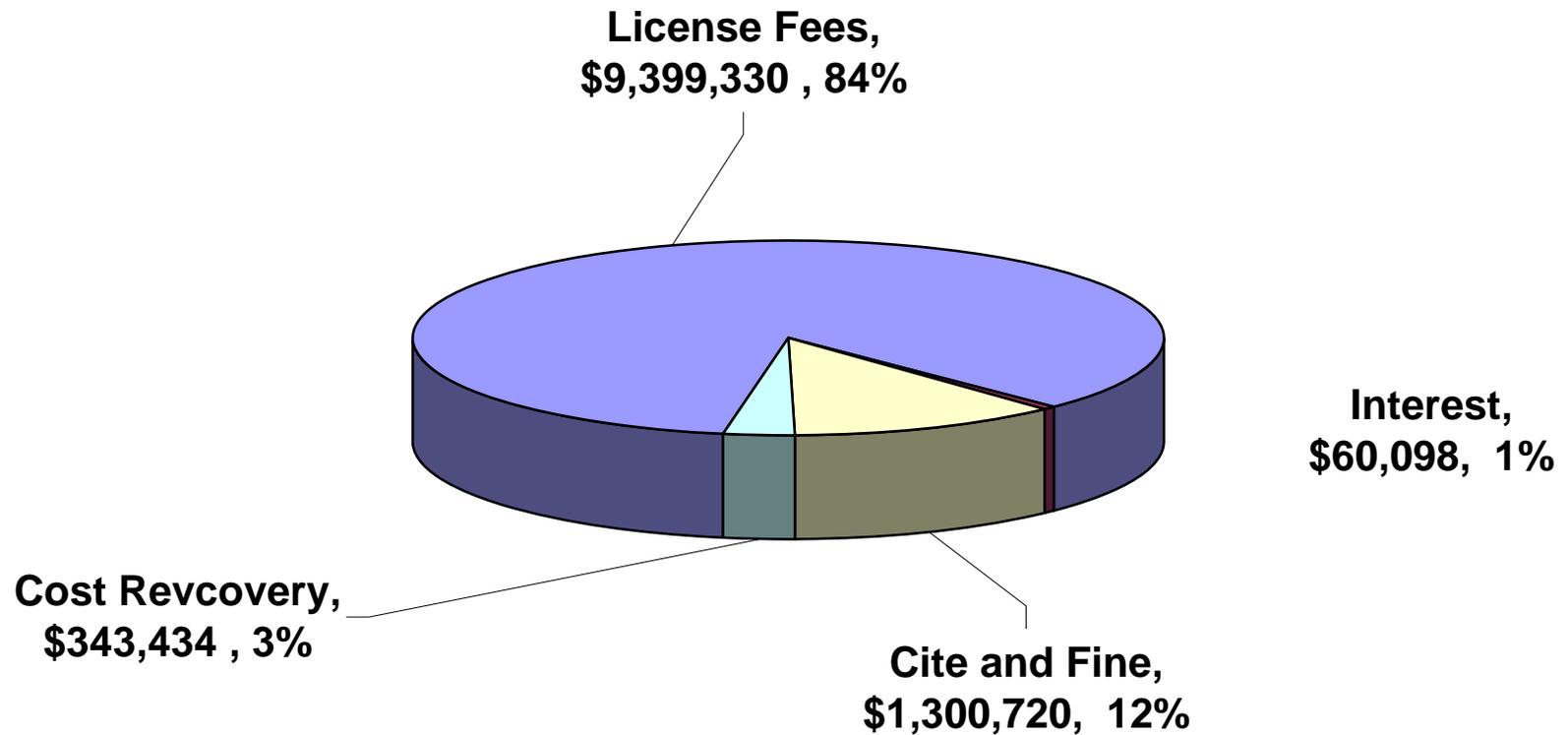
California State Board of Pharmacy
1625 North Market Blvd., Suite N-219
Sacramento, CA 95834
916 574.7900
916 574.8618 fax
www.pharmacy.ca.gov

ATTACHMENT 3

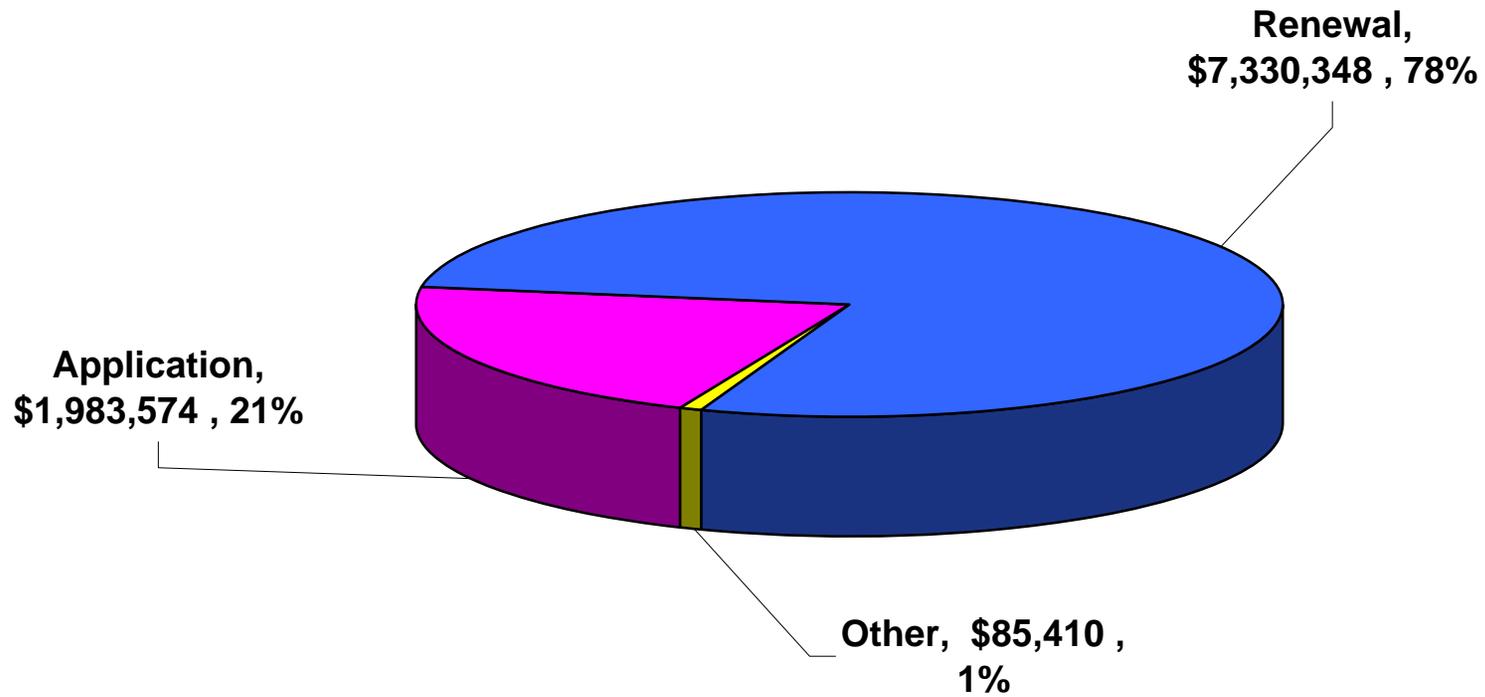
**FY 09/10
Expenditures
FM 12
\$9,508,931**



