



BOARD MEETING MINUTES

November 16-18, 2022

**3127 Smoketree Court
Raleigh, North Carolina**

General Session Minutes of the North Carolina Medical Board (NCMB) Meeting held November 16-18, 2022.

The November 16-18, 2022 meeting of the North Carolina Medical Board was held at 3127 Smoketree Court, Raleigh, NC 27604. Michaux R. Kilpatrick, MD, PhD; President, called the meeting to order. Board members in attendance were: Christine M. Khandelwal, DO; President-Elect; Devdutta G. Sangvai, MD; Secretary/Treasurer; Shawn P. Parker, JD; W. Howard Hall, MD; Joshua D. Malcolm, JD; William M. Brawley; Anuradha Rao-Patel, MD; Sharona Y. Johnson, PhD, FNP-BC; Miguel A. Pineiro, PA-C, MHPE; Melinda H. Privette, MD, JD; Robert L. Rich, Jr., MD; John W. Rusher, MD, JD; Past President.

PRESIDENTIAL REMARKS

Dr. Michaux R. Kilpatrick 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.

RECOGNITION OF JOHN W. RUSHER, MD

Dr. Kilpatrick read the following resolution in honor of Dr. Rusher's term as President of the NC Medical Board:

RESOLUTION
In Recognition of the Distinguished Service Rendered by
JOHN W. RUSHER, MD, JD
President of the North Carolina Medical Board
November 1, 2021 - October 31, 2022

A BOARD-CERTIFIED PEDIATRICIAN, DR. JOHN W. RUSHER was appointed to the Board by Governor Roy Cooper in 2017 and was reappointed to a second term in 2020. Dr. Rusher was elected **PRESIDENT-ELECT** in 2020 and was installed as **BOARD PRESIDENT** in 2021.

Dr. Rusher has **CHAired** the Executive Committee, the Disciplinary Committee and the Diversity Workgroup, and served on the Board's APP/AHC, Licensing, Outreach and Policy committees, as well as on the Board of Directors for the NC Professionals Health Program.

As **PRESIDENT**, Dr. Rusher has led the Board with **DIGNITY** and **RESOLVE**. His term was characterized by his **STEADFAST COMMITMENT** to the Board's work, as well as his unflappable **DEMEANOR**, consummate **PROFESSIONALISM**, and sincere **APPRECIATION** for the contributions of **BOARD STAFF**. Dr. Rusher is a **CALM** and **COURTEOUS** colleague and a leader who has the **CONFIDENCE** to lead without fanfare.

MAJOR CONTRIBUTIONS AS PRESIDENT INCLUDE:

- Authoring four President's Messages in the Board's *Forum* newsletter, including a message framing licensee wellness as a patient safety issue, a compassionate entreaty to licensee struggling with

substance use or mental health issues to seek treatment early; a celebration of the rapid growth of NCMB's Regulatory Immersion Series program that teaches ethics and professionalism to medical and PA students, and a reflection on how NCMB is living up to its aspiration of being a progressive and proactive leader in medicine;

- Leading NCMB's transition back to in-person meetings, while incorporating some of the efficiencies and conveniences developed during the organization's pandemic-motivated foray into virtual Board Meetings and Board Hearings;
- Supporting NCMB's Diversity & Inclusion initiative and ensuring that the organization continues to meet commitments to regular train both Board Members and NCMB staff in this area;
- Expanding the Board's collaboration with health educators and subject matter experts in the state by overseeing efforts to develop original continuing medical education in elder neglect and abuse and intimate partner violence, and developing a strategy to raise awareness among licensees of educational opportunities in recognizing and reporting child neglect and maltreatment;
- Presiding over a Planning Retreat that provided Board Members and senior NCMB staff the opportunity for in-depth exploration of important issues in medicine and medical regulation to enhance NCMB's ability to be an active participant in national and statewide discussions;
- Supporting the Board's professional outreach program by representing NCMB as a featured speaker at meetings and events.

