



BOARD MEETING MINUTES

May 19 - 21, 2021

**3127 Smoketree Court
Raleigh, North Carolina**

General Session Minutes of the North Carolina Medical Board (NCMB) Meeting held May 19 – 21, 2021.

The May 19-21, 2021 meeting of the North Carolina Medical Board was held at 3127 Smoketree Court, Raleigh, NC 27604, and video conference. Venkata R. Jonnalagadda, President, called the meeting to order. Board members in attendance were: John W. Rusher, MD, President-Elect; Michaux R. Kilpatrick, MD; Secretary/Treasurer; Shawn P. Parker, JD; Varnell D. McDonald-Fletcher, PA-C; Christine M. Khandelwal, DO; Jerri L. Patterson, NP; W. Howard Hall, MD; Joshua D. Malcolm, JD; Damian F. McHugh, MD; Devdutta G. Sangvai, MD, Mr. William M. Brawley and Anuradha Rao-Patel, MD

PRESIDENTIAL REMARKS

Dr. Venkata R. Jonnalagadda reminded the Board members of their duty to avoid conflicts of interest with respect to any matters coming before the Board as required by the State Government Ethics Act. Reported conflicts were included within individual committee reports.

ANNOUNCEMENTS and UPDATES

Management introduced new staff and recognized staff milestone anniversaries.

PRESENTATIONS

Racial Equity Institute provided their “Groundwater” training to Board members and staff.

NORTH CAROLINA PHYSICIAN HEALTH PROGRAM REPORTS (NCPHP)

A motion passed to close the session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, and 90-21.22 of the North Carolina General Statutes and not considered a public record within the meaning of Chapter 132 of the General Statutes and/or to preserve attorney-client privilege.

Dr. Jordan gave the PHP Compliance Committee report. The specifics of this report are not included because the information contained in the report is confidential and non-public.

A motion passed to return to open session.

Dr. Gaither presented the PHP Physician Wellness report.

NCMB ATTORNEY’S REPORT

Mr. Brian L. Blankenship, Deputy General Counsel and Mr. Thomas W. Mansfield, Chief Legal Officer, gave the Attorney’s Report on Friday, May 21st, 2021.

Mr. Blankenship and Mr. Mansfield updated the Board on the schedule of upcoming hearings, hearing assignments and rule activity of the Board.

A motion passed to close the session pursuant to N.C. Gen Stat. §143-318.11(a) to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, 90-21.22 of the North Carolina General Statutes and not considered public records within the meaning of Chapter 132 of the General Statutes and/or to preserve attorney/client privilege.

Information regarding outside litigation matters and statistical information regarding work performed by the Board's Legal Department since the last Attorney's Report was presented.

A motion was passed to return to open session.

That concluded the Attorney's Report.

Legislative and Government Relations Update

On Friday, May 21st, 2021, the Board's Legislative Liaisons, Mr. Thomas W. Mansfield, Chief Legal Officer and Ms. Evelyn C. Contre, Chief of Communications and Board Attorney Elizabeth Meredith provided a legislative update to the Board.

The Board accepted the report as information.

Strategic Priorities Report

The Board's CEO, R. David Henderson, provided a report on Strategic Priorities, as follows:

Three goals remain for 2021.

The first goal is: "Continue and enhance other outreach efforts to build on recent success and stakeholder appreciation." The first activity is promoting vaccination efforts across the state. Staff continues to do that particularly as we are moving to recruiting and promotion efforts. The other activity is improving the consumer resources section of the website. Staff is working on a "Look up a Doctor" video to promote our licensee information page. In addition, staff is working on an updated recording of the consumer complaints tutorial which, among other things, will explain the limits of the Board's authority and generally try to manage the expectations of a prospective complainant.

The second goal is: "Build a foundation for a data analytics program to support data-informed regulation and focused licensee education." Staff will engage a consultant to help with this work and this work is expected to commence in July.

The third goal is: "Engage stakeholders and influencers by positioning NCMB as a trusted subject matter expert." The first activity has been completed: staff has identified the vaccination effort and the Interstate Medical Licensure Compact as two topics the Board is uniquely qualified. The next activity is to create communication plans related to those topics. The vaccination communication effort is underway. Regarding the pending Compact bill, staff has developed talking points and prep materials and has arranged meetings to discuss the Compact with key legislators.

Work will continue on these goals through the end of the calendar year.