**FY 2009/2010
Origin of Revenue
\$11,103,581
*as of June 2010**



Application vs. Renewal Fees Collected FY 2009/2010



ATTACHMENT 4

0767 - State Board of Pharmacy

Analysis of Fund Condition

(Dollars in Thousands)

Governor's Budget + 1B

	Actual 2008-09	CY 2009-10	BY 2010-11	2011-12
BEGINNING BALANCE	\$ 10,884	\$ 11,001	\$ 12,300	\$ 9,608
Prior Year Adjustment	\$ 48	\$ -	\$ -	\$ -
Adjusted Beginning Balance	\$ 10,932	\$ 11,001	\$ 12,300	\$ 9,608
REVENUES AND TRANSFERS				
Revenues:				
125600 Other regulatory fees	\$ 1,175	\$ 1,381	\$ 1,381	\$ 1,381
125700 Other regulatory licenses and permits	\$ 2,084	\$ 1,984	\$ 1,984	\$ 1,984
125800 Renewal fees	\$ 6,460	\$ 7,208	\$ 7,208	\$ 7,208
125900 Delinquent fees	\$ 106	\$ 113	\$ 113	\$ 113
131700 Misc. revenue from local agencies	\$ 12	\$ 7	\$ 7	\$ 7
141200 Sales of documents	\$ -	\$ -	\$ -	\$ -
142500 Miscellaneous services to the public	\$ 1	\$ -	\$ -	\$ -
150300 Income from surplus money investments	\$ 249	\$ 60	\$ 95	\$ 66
150500 Interest Income From Interfund Loans	\$ -	\$ -	\$ -	\$ -
160400 Sale of fixed assets	\$ 2	\$ 5	\$ -	\$ -
161000 Escheat of unclaimed checks and warrants	\$ 8	\$ 9	\$ 9	\$ 9
161400 Miscellaneous revenues	\$ 3	\$ 4	\$ 4	\$ 4
Totals, Revenues	\$ 10,100	\$ 10,771	\$ 10,801	\$ 10,772
Transfers from Other Funds				
F00001 GF loan per Item 1490-011-0767, BA of 2002				
Transfers to Other Funds				
T00001 GF loan per Item 1490-011-0767, BA of 2002	\$ -	\$ -	\$ -	\$ -
GF LOAN	\$ (1,000)			
Totals, Revenues and Transfers	\$ 9,100	\$ 10,771	\$ 10,801	\$ 10,772
Totals, Resources	\$ 20,032	\$ 21,772	\$ 23,101	\$ 20,380
EXPENDITURES				
Disbursements:				
0840 State Operations	\$ 4	\$ 7	\$ 17	\$ -
1110 Program Expenditures (State Operations)	\$ 9,027	\$ 9,755	\$ 13,470	\$ 13,739
1110-1B Cal-Licensing BCP				\$ 9
8880 FISC (State Operations)			\$ 6	
9670 Equity Claims / Board of Control (State Operations)	\$ -	\$ -	\$ -	\$ -
Total Disbursements	\$ 9,031	\$ 9,472	\$ 13,493	\$ 13,748
FUND BALANCE				
Reserve for economic uncertainties	\$ 11,001	\$ 12,300	\$ 9,608	\$ 6,632
MONTHS IN RESERVE	13.9	10.9	8.4	5.6

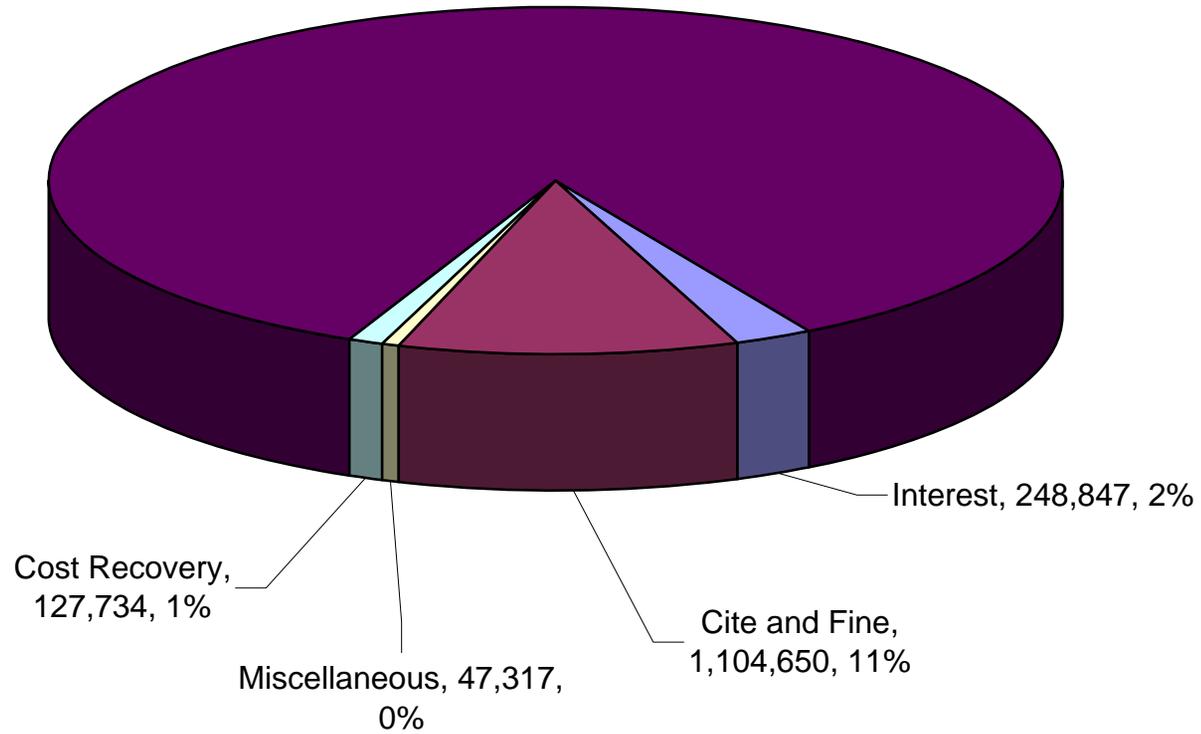
NOTES:

- ASSUMES WORKLOAD AND REVENUE PROJECTIONS ARE REALIZED FOR 2009-10 AND ON-GOING.
- ASSUMES INTEREST RATE AT 2%.
- ASSUMES APPROPRIATION GROWTH OF 2% PER YEAR.
- FEE INCREASE APPLIES TO ALL LICENSE BASED REVENUE CODES.

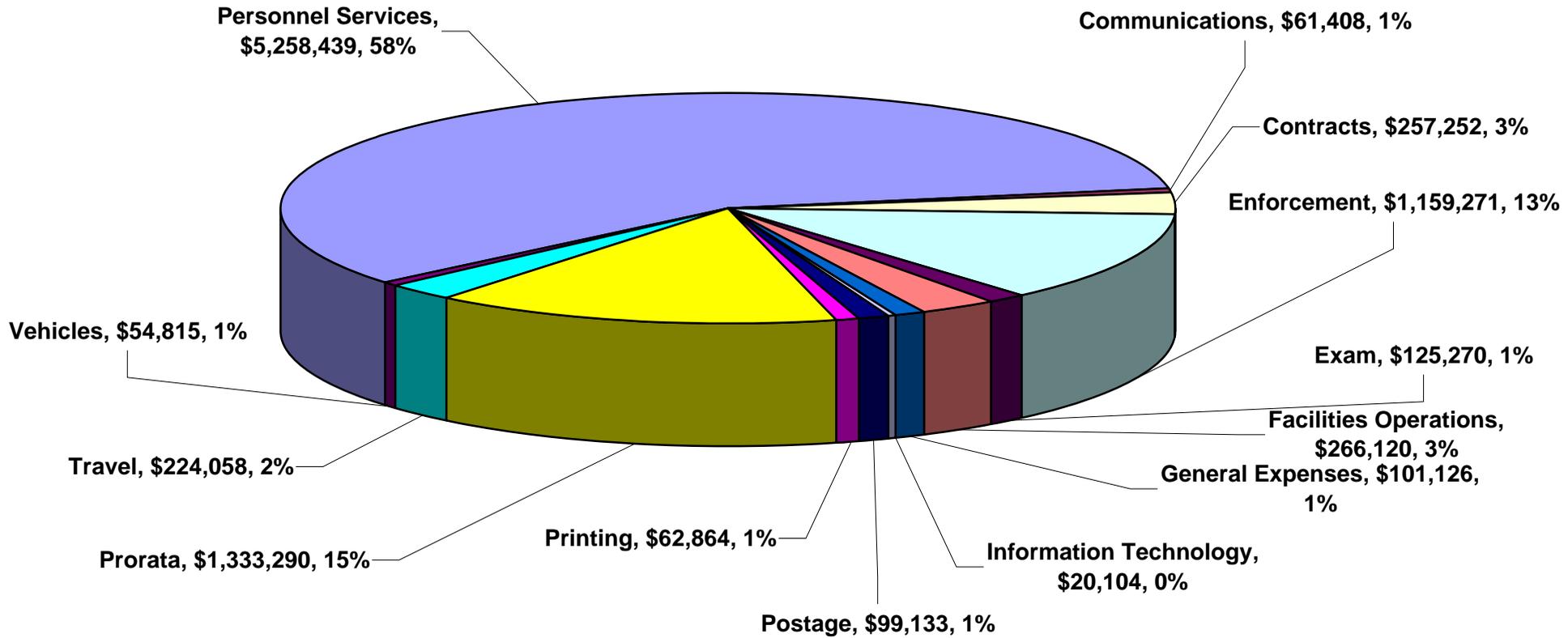