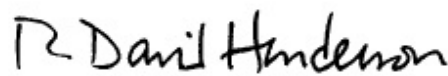
As **BOARD PRESIDENT**, Dr. Rusher demonstrated a **RESOURCEFULNESS** and **DETERMINATION** to leave the organization better than he found it that calls to mind the words of Theodore Roosevelt, the 26th President of the United States, who said, "*Do what you can, where you are, with what you have.*" The Board is **INDEBTED** to Dr. Rusher for his **PERSONAL SERVICE** and **DEEP COMMITMENT** to the medical profession and to the people of North Carolina.

In conclusion, the North Carolina Medical Board hereby expresses its **SINCERE GRATITUDE** to John W. Rusher, MD, JD, for his exemplary service and publicly recognizes the **OUTSTANDING LEADERSHIP** he has provided as the Board's President.

Approved by acclamation this 17th day of November 2022.

NORTH CAROLINA MEDICAL BOARD

Attest:



Michaux R. Kilpatrick, MD, PhD
President

R. David Henderson
Chief Executive Officer

In addition, Dr. Kilpatrick presented the official North Carolina Medical Board Presidential Gavel Plaque to Dr. Rusher.

INSTALLATION CEREMONY AND NEW OFFICER OATHS

November 16-18, 2022

Dr. Rusher administered the Oath of Office for President to Dr. Kilpatrick.

Dr. Kilpatrick administered the Oath of Office for President-Elect to Dr. Christine M. Khandelwal and for Secretary/Treasurer to Dr. Devdutta G. Sangvai. She also administered the New Board Member Oath to Robert L. Rich, Jr. MD.

ANNOUNCEMENTS and UPDATES

Dr. Kilpatrick announced the Governor's reappointment of three members: Dr. Hall, Mr. Malcolm, and Dr. Sangvai. Dr. Kilpatrick recognized Mr. Hayes Griggs, Director of the Governor's Boards and Commissions Office and Nathaniel Jacobs, Assistant Director, and thanked them for their help identifying and appointing excellent Board members.

Dr. Kilpatrick welcomed new staff as they were introduced by their respective manager.

Dr. Kilpatrick recognized Mr. Shawn Parker and Dr. Barbara Walker, members of the Federation of State Medical Boards Board of Directors, to provide an update of FSMB activities.

Dr. Kilpatrick recognized Dr. Khandelwal to give an update on the Tri-Regulatory Symposium.

LAND ACKNOWLEDGEMENT

As part of the Board's diversity, equity, and inclusion efforts, and during American Indian Heritage Month in North Carolina, Dr. Kilpatrick asked Mr. Malcolm – as the Board's first American Indian member - to prepare and read the following Land Acknowledgement statement:

The land we are on today is the ancestral land of many Indigenous tribes. Raleigh, itself, sits on the border of Tuscarora and Siouan territory. Over the past 14,000 years, this area was used for family life, nourishment, stewardship, justice, ceremony, and healing. For the past 500+ years, American Indian communities from this region and across North Carolina have demonstrated perseverance and direct confrontation in the face of sustained displacement, removal, and other government authorized actions that as President Biden stated included, "policies of assimilation and termination sought to decimate Native populations and their ways of life." The actions have unequivocally resulted in unspeakable generational trauma and at times violent efforts to separate Indigenous people from their culture, land, and children.

For my people, the Lumbee, our heart and homeland can be found in southeastern North Carolina, amongst the pines, swamps, and dark waters of the Lumber River in Robeson, Hoke, Scotland and Cumberland counties. The ancestors of the Lumbee were survivors of tribal nations from the Algonquian, Iroquoian, and Siouan language families, including the Hatteras, the Tuscarora, and the

Cheraw.

And today, I'm pleased to say: "we are here." Despite almost insurmountable challenges and setbacks, American Indians across this State and Nation continue to persist and flourish.