NCMB COMMITTEE REPORTS

Executive Committee Report

Members present via video/teleconference were: Venkata R. Jonnalagadda, MD, Chairperson; John W. Rusher, MD; Michaux R. Kilpatrick, MD; Varnell McDonald-Fletcher, PA-C, and Shawn P. Parker, JD.

Financial Update

a. Year-To-Date Financials

The Committee reviewed the following financial reports through April 30, 2021: Balance Sheet, Profit & Loss versus Budget, and the Profit & Loss Comparison.

Committee Recommendation: Accept the financial information as reported.

Board Action: Accept Committee recommendation. Accept the financial information as reported.

b. Investment Account

The Committee reviewed the investment statements for March and April 2021.

Committee Recommendation: Accept the investment statements as reported.

Board Action: Accept Committee recommendation. Accept the investment statements as reported.

c. Smoketree Court Office Purchase/Renovation: Budget to Actual Report

The Committee reviewed the Smoketree Court Budget to Actual Report which compares budgeted expenses to actual expenses for the purchase, design, and renovation of the Board's new office. Actual expenses were within one percent of the budgeted amount.

Committee Recommendation: Accept the Budget to Actual Report as presented.

Board Action: Accept Committee recommendation. Accept the Budget to Actual Report as presented.

d. Proposed Budget Modification

An Investigative Coordinator position is needed prior to the next budget cycle to address a significant increase in work in the Field Investigations Section and to help address burnout concerns. This position will report to and support the Field Investigations Administrative Manager. The Investigative Coordinator will be responsible for the daily management of support to the Field Investigations Section. The position will be responsible for the Investigative Interview process,

providing investigative support to field investigators, and performing analysis, review, and recommendations of actions to be reported to the case management system.

Committee Recommendation: Approve the proposed temporary position.

Board Action: Accept Committee recommendation. Approve the proposed temporary position.

e. Fiscal Analysis: In-Person vs. Virtual Meetings

New Business:

a. NCMB Board Retreat

The Board will hold a retreat August 7 – 8 at the new office. The Committee discussed a draft agenda that includes training on assertive communication (Saturday) and short presentations on a variety of licensing and regulatory topics (Sunday).

Committee Recommendation: Accept as Information.

Board Action: Accept Committee recommendation. Accept as information.

Policy Committee Report

Members present were: Christine M. Khandelwal, DO, Chairperson; Mr. William M. Brawley; Damian F. McHugh, MD; Devdutta G. Sangvai, MD; and Anuradha Rao-Patel, MD

Old Business:

a. Position Statements Review Workgroup

The Committee and staff reviewed the revisions and comments made by Board Members and staff in Sections 5 and 6 of the draft compendium. The Committee agreed to accept the non-substantive and stylistic revisions throughout. The Committee and staff then reviewed each comment or substantive change and determined whether to accept those revisions. The Committee agreed to table substantive changes to Position Statement 5.1.1 (Office-Based Procedures) and present the Position Statement to relevant stakeholders for feedback. The Committee also tabled Position Statement 6.1.4 (Clinician Obligation to Complete a Certificate of Death) and will review that Position Statement at the July 2021 meeting. The Committee and staff will review sections 7 (Licensees & the Health of the Community) and 8 (Professional Self-Regulation) of the draft compendium prior to July and bring back comments, edits, and suggestions at the July 2021 meeting.

Committee Recommendation:

1. Accept the recommended non-substantive and stylistic changes to sections 5 and 6, update the individual position statements on the website to reflect those changes, and incorporate the changes in the draft compendium to be published after all sections have been reviewed.

2. Table substantive changes to Position Statement 5.1.1 (Office-Based Procedures) and present the Position Statement to relevant stakeholders for feedback and bring comments back to the Committee for further review.
3. Table Position Statement 6.1.4 (Clinician Obligation to Complete a Certificate of Death) and Committee and staff to review that Position Statement at the July 2021 meeting.
4. Committee and staff to review the position statements in sections 7 (Licensees & the Health of the Community) and 8 (Professional Self-Regulation) and bring back comments, edits, and suggestions at the July 2021 meeting.

Board Action: Accept Committee recommendation.