ATTACHMENT 5

**FY 2008/2009
Origin of Revenue
\$10,178,871**

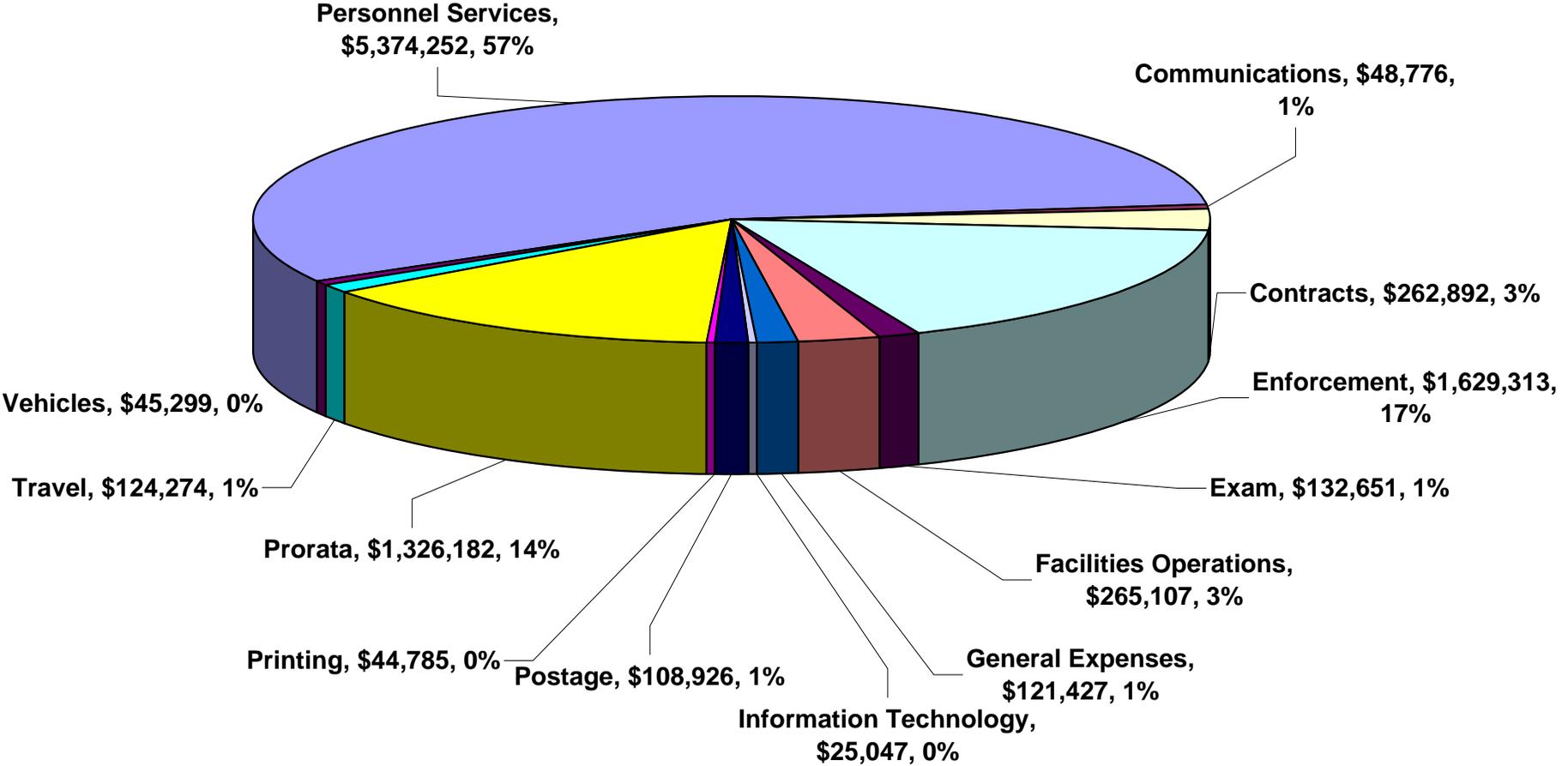
License Fees,
8,650,322, 86%



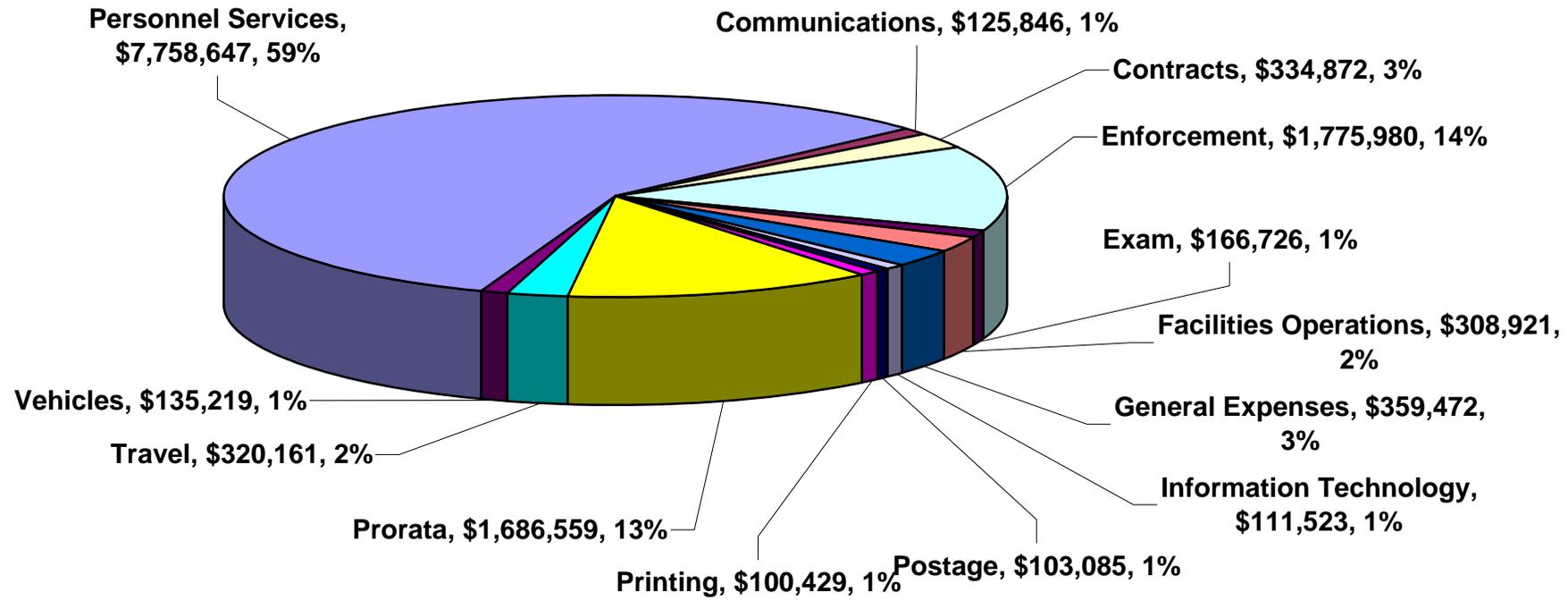
**FY 08/09
Expenditures
FM 13
\$8,426,443**