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.

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, November 18th, 2022.

A motion passed to close the session pursuant to N.C. Gen Stat. Section 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.

Mr. Mansfield provided information and legal advice within the attorney-client privilege regarding two outside litigation matters. Mr. Blankenship provided information and legal advice within the attorney-client privilege 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.

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

That concluded the Attorney's Report.

Legislative Update

On Friday, November 18th, 2022, the Board's Legislative Liaison and Chief Legal Officer, Mr. Thomas W. Mansfield, and Board Attorney Elizabeth Meredith provided a legislative update to the Board.

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The Board accepted the report as information.

Legislative Update

On Friday, November 18, 2022, the Board's Legislative Liaison, Mr. Thomas W. Mansfield, and Board Attorney Elizabeth Meredith provided a legislative update to the Board.

The Board accepted the report as information

NCMB COMMITTEE REPORTS

Executive Committee Report

Members present were: Michaux R. Kilpatrick, MD, PhD, (Chair); Christine M. Khandelwal, DO; Devdutta G. Sangvai, MD, MBA; Anu Rao-Patel, MD; and John W. Rusher, MD.

Financial Update:

a. Year-To-Date Financials

The Committee reviewed the following financial reports through September 30, 2022: 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 September and October, 2022.

Committee Recommendation: Accept the investment statements as reported.

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

c. Proposed Changes to the Investment Policy

The Committee reviewed the proposed changes to the Board's Investment Policy with Fifth Third Bank to remove dated information, alter the asset allocation, and update benchmarks.

Committee Recommendation: Approve proposed changes to the Board's Investment Policy with Fifth Third

Bank.

Board Action: Accept Committee recommendation. Approve proposed changes to the Board's Investment Policy with Fifth Third Bank.

d. Semi-annual Report from Investment Advisor

Messrs. Matt Wedding and Len Lopez, Fifth Third Bank, provided an update on the stock and bond markets and the Board's investment account.

Committee Recommendation. Accept the report as information.

Board Action: Accept Committee recommendation. Accept the report as information.

Old Business:

None.

New Business:

a. NCMB Review Panel Appointment

The NCMB Review Panel reviews candidates for all non-public member positions on the Board and make recommendations to the Governor. The Review Panel consists of nine members including a public member of the Medical Board.

The Board needs to appoint one of its public members as its 2023 representative to the NCMB Review Panel.

Committee Recommendation: Appoint Mr. Joshua Malcolm as the Board's 2023 representative to the NCMB Review Panel.

Board Action: Accept the Committee recommendation. Appoint Mr. Joshua Malcolm as the Board's 2023 representative to the NCMB Review Panel.

b. NC Professionals Health Program (NCPHP) Compliance Committee Appointment

The NCPHP Compliance Committee reviews new cases, reviews new information on current cases and decides whether anonymity should be broken with the North Carolina Medical Board as required by G.S. 90-21.22. The Committee may also make recommendations to the NCPHP staff relative to treatment options, NCPHP Monitoring Contracts and recommendations to be made to the North Carolina Medical Board.

The Compliance Committee includes nine members. Five members are also NCPHP directors and are appointed by the NCMS. One member is a director appointed by the NC Academy of Physician Assistants. Three members are appointed by the NCMB. These members may not be current NCMB members and may not have served on the NCMB in any of the three calendar years prior to their appointment.

Timothy E. Lietz, MD, practices emergency medicine with Mid-Atlantic Emergency Medical Associates in Charlotte. He is a past member and past President of the NC Medical Board and retired from the Board in 2019. Dr. Lietz is willing to serve on the NCPHP Compliance Committee if appointed.

Committee recommendation: Appoint Timothy E. Lietz, MD, to the NCPHP Compliance Committee, effective January 1, 2023.

Board Action: Accept Committee recommendation. Appoint Timothy E. Lietz, MD, to the NCPHP Compliance Committee, effective January 1, 2023.