1. Accept the recommended non-substantive and stylistic changes to sections 5 and 6, update the individual position statements on the website to reflect those changes, and incorporate the changes in the draft compendium to be published after all sections have been reviewed.
2. Table substantive changes to Position Statement 5.1.1 (Office-Based Procedures) and present the Position Statement to relevant stakeholders for feedback and bring comments back to the Committee for further review.
3. Table Position Statement 6.1.4 (Clinician Obligation to Complete a Certificate of Death) and Committee and staff to review that Position Statement at the July 2021 meeting.
4. Committee and staff to review the position statements in sections 7 (Licensees & the Health of the Community) and 8 (Professional Self-Regulation) and bring back comments, edits, and suggestions at the July 2021 meeting.

Licensing Committee Report

Members present were: Varnell D. McDonald-Fletcher, PA-C, Chairperson; Jerri L. Patterson, NP; W. Howard Hall, MD; Devdutta G. Sangvai and Joshua D. Malcolm

New Business

- a. Dr. Sergio Mendoza Lattes, MD and Attorney John Taylor will briefly speak to the Board about the open session item below.

Request that the examination required to obtain active Board Certification be considered an examination accepted by the North Carolina Medical Board pursuant to N.C. Gen. Stat § 90-10.1

Committee Recommendation: Accept the examination required to obtain active Board Certification be considered an examination accepted by the North Carolina Medical Board to N.C. Gen. Stat § 90-10.1.

Board Action: Accept Committee recommendation. Accept the examination required to obtain active Board Certification be considered an examination accepted by the North Carolina Medical Board to N.C. Gen. Stat § 90-10.1.

License Interview Report

A motion passed to close the session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-

16, and 90-21.22 of the North Carolina General Statutes and not considered a public record within the meaning of Chapter 132 of the General Statutes and/or to preserve attorney-client privilege.

Five licensure interviews were conducted. A written report was presented for the Board's review. The Board adopted the Committee's recommendation to approve the written report. The specifics of this report are not included because these actions are not public information.

A motion passed to return to open session.

Advanced Practice Providers and Allied Health Committee Report

Members present were: Jerri L. Patterson, NP, Chairperson; Anuradha Rao-Patel, MD; Varnell McDonald-Fletcher, PA-C and William M. Brawley

Old Business:

- a. Marcus Jimison, Sr. Board Attorney gave an update on supervision of physician assistants in post graduate training programs.

Committee Recommendation: Accept as information.

Board Action: Accept Committee recommendation. Accepted as information.

- b. Final approval of rule changes – M. Jimison

- 21 NCAC 32M .0109 – Prescribing Authority
 - 21 NCAC 32M .0117 – Reporting Criteria

Committee Recommendation: Approve final rules as written.

Board Action: Accept Committee recommendation. Approve final rules as written.

New Business:

- a. Physician Assistant Advisory Meeting – Impact of suspension of quality improvement meetings in 2020, SL 2020-3, Section 3D.5.(a) and (b) – Meg Beal, NCAPA Board Member

Committee Recommendation: Accept as information.

Board Action: Accept Committee recommendation. Accepted as information.

- b. NC Office of Emergency Medicine – Additions to Scope of Practice for emergency medical technicians and paramedics – James (Tripp) Winslow, MD, Medical Director NC Office of EMS

Committee Recommendation: Present to full Board for further discussion.

Board Action: Referred the matter back to the staff for further clarification.

Disciplinary (Complaints) Committee Report

Members present were: Shawn P. Parker, JD, Chairperson; W. Howard Hall, MD; Christine M. Khandelwal, DO; Joshua D. Malcolm, JD; Damian F. McHugh, MD; Jerri L. Patterson, NP; and Devdutta G. Sangvai, MD

A motion passed to close the session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, and 90-21.22 of the North Carolina General Statutes and not considered a public record within the meaning of Chapter 132 of the General Statutes and/or to preserve attorney-client privilege.

The Disciplinary (Complaints) Committee reviewed 47 complaint cases. A written report was presented for the Board's review. The Board adopted the Committee's recommendation to approve the written report. The specifics of this report are not included because these actions are not public.

A motion passed to return to open session.

Disciplinary (Malpractice) Committee Report

Members present were: Shawn P. Parker, JD, Chairperson; W. Howard Hall, MD; Christine M. Khandelwal, DO; Joshua D. Malcolm, JD; Damian F. McHugh, MD; Jerri L. Patterson, NP and Devdutta G. Sangvai, MD

A motion passed to close the session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, and 90-21.22 of the North Carolina General Statutes and not considered a public record within the meaning of Chapter 132 of the General Statutes and/or to preserve attorney-client privilege.