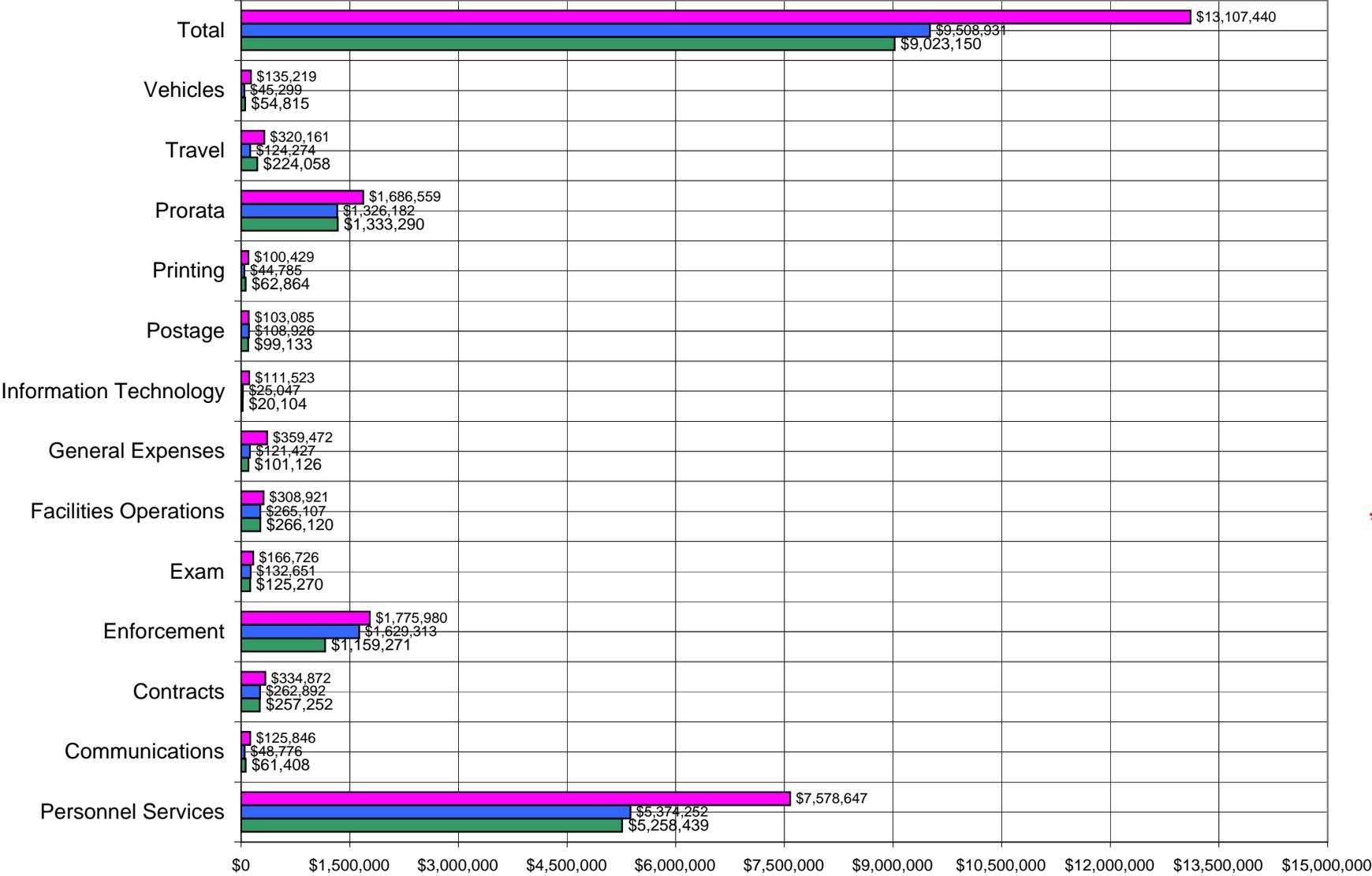
**FY 09/10
Expenditures
FM 12
\$9,508,931**



**FY 10-11
Projected
Expenditures
\$13,107,440**



Expenditure Comparison



FY 08/09

FY 09/10

FY10/11 *

*** Projected Expenditures**

ATTACHMENT 6

Board Member Reimbursement And Expenses

July 1, 2009 through June 30, 2010

Board Members	Attendance Hours	Travel Expenses
Brooks, Ryan	56.50	\$1221.37
Burgard, James	0	\$800.54
Castellblanch, Ramón	88	\$259.73
Goldenberg, Stanley	0	\$311.25
Hackworth, Rosalyn	93.25	\$2042.95
Kajioka, Randy	276.25	\$428.11
Lippe, Gregory	88	\$636.27
Ravnan, Susan	0	\$49.50
Schell, Kenneth	106	\$2243.20
Swart, Robert	32	\$359.60
Veale, Deborah	48	\$553.23
Weisser, Stanley	141.75	\$3072.63
Wheat, Shirley	72	\$213.66
Zee, Tappan	32	\$0.00

ATTACHMENT 7

7/22/2010

Board of Pharmacy Committee Assignments 2010

1. Communication and Public Education
 - a. Chair – Ryan Brooks
 - b. Shirley Wheat
 - c. Rosalyn Hackworth
 - d. Debbie Veale
 - e. Ramon Castellblanch

2. Enforcement Committee
 - a. Chair – Randy Kajioka
 - b. Greg Lippe
 - c. Ramon Castellblanch
 - d. Tappan Zee

3. Legislation/Regulation Committee
 - a. Chair – Ken Schell
 - b. Shirley Wheat
 - c. Rosalyn Hackworth
 - d. Greg Lippe
 - e. Tappan Zee

4. Licensing Committee
 - a. Chair – Greg Lippe
 - b. Debbie Veale
 - c. Ryan Brooks
 - d. Ken Schell

5. Organizational Development
 - a. Stan Weisser
 - b. Randy Kajioka

6. Competency Committee
 - a. Debbie Veale
 - b. Randy Kajioka

7. Ethics Subcommittee
 - a. Ken Schell
 - b. Rosalyn Hackworth

8. USP Standards Reference Material Subcommittee
 - a. Ken Schell

7/22/2010

ATTACHMENT 8

ORGANIZATIONAL DEVELOPMENT COMMITTEE

Goal 5: Achieve the board's mission and goals.

Outcome: An effective organization.