Policy Committee Report

Members present were: John W. Rusher, M.D., J.D., (Chair); William M. Brawley; W. Howard Hall, M.D.; Sharona Y. Johnson, PhD, FNP-BC; and Robert L. Rich, Jr., M.D. Shawn Parker, J.D., MPA was absent.

Old Business:

a. 9.1.3. Licensee Employment

The Committee was provided with a genesis and overview of the draft position statement. The Committee then discussed the comments received from stakeholders regarding the draft position statement. Staff recommended changes to the draft position statement, based on the stakeholder feedback. Staff reiterated that the goal of the draft position statement was to provide guidance to our licensees and not instruction to medical practices or healthcare systems. Staff and the Committee agreed that the recommended changes should address the comments received from the stakeholders.

The Committee charged staff with making the changes discussed to the proposed position statement and circulating the revised version to the stakeholders who provided comment. Staff will then bring the revised version and any additional feedback from those stakeholders, back to the Committee for discussion at a later meeting, with an anticipated date of January 2023.

Committee recommendation: Staff directed to make the discussed changes to the proposed position statement and circulate the revised version to the stakeholders who provided comment. Staff should then bring the revised version and any additional feedback from those stakeholders, back to the Committee for discussion at a later meeting, with an anticipated date of January 2023.

Board Action: Accept Committee recommendation. Staff directed to make the discussed changes to the proposed position statement and circulate the revised version to the stakeholders who provided comment. Staff should then bring the revised version and any additional feedback from those stakeholders, back to

the Committee for discussion at a later meeting, with an anticipated date of January 2023.

b. 5.1.4. Telemedicine

Based on the recommendation of the Committee at the September 2022 meeting, the Committee shall review and revise the current Telemedicine position statement to address the rapidly evolving delivery models and technology available to licensees and the public.

After the November meeting, staff will circulate word versions of the current Telemedicine position statement and the Federation of State Medical Board's "The Appropriate Use of Telemedicine Technologies in the Practice of Medicine" (April 2022) to the Committee members. The Committee members will then make suggested changes and comments and staff will compile the changes into a revised position statement showing the suggested changes and comments. It is anticipated the proposed, revised position statement will be ready for discussion at the January 2023 Board meeting.

Committee recommendation: Staff directed to circulate word versions of the current Telemedicine position statement and the Federation of State Medical Board's "The Appropriate Use of Telemedicine Technologies in the Practice of Medicine" (April 2022) to the Committee members. The Committee members should make suggested changes and comments and provide those back to staff. Staff will compile the changes into a revised position statement for discussion at a later meeting, with an anticipated date of January 2023.

Board Action: Accept Committee recommendation. Staff directed to circulate word versions of the current Telemedicine position statement and the Federation of State Medical Board's "The Appropriate Use of Telemedicine Technologies in the Practice of Medicine" (April 2022) to the Committee members. The Committee members should make suggested changes and comments and provide those back to staff. Staff will compile the changes into a revised position statement for discussion at a later meeting, with an anticipated date of January 2023.

New Business:

a. 6.1.4: Clinician Obligation to Complete a Certificate of Death

The Committee discussed the need to potentially revise the current position statement based on the implementation of the North Carolina Database Application for Vital Events ("NCDAVE") system and the enactment of N.C. General Statute § 130A-115(g). Staff was advised to gather additional information and make suggested revisions to the current position statement related to the Board's expectation that licensees comply with N.C. General Statute § 130A-115(g). The revised version will then be presented for review and discussion at a future meeting, with an anticipated initial discussion date of March 2023.

Committee recommendation: Staff directed to gather additional information and make suggested revisions to the current position statement related to the Board's expectation that licensees comply with N.C. General Statute § 130A-115(g). The revised version shall be presented for review and discussion at a future meeting, with an anticipated initial discussion date of March 2023.