The Disciplinary (Malpractice) Committee reviewed 46 cases. A written report was presented for the Board's review. The Board adopted the Committee's recommendation to approve the written report. The specifics of this report are not included because these actions are not public information.

A motion passed to return to open session.

Disciplinary (Department of Health and Human Services, (DHHS) Committee Report

Members present were: Shawn P. Parker, JD, Chairperson; W. Howard Hall, MD; Christine M. Khandelwal, DO; Joshua D. Malcolm, JD; Damian F. McHugh, MD; Jerri L. Patterson, NP and Devdutta G. Sangvai, MD

A motion passed to close the session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, and 90-21.22 of the North Carolina General Statutes and not considered a public record within the meaning of Chapter 132 of the General Statutes and/or to preserve attorney-client privilege.

The Disciplinary (DHHS) Committee reported on two cases. A written report was presented for the Board's review. The Board adopted the Committee's recommendation to approve the written report. The specifics of this report are not included because these actions are not public information.

A motion passed to return to open session.

Disciplinary (Investigative) Committee Report

Members present were: Shawn P. Parker, JD, Chairperson; W. Howard Hall, MD; Christine M. Khandelwal, DO; Joshua D. Malcolm, JD; Damian F. McHugh, MD; Jerri L. Patterson, NP and Devdutta G. Sangvai, MD

A motion passed to close the session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, and 90-21.22 of the North Carolina General Statutes and not considered a public record within the meaning of Chapter 132 of the General Statutes and/or to preserve attorney-client privilege.

The Disciplinary (Investigative) Committee reviewed 24 investigative cases. A written report was presented for the Board's review. The Board adopted the recommendations and approved the written report. The specifics of this report are not included because these actions are not public information.

A motion passed to return to open session.

Disciplinary (Compliance) Committee Report

Members present were: Shawn P. Parker, JD, Chairperson; W. Howard Hall, MD; Christine M. Khandelwal, DO; Joshua D. Malcolm, JD; Damian F. McHugh, MD; Jerri L. Patterson, NP and Devdutta G. Sangvai, MD

A motion passed to close the session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, and 90-21.22 of the North Carolina General Statutes and not considered a public record within the meaning of Chapter 132 of the General Statutes and/or to preserve attorney-client privilege.

The Disciplinary (Compliance) Committee reviewed 12 investigative cases. A written report was presented for the Board's review. The Board adopted the recommendations and approved the written report. The specifics of this report are not included because these actions are not public information.

Investigative Interview Report

A motion passed to close the session pursuant to Section 143-318.11(a) of the North Carolina General Statutes to prevent the disclosure of information that is confidential pursuant to Sections 90-8, 90-14, 90-16, and 90-21.22 of the North Carolina General Statutes and not considered a public record within the meaning of Chapter 132 of the General Statutes and/or to preserve attorney-client privilege.

Six interviews were conducted. A written report was presented for the Board's review. The Board adopted the recommendations and approved the written report. The specifics of this report are not included because these actions are not public information.

A motion passed to return to open session.

Outreach Committee Report

Members present were: Damian F. McHugh, MD, Chairperson; Joshua D. Malcolm, JD; Shawn P. Parker, JD and William M. Brawley

Old Business:

- a. Update on presentations
 - i. Public and professional presentations
 - i. Regulatory Immersion Series events

The Chief Communications Officer and Communications Director gave a brief update of NCMB's current efforts to reach public and professional audiences. The Committee Chair encouraged all Board Members to reach out within their own professional and educational networks to seek possible speaking opportunities for NCMB. Anyone who identifies a possible speaking opportunity should reach out to the Communications Director. The Communications Director also provided an update on NCMB's progress in expanding its mock disciplinary committee experience – now known as the Regulatory Immersion Series (RImS) – to additional medical schools and physician assistant (PA) programs. NCMB has scheduled upcoming RImS presentations at Duke (PA program), Campbell University (PA program) and at East Carolina University (PA program) and is in talks with several more interested medical and PA schools. Staff are planning training and prep sessions to ensure that NCMB has enough staff and Board Members familiar with the RImS curriculum and format to meet demand for the course.

Committee recommendation: Accept as information.

Board action: Accept Committee recommendation. Accept as information.