Objective 5.1	Obtain 100 percent approval for identified program needs by June 30, 2011.
Measure:	Percentage approved for identified program needs.
Tasks:	<p>1. Review workload and resources to streamline operations, target backlogs and maximize services.</p> <p><i>1st Qtr 08/09: State government without budget and then facing severe deficit triggers layoffs, hiring freezes, contract suspensions that impact board operations</i></p> <ul style="list-style-type: none"> • <i>Loss of six staff</i> • <i>Suspension of all contracts for two months</i> • <i>Inability to hire for three vacant positions, including two manager positions and three enforcement positions.</i> • <i>Suspend response to all status inquiries in Licensing Unit to focus on application processing.</i> <p><i>3rd Qtr 08/09: Board undergoes 10 percent reduction in staff salaries and two working days furlough each month, effective February 2009 to reduce state expenses.</i></p> <p><i>4th Qtr 08/09: Waivers sought for 2009/2010 contracts to ensure necessary services are available to the board.</i></p> <p><i>1st Qtr 09/10: Staff furloughed three days per month through June 2010. Office to be closed three days per month. Workload expenses examined to ensure maximum effectiveness.</i></p> <p><i>2nd Qtr 09/10: Redirections continue to address workload demands.</i></p> <p><i>3rd Qtr 09/10: Deferred furloughs to address licensing backlog.</i></p> <p><i>4th Qtr 09/10: Deferred furloughs to address licensing backlog.</i></p> <p>2. Develop budget change proposals to secure funding for needed resources.</p> <p><i>1st Qtr 08/09: Board staff prepare legislative Budget Change Proposal to secure one half-time manager position to address workload associated with SB 1441 (Ridley-Thomas) Healing Arts Rehabilitation Program.</i></p> <p><i>2nd Qtr 08/09: Budget Change Proposal on SB 1441 denied due to language in bill preventing staff augmentations.</i></p> <p><i>Board submits Criminal Convictions Unit proposal for 6.5 staff positions to strengthen and expedite review of arrest and conviction notices involving board applicants and licensees, \$600,000 annually.</i></p> <p><i>3rd Qtr 08/09: Criminal Conviction Unit approved and inserted into 2009/2010 Governor's Budget.</i></p> <p><i>4th Qtr 08/09: Staff hired for Criminal Conviction Unit.</i></p> <p><i>2nd Qtr 09/10: Twenty-two enforcement staff added in Governor's 2010/2011 Budget to reduce investigation time.</i></p> <p><i>Two licensing staff proposed to address increase in applications.</i></p> <p><i>4th Qtr 09/10: Board staff prepare budget change proposal for budget year 2011/12.</i></p>

- 3. Perform strategic management of the board through all committees and board activities.**
- 1st Qtr 08/09: Strategic Plan approved at the July 2008 Board Meeting. Staff initiates redesign of quarterly reporting format and incorporates changes to plan.*
- 2nd Qtr 08/09: Quarterly reports provided at board meeting updating Strategic Plan.*
- 3rd Qtr 08/09: Quarterly reports provided at board meeting updating Strategic Plan.*
- 4th Qtr 08/09: Strategic plans for each committee reviewed and revised for 2009/2010. Board will act on new Strategic Plan components at the July 2009 Board Meeting.*
- 1st Qtr 09/10: Quarterly reports provided at board meeting updating Strategic Plan.*
- 2nd Qtr 09/10: Quarterly reports provided at board meeting updating Strategic Plan.*
- 3rd Qtr 09/10: Quarterly reports provided at board meeting updating Strategic Plan.*
- 4th Qtr 09/10: Quarterly reports provided at board meeting updating Strategic Plan. Board committees consider strategic plan changes for fiscal year 2010/11.*
- 4. Manage the board's financial resources to ensure fiscal viability and program integrity.**
- 1st Qtr 08/09: Fee audit initiated then suspended by state budget impasse. Staff successful in seeking exemption and work resumed. Staff complete budget forecast for 2009/2010 workload and revenue.*
- 2nd Qtr 08/09: Fee audit completed.*
- 3rd Qtr 08/09: Fee audit submitted to board at January Meeting; proposed new fees for 2010 identified.*
- 4th Qtr 08/09: Budget examined to identify expenses in future fiscal year.*
- 1st Qtr 09/10: Fee bill (AB1077, Emmerson) enacted to increase statutory maximum in fees, the first fee bill sought by the board since 1987. New fees for nine classes will take effect 1/1/10; other fees will remain essentially the same.*
- Jan. 2010: New fees take effect.*
- 3rd Qtr 09/10: Staff submit a 5% reduction plan to DCA.*
- 4th Qtr 09/10: Budget examined to identify expenses in future fiscal years.*

Objective 5.2	Maintain 100 percent staffing of all board positions.
Measure:	Percentage staffing of board positions.
Tasks:	<ol style="list-style-type: none"> <li data-bbox="367 212 1531 478"> <p>1. Continue active recruitment of pharmacists for inspector positions. <i>1st Qtr 08/09: Board inspectors positions at full staffing.</i> <i>2nd Qtr 09/10: Two inspectors retire. Board secures continuous recruitment for inspector positions, and begins plans to hold a civil service exam for this class.</i> <i>3rd Qtr 09/10: Inspector Exam administered.</i> <i>4th Qtr 09/10: Board inspector retires.</i> <i>July 2010: Second inspector exam administered.</i></p> <li data-bbox="367 478 1531 846"> <p>2. Vigorously recruit for any vacant positions. <i>1st Qtr 08/09: Initiate recruitment for enforcement analyst and legislation and regulation manager.</i> <i>Recruitment suspended on vacant positions pursuant to the Executive Order.</i> <i>Board seeks exemptions to rehire key staff. All exemptions denied.</i> <i>2nd Qtr 08/09: Three staff vacancies exist.</i> <i>3rd Qtr 08/09: One staff vacancy exists.</i> <i>4th Qtr 08/09: All positions filled.</i> <i>2nd Qtr 09/10: One office technician (OT) position vacant, recruiting underway.</i> <i>3rd Qtr 09/10: Begin recruitment for SSA budget person.</i></p> <li data-bbox="367 846 1531 1035"> <p>3. Perform annual performance and training assessments of all staff. <i>1st Qtr 08/09: Complete annual performance review on 25% of staff.</i> <i>3rd Qtr 09/10: Management perform probation reports and annual performance for 20 staff.</i></p>

Objective 5.3	Succession planning and workforce retention.
Measure:	Secure enhanced training of staff to improve job proficiency.
Tasks:	<p>1. Identify training for staff development.</p> <p><i>1st Qtr 08/09: Supervising Inspector Nurse and Assistant Executive Officer accepted into Department of Consumer Affairs Management Academy. Both complete course.</i></p> <p><i>2nd Qtr 08/09: Supervising Inspector Dang accepted into Department of Consumer Affairs Management Academy.</i></p> <p><i>3rd Qtr 08/09: Supervising Inspector Dang completes Academy training. Assistant Executive Officer Sodergren works with Department of Consumer Affairs training office on a mentoring program for the department.</i></p> <p><i>4th Qtr 08/09: Staff participate in team building exercises led by Department of Consumer Affairs training office and TCT.</i></p> <p><i>3rd Qtr 09/10: Two board managers attend supervisory training. One board manager accepted into Department of Consumer Affairs Management Academy. Assistant Executive Officer develops training materials for departments newly developed Enforcement Academy. Enforcement staff attend report writing class.</i></p> <p><i>4th Qtr 09/10: Board manager completes DCA Management Academy. Board staff attends training on new server software.</i></p>