Board Action: Accept Committee recommendation. Staff directed to gather additional information and

make suggested revisions to the current position statement related to the Board's expectation that licensees comply with N.C. General Statute § 130A-115(g). The revised version shall be presented for review and discussion at a future meeting, with an anticipated initial discussion date of March 2023

Licensing Committee Report

Members present were: Devdutta G. Sangvai, MD MBA (Chair), W. Howard Hall, MD, Miguel Pineiro, PA-C, MHPE, Melinda H. Privette, MD, JD, Robert L. Rich, Jr., MD

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The Licensing Committee reviewed three 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.

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.

Eight 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: Sharona Johnson, PhD, FNP-BC (Chair), Devdutta Sangvai, MD, MBA, Miguel Pineiro, PA-C, MHPE, William Brawley. Absent: Shawn P. Parker, JD, MPA.

Old Business:

None.

New Business:

a. 21 NCAC 32M .0107 – Proposed Amendment to Nurse Practitioner Continuing Education Rule – M. Jimison, Sr. Board Attorney

Committee Recommendation: Approve proposed amendment to Nurse Practitioner Continuing Education Rule 21 NCAC 32M .0107.

Board Action: Accept proposed rule as written.

b. Perfusionist Advisory Committee (PAC) – reappointment of Elliot Williams, MD to a second three-year term. – M. Jimison

Committee Recommendation: Approve the reappointment of Elliot Williams, MD to the PAC to a second three-year term.

Board Action: Accept Committee recommendation. Appoint Elliot Williams, MD to the PAC for a second three-year term.

Disciplinary (Malpractice) Committee Report

Members present were: Christine M. Khandelwal, DO (1st Chair), Anuradha Rao-Patel, MD (2nd Chair), Melinda H. Privette, MD, JD, Miguel A. Pineiro, PA-C, MHPE, Joshua D. Malcolm, JD, W. Howard Hall, MD, John W. Rusher, MD, JD, Shawn P. Parker, JD, MPA.

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 27 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: Christine M. Khandelwal, DO (1st Chair), Anuradha Rao-Patel, MD (2nd Chair), Melinda H. Privette, MD, JD, Miguel A. Pineiro, PA-C, MHPE, Joshua D. Malcolm, JD, W. Howard Hall, MD, John W. Rusher, MD, JD, Shawn P. Parker, JD, MPA.

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 30 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 (Complaints) Committee Report

Members present were: Christine M. Khandelwal, DO (1st Chair), Anuradha Rao-Patel, MD (2nd Chair), Melinda H. Privette, MD, JD, Miguel A. Pineiro, PA-C, MHPE, Joshua D. Malcolm, JD, W. Howard Hall, MD, John W. Rusher, MD, JD, Shawn P. Parker, JD, MPA.

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 31 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 (Compliance) Committee Report

Members present were: Christine M. Khandelwal, DO (1st Chair), Anuradha Rao-Patel, MD (2nd Chair), Melinda H. Privette, MD, JD, Miguel A. Pineiro, PA-C, MHPE, Joshua D. Malcolm, JD, W. Howard Hall, MD, John W. Rusher, MD, JD, Shawn P. Parker, JD, MPA.

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 four 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.

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.

Nine 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.

Diversity and Inclusion Workgroup

Review of Original Workgroup Goals

a. Staff reviewed the Workgroup's efforts to address unconscious bias/cultural competency (1) externally with our licensees and (2) internally by reviewing our licensing and regulatory processes.

Workgroup Recommendation: Accept as information.

Board Action: Accept as information.

b. The Workgroup has approved regular annual DE&I training for Board members and staff. The last training from Dr. Sneha Thamocharan, PhD was well received, and staff are looking to schedule her again for the next training in May 2023, but Mr. Pauling will consider any additional recommendations Board members may have.

Workgroup Recommendation: Accept as information.