- b. Abuse and Mistreatment Research
 - i. Current information
 - ii. Discussion about Licensee education needs

The Chief Communications Officer gave an overview of staff research into available resources on child abuse prevention (with an emphasis on clinician reporting of suspected abuse), elder abuse and neglect and intimate partner violence. Of these topics, NCMB has featured content, either on its website or in the Forum licensee newsletter, on the topic of child abuse prevention/reporting only. The Committee discussed the appropriate role of NCMB in raising licensee and/or public awareness or these important issues. It was suggested that NCMB should continue working with stakeholder groups that are experts in the field of abuse and neglect to identify key messages that NCMB can push out to its licensees in each of the mentioned topics. The Committee Chair noted that NCMB should be able to use its existing communications channels, including the website, the

Forum newsletter, the MedBoard Matters podcast and social media, to good effect to highlight important messages related to abuse and neglect. Due to limited time, the Committee cut further discussion short.

Committee recommendation: Direct staff to proceed with efforts to highlight key messages related to abuse and neglect, and report back to the Committee as needed.

The Committee defers to the full Board for action on asking staff to research information on recommendations #3 (identifying training gaps on recognizing signs of abuse and neglect, reporting requirements, and available resources) and #4 (position statement on recognizing and reporting elder abuse and recognizing and responding to intimate partner violence) and bring the information back to the committee for further discussion.

Board action: Direct staff to proceed with efforts to highlight key messages related to abuse and neglect. In addition, direct staff to work with stakeholders to identify training gaps related to recognizing and reporting abuse and neglect; direct staff to research content for a possible position statement that addresses recognizing and reporting elder abuse/neglect and intimate partner violence; Report back to the Outreach Committee on both matters.

New Business:

- a. Controlled Substances CME
 - i. Overview of recent history
 - ii. Current resources and needs
 - iii. Discussion about opportunities for further efforts

The Chief Communications Officer discussed a possible opportunity for NCMB to create additional CME content for licensees who prescribe controlled substances. Administrative rules that took effect in 2017 required all NCMB licensees (physicians and PAs) who prescribe controlled substances to complete mandatory CME in opioid prescribing during each CME cycle. NCMB successfully collaborated with Wake AHEC when the requirement was established, which resulted in a statewide training initiative that included in person panel sessions and a recorded webinar presented at no cost to prescribers. Committee members noted that the previous initiative was very well received. Due to limited time, further discussion was cut short.

Committee recommendation: Accept as information. Defer to the full Board for action.

Board action: Direct staff to research training gaps in controlled substances prescribing CME and assess feasibility of partnering with reputable CME providers to create new free or low cost CME content that could be completed to satisfy the existing CME requirement for NC controlled substances prescribers.

Discussion on the following two items were deferred until the July 2021 meeting of the Outreach Committee.

- b. Patient Education – Informed Consent Resource
 - i. Discussion about what type of information patients need/questions to ask

- c. Misc other outreach initiatives
 - i. Update on recent activities of the Communications Department

Wellness and Burnout Workgroup

Members present were: Christine M Khandelwal DO, Chairperson; Damian F. McHugh, MD; and W. Howard Hall, MD

Old Business:

Dr. Khandelwal opened the meeting requesting review of the previously identified workgroup short-term goals.

- a. The memorandum summarizing the timeline and activity related to the Board's license application question revisions was reviewed.

Workgroup Recommendation: Accept as information

Board Action: Accept Workgroup recommendations. Accept as information.

- b. The FSMB recommendations in support of the role of state medical boards in reducing burnout were reviewed. The current NCMB status in each of the 10 areas along with recommendations for action were reviewed. Dr. McHugh provided a review of website resources. Staff to provide additional data and information as well as discuss with key stakeholders.

Workgroup Recommendation: Accept as information

Board Action: Accept Workgroup recommendations. Accept as information.

- c. Reference made to the memoranda on State Survey on Physician Wellness and Burnout. Also, spreadsheet on 50 State Wellness Survey - to be reviewed independently and retained as a resource in the WBW resource tab.

Workgroup Recommendation: Accept as information

Board Action: Accept the recommendations of the Workgroup. Accept as information.

ADJOURNMENT

The Medical Board adjourned at 12:47 p.m. on Friday, May 21, 2021.

The next meeting of the Medical Board is scheduled for July 14 - 16, 2021.



Michaux R. Kilpatrick, MD; Secretary/Treasure