Objective 5.4	Implement 10 strategic initiatives to automate board processes by June 30, 2011.
Measure:	Number of strategic initiatives implemented to automate board processes.
Tasks:	<ol style="list-style-type: none"> <li data-bbox="370 218 1490 323">1. Implement automated applicant tracking (ATS). <i>1st Qtr 08/09: Full implementation of ATS achieved in 2007/2008. Staff continue to seek program changes as necessary.</i> <li data-bbox="370 323 1490 1583">2. Implement online license renewal and application submission features (I-Licensing). <ul style="list-style-type: none"> <li data-bbox="440 365 1490 436"><i>1st Qtr 06/07: Interim Executive Officer Herold put on Department of Consumer Affairs' executive sponsor committee for this project.</i> <li data-bbox="440 436 1490 548"><i>2nd Qtr 06/07: The board meets with design staff to assure necessary program components are part of system specifications. The state's budget allocates \$50,000 this year for development activities.</i> <li data-bbox="440 548 1490 659"><i>3rd Qtr 06/07: Board executive officer continues as a member of the department's Executive Steering Committee as an executive sponsor. Work is focused on securing vendors for the project. Staff changes at DCA may delay implementation.</i> <li data-bbox="440 659 1490 842"><i>4th Qtr 06/07: Board executive officer continues as a member of the department's Executive Steering Committee as an executive sponsor. Work is focused on securing vendors for the project. Project delayed due to contracting issues for service vendors six to nine months. DCA hires additional staff for I-Licensing project. Implementation for board programs delayed until mid-2009.</i> <li data-bbox="440 842 1490 995"><i>1st Qtr 07/08: Board executive officer continues as a member of the department's Executive Steering Committee as an executive sponsor. Work is focused on securing vendors for the project. Project delayed due to contracting issues for service vendors six to nine months due to loss of all key DCA staff.</i> <li data-bbox="440 995 1490 1178"><i>2nd Qtr 07/08: Licensing staff review all board applications to conform to system requirements. Integrated work team formed of board staff to work closely with I-Licensing conversion, a major workload. DCA's new staff in place, work on securing I-Licensing vendor resumes. Executive Officer continues on executive steering committee.</i> <li data-bbox="440 1178 1490 1249"><i>3rd Qtr 07/08: Department works on securing vendors. Board is up to date in performing implementation components.</i> <li data-bbox="440 1249 1490 1323"><i>4th Qtr 07/08: Delays continue to plague I-Licensing. New implementation date for board is now mid 2010.</i> <li data-bbox="440 1323 1490 1396"><i>1st Qtr 08/09: Board executive officer attends Steering Committee Meeting and conveyed boards concerns about continued delays of implementation.</i> <li data-bbox="440 1396 1490 1470"><i>3rd Qtr 08/09: Project undergoes additional delays due to need to revise Request for Proposal and new staff hired to implement project.</i> <li data-bbox="440 1470 1490 1543"><i>4th Qtr 08/09: Department of Consumer Affairs hires new staff to implement project. Request for Proposal prepared for release in next fiscal year.</i> <li data-bbox="440 1543 1490 1583"><i>2nd Qtr 09/10: Project rethought, revamped, and re-contracted.</i> <li data-bbox="370 1583 1490 1915">3. Integrate telephone features to improve board services without adding staff resources. <ul style="list-style-type: none"> <li data-bbox="440 1667 1490 1740"><i>1st Qtr 06/07: Phone system modified to allow "zeroing out" early in telephone message so consumers can reach a live operator more quickly.</i> <li data-bbox="440 1740 1490 1843"><i>3rd Qtr 07/08: Added Call Pilot feature to licensing and renewal phone lines that automatically places a copy of the call log into the appropriate staff's email. This saves time and improves customer service.</i> <li data-bbox="440 1843 1490 1915"><i>4th Qtr 07/08: Conference line used to coordinate inspector staff meetings without need to travel to meeting.</i>

2nd Qtr 09/10: Staff work with the department to secure reports to better manage phone systems. Work will continue in next quarter.

3rd Qtr 09/10: Management staff continue to advocate changes to telephone system to better meet caller needs.

4. Use the department's newly created "ad hoc" system to generate data for reports.

1st Qtr 07/08: Three staff trained in using enforcement or licensing reports.

2nd Qtr 07/08: Board begins to use reports for management.

4th Qtr 07/08: Staff use reports to:

- Track unpaid citations*
- Track cite and fine aging*
- Find citations by violation type, such as prescription errors*
- Pull special cite and fine statistics upon request*
- Pull list of recently licensed pharmacists for wall certificates*
- Pull list of change of ownership applications for received dates*
- Develop ad hoc for licensing applicant tracking*
- Pull pending applications list for application inventory*
- Pull licensing information for sites required to report to CURES and send to the CURES vendor weekly*
- Pull enforcement case statistical data regarding received, pending and closed cases to report workload and status information monthly to management and quarterly to the board*
- Pull various enforcement statistical reports used to compile the Boards annual statistical profile report and quarterly strategic plan updates*
- Pull special ad hoc reports created to gather information specifically requested under the public records act*
- Pull case aging data for application investigations, complaint investigations and AC cases*

3rd Qtr 09/10: Several staff trained in report functionality.

5. Secure equipment needed to perform staff duties optimally.

1st Qtr 08/09: Staff work with department to eliminate delay resulting from staff shortages in department's IT, delaying production of a new "image" of software for new computers.

2nd Qtr 08/09: Completed rollout of new computers.

4th Qtr 08/09: New PDAs purchased for some staff with worn out equipment.

2nd Qtr 09/10: Office reconfigured to establish workspace for 5 new positions.

4th Qtr 09/10: Board submitted equipment request to department for new staff.

6. Implement automated program for staff-conducted drug audits.

4th Qtr 07/08: Automated program developed for drug audits initiated by inspectors.

1st Qtr 08/09: Automated program deployed to office staff assisting with drug audits.