Board Action: Accept as information.

c. Dr. Kilpatrick gave an update on the work of the FSMB's Workgroup on Diversity, Equity, and Inclusion in Medical Regulation, which met September 28-29, 2022. The meeting including a discussion on the IAMRA's policy statement on Cultural Safety, reviewing survey results from state medical boards on diversity efforts, and creating a repository of resources to provide best practices. When available, a review of those best practices and resources may be a project for an outside consultant to provide an objective and neutral perspective on the Board's own diversity efforts. Workgroup members also encouraged expanding its Diversity conversations to include other marginalized groups.

Workgroup Recommendation: Accept as information.

Board Action: Accept as information.

d. Staff provided background on the Workgroup's partnership with the Healthy NC 2030 initiative and using results-based accountability. The Workgroup reviewed a draft Scorecard regarding the indicator on drug overdose deaths and the goal of educating providers about the use of the NC Controlled Substances Reporting System. The discussion including possibly adding an attestation to the licensing renewal application as well as looking into additional checks and balances through the NCCSRS and dispensing.

Workgroup Recommendation: Accept as information.

Board Action: Accept as information.

Board Meeting Workgroup

Members present were: Devdutta G. Sangvai, MD, MBA, (Chair); Shawn P. Parker, JD; Melinda H. Privette, MD, JD; and Michaux R. Kilpatrick, MD, PhD (ex officio).

Old Business:

a. Staff provided feedback on feasibility of January and July virtual board meetings. After the January Board meeting, staff will consider the feasibility of outsourcing the technical components to ensure that staff are focused on primary, substantive responsibilities.

Workgroup Recommendation: The January Board meeting will be conducted virtually.

Board Action: The January Board meeting will be conducted virtually.

b. The Workgroup discussed virtual licensing interviews outside of the Board meeting, including educating Board members on options available when making recommendations for split board licensing interviews (SBLI) as well as the possibility of an alternative option for certain applicants that is more than a single board member interview but does not rise to the level of SBLI.

Workgroup Recommendation: Accept as information.

Board Action: Accept as information.

New Business:

a. Next meeting will occur after the January Board meeting and when staff have more information to report back.

Outreach Committee Report

Members present were: W. Howard Hall, MD, Chair, Miguel A. Pineiro, PA-C, MHPE, Melinda H. Privette, MD, JD, Devdutta G. Sangvai, MD, MBA

Welcome and introduction

- a. Mission and committee description
- b. Goals discussion

The Committee Chair reviewed the Outreach Committee Mission Statement – *To facilitate dialogue among the Board and its constituents – and Committee description*. He then led a discussion on potential Outreach goals for the 2022-2023 term. The Committee Chair suggested that the Committee consider different ways to establish and deepen stakeholder relationships and suggested, as a beginning, that NCMB seek to bring leaders such as the NC Medical Society President, who annually visits an NCMB Board Meeting to more thoroughly understand the process, as early in their terms as possible. He also suggested the committee explore ways to strengthen ties with state lawmakers, especially to establish that NCMB is a trusted and responsive agency. Other ideas raised include possibly conducting a licensee survey, as one has not been done since before the COVID-19 pandemic and discussing how messaging regarding the NC STOP Act should evolve as the focus transitions from education to enforcement of the law. Committee members also expressed interest in looking at ways NCMB can help licensees avoid regulatory problems through targeted education on topics where NCMB frequently sees missteps, particularly among licensees who trained before topics such as ethics, boundaries and communication were standard in the medical and PA programs.

Committee recommendation: Accept as information.

Board action: Accept Committee recommendation: Accept as information.

Old Business:

- a. Status of work on wellness and resilience

The Committee discussed the future direction of NCMB's work in burnout and resilience. Going forward, the focus will be on participating in stakeholder collaboration through the North Carolina Physician Resilience and Retention Consortium. Burnout is impacting the healthcare team and, along with the shift in post COVID economics, is a major cause of current staffing shortages in hospital systems. These shortages are likely to contribute to persistent system stressors impacting licensee well-being and patient outcomes.