7. Implement template for drug audits completed by pharmacies.

8. Develop template for hospital inspections to identify recalled heparin. (Completed April 2008)

9. Participate in Department of Consumer Affairs (DCA) pilot program to achieve scanning of paper files.

1st - 4th Qtrs 08/09: Staff participate in planning meetings with other DCA staff.

1st - 2nd Qtrs 09/10: Staff participate in planning meetings with other DCA staff.

4th Qtr 09/10: Staff approve feasibility study report developed by the department.

Objective 5.5	Provide for communication venues to communicate within the board by June 30, 2011.
Measure:	Number of communication venues to communicate within the board.
Tasks:	<ol style="list-style-type: none"> <li data-bbox="367 218 1495 285">1. Continue the Communication Team to improve communication among staff and host biannual staff meetings. <i>2nd Qtr 08/09: TCT hosts staff meeting, team building and holiday party.</i> <i>4th Qtr 08/09: TCT hosts staff meeting and team building.</i> <i>2nd Qtr 09/10: TCT hosts staff meeting for Sacramento staff, Inspectors have team meetings</i> <li data-bbox="367 407 1455 432">2. Continue Enforcement Team meetings with board members and enforcement staff. <li data-bbox="367 443 1495 510">3. Convene annual inspector meetings to ensure standardized investigation and inspection processes, law and practice updates and earn continuing education credit. <i>1st Qtr 08/09: Inspector workshop scheduled.</i> <i>2nd Qtr 08/09: Inspector meeting convened with Department of Public Health Consultants. Inspectors have staff meetings for training.</i> <i>4th Qtr 08/09: TCT hosts staff meeting and team building training.</i> <i>1st Qtr 09/10: Inspectors meeting where aggressive timelines for case completions put in place.</i> <i>3rd Qtr 09/10: Inspector meeting held in conjunction with report writing training.</i> <i>4th Qtr 09/10: One day inspector meeting convened.</i> <li data-bbox="367 814 1487 989">4. Transition from paper packets for board meeting materials to e-copies. <i>1st-4th Qtrs 08/09: Board members begin transition with some members requesting only e-copies of these packets.</i> <i>July 2009: Budget restrictions prevent the board from purchasing paper. Board packets released in e-copy form, saving upwards of five boxes of paper.</i> <li data-bbox="367 999 1422 1325">5. Explore electronic voting of mail ballots for disciplinary decisions. <i>2nd Qtr 08/09: Meetings convened with Department of Consumer Affairs Information Technology staff to develop system.</i> <i>1st Qtr 09/10: Meetings resume to develop and pilot test system. Software licenses purchased.</i> <i>2nd Qtr 09/10: Approval from outside agencies needed before purchase of software can occur.</i> <i>3rd Qtr 09/10: Staff advised and order approved. Software not yet received.</i> <i>4th Qtr 09/10: Software received and testing initiated.</i>

Objective 5.6	Annually conduct at least two outreach programs where public policy issues on health care are being discussed.
Measure:	Number of outreach programs conducted in one year.
Tasks:	<ol style="list-style-type: none"> 1. Outreach programs 2006/2007. <i>Convene subcommittee on Medicare Part D implementation.</i> <i>Convene Workgroup to implement e-pedigree.</i> <i>Host the National Association of Boards of Pharmacy District 7 & 8 Meeting in California.</i> <i>Attends and presents at annual association meetings.</i> 2. Outreach programs 2007/2008. <i>Continue subcommittee on Medicare Part D implementation.</i> <i>Continue workgroup to implement e-pedigree.</i> <i>Initiates public campaign on SB 472 (Corbett) - Standardization of the prescription label.</i> <i>Attends and presents at annual association meetings.</i> 3. Outreach programs 2008/2009. <i>July 2008 Board Meeting focuses on medication errors and prevention.</i> <i>Presentation on sharps disposal before the California Integrated Waste Management Board to a statewide audience in November 2008 and February 2009.</i> <i>Nationwide presentations on implementation of e-pedigree.</i> 4. Professionals Achieving Consumer Trust Summit - November 2008. <i>Board sponsors forum on e-prescribing.</i> <i>Board hosts conference with experts presenting information designing patient-centered prescription container labels.</i> 5. Board provides three presentations at the annual California Pharmacists Association Meeting. 6. Workgroup on E-Pedigree holds March 2009 meeting where presentations made on FDA proposed standards for a unique identification number for serialization, Congressman Buyer's Office on federal legislation, and standards setting by GS1. 7. Executive Officer attends National Association of Boards of Pharmacy Meeting with other state boards of pharmacy. 8. Executive Staff attend Consumer Advisory Councils day-long presentation in San Francisco on substance abuse recovery programs for health care licensees.

9. Outreach programs 2009/2010.

Executive Officer gives a presentation on new laws and regulations at the California Society of Health Systems Pharmacists (CSHP) Annual Meeting.

Board Inspectors provide a presentation to the California Pharmacists Association (CPhA) as part of "Compounding Day".

Supervising Inspector Nurse provides information to national narcotics officers and officials at the National Association of Controlled Substances Authority Meeting.

Executive Officer Herold, Board President Schell, and Supervising Inspector Nurse attended California Integrated Waste Management Board Conference and advocated for use of their guidelines for pharmacies and other sites establishing drug "take back" programs.

Executive Officer Herold and several Board Members attended a conference on e-prescribing for practitioners and regulators, hosted by the California Healthcare Foundation.

Executive Officer Herold presents information on e-pedigree to the Healthcare Distribution Management Associations Track and Trace national meeting.

Executive Officer Herold and Board President Schell provides information to subcommittee on drug distribution in hospital meeting hosted by the California Hospital Association.

Executive Officer Herold provides information to CPhA's Long-Term Care Association on prescription container labels.

Executive Officer Herold provides information about drug "take back" to Local 20 Rural County Government representatives.

Presentation on the Medication Error Reporting Systems in California Hospitals, a

Presentation by Loriann De Martini, Pharm.D, California Department of Public Health

Presentation by Katherine Ellis of the Department of Justice on the Controlled Substance

Utilization Review and Evaluation System Online Access for Pharmacies

Objective 5.7	Perform succession planning to ensure continuity for board operations during staff retirements.
Measure:	Number of staff trained for advanced duties and promoted.
Tasks:	

Objective 5.8	Respond to all public record requests within 10 days.																																																																																																																																																	
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