Committee Recommendation: Direct staff to share information with the NCPRRC on Committee discussions and recommendations. Pursue possible contributions from the North Carolina Institute of Medicine and the Sheps Center for Health Care Services Research to the work of the Consortium. Staff will continue to engage NCPHP and provide reports to the Board on updated perspective on burnout and its impact on licensees.

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Board action: Accept Committee recommendation: Direct staff to share information with the NCPRRRC on Committee discussions and recommendations. Pursue possible contributions from the North Carolina Institute of Medicine and the Sheps Center for Health Care Services Research to the work of the Consortium. Staff will continue to engage NCPHP and provide reports to the Board on updated perspective on burnout and its impact on licensees.

b. Update on presentations

- i. Professional and public presentations
- ii. Regulatory Immersion Series events

The Communications Director gave a brief overview of public and professional outreach activities. The calendar year is winding down, with few new requests for presentations in November and December. The volume of presentations was up in 2022 as more organizations resumed in person meetings and events. NCMB is scheduling events for 2023 and already has several on the calendar. The Regulatory Immersion Series mock disciplinary committee course continues to thrive and NCMB is scheduling return visits to all medical school and PA programs it has visited. Staff continue to believe that NCMB will reach its goal of presenting to all NC medical schools and PA programs in the state sometime in 2023.

Committee recommendation: Accept as information.

Board action: Accept Committee recommendation: Accept as information.

c. Information to provide newly licensed physicians and PAs

The Communications Director reviewed suggestions provided by Committee and Board Members for information and resources that should be provided to new licensees to help them be successful in practice in North Carolina and avoid regulatory problems. Committee members indicated that information on the NC STOP Act (opioid prescribing), the position statement on prescribing to self/family and other position statements, information and resources on professional burnout and clinician wellness should be a priority. The Communications Director noted that NCMB already has high quality information available on those topics and indicated that the Communications Department would likely begin by creating a “new licensee” page on the website that groups key information and links for newly licensed physicians and PAs. Ideally, NCMB can include a link to the new page with the notification email that lets applicants know their license has been issued. The Communications Department would then turn its attention to developing new content to augment information and messaging for new licensees.

Committee recommendation: Direct Communications staff to develop and promote a new licensees page.

Board action: Accept Committee recommendation: Direct Communications staff to develop and promote a new licensees page.

New Business:

None

CEO Transition Team Report

The CEO Transition Team was called to order at 5:30 p.m. on Wednesday, November 2, 2022. Members present (via teleconference) were John W. Rusher, MD, JD, Chair; Michaux R. Kilpatrick, MD, PhD; Devdutta G. Sangvai, MD, MBA; and Anu Rao-Patel, MD. Absent: Christine M. Khandelwal, DO.

OPEN SESSION

Review of Search Firm Proposals

On September 27, CEO David Henderson gave his notice of retirement. He will continue in this role until his successor has been hired. On October 13, Dr. Rusher announced his decision to create a CEO Search Committee (“the Committee”) and appointed the current members of the Executive Committee to that Committee.

The Committee would like to hire a search firm to assist with the recruiting process. Mr. Ted Pauling, NCMB HR Manager, solicited proposals from several search firms. Dr. Rusher and Mr. Pauling identified the following search firms for consideration by the Committee:

- Armstrong McGuire
- KornFerry
- Johnston Healthcare Search

Mr. Pauling gave a summary of the three proposals and outlined the search process.

Committee recommendation: After careful consideration, the Committee recommends the Board hire Armstrong McGuire as the Board’s CEO search firm.

Board action: Accept the Transition Team recommendation: hire Armstrong McGuire as the Board’s CEO search firm.

ADJOURNMENT

The Medical Board adjourned at 3:32 p.m. on Friday, November 18, 2022.

The next meeting of the Medical Board is scheduled for January 25-27, 2023.



Devdutta G. Sangvai, MD, MBA, Secretary/Treasurer