



## **INTERVENTION/DISCIPLINE COMMITTEE MEETING**

### **AGENDA**

Department of Consumer Affairs  
Board of Registered Nursing  
Hearing Room  
1747 N. Market Blvd.  
Sacramento, CA 95834

**May 10, 2017**

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**THIS MEETING WILL IMMEDIATELY FOLLOW THE CONCLUSION OF THE  
EDUCATION/LICENSING COMMITTEE MEETING**

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#### **Wednesday, May 10, 2017**

#### **9.0 Call to Order and Establishment of a Quorum**

- 9.0.1 Review and Vote on Whether to Approve Previous Meeting Minutes:
- March 8, 2017

#### **9.1 Complaint Intake and Investigations Update and Statistics**

#### **9.2 Discipline and Probation Program Update and Statistics**

#### **9.3 Intervention Program Update and Statistics**

9.3.1 Intervention Evaluation Committee Members/ New Appointments and Reappointments

9.3.2 Establish Ad-Hoc Committee to determine best practices for outreach and increased program exposure.

#### **9.4 Discussion and Possible Vote on Stipulated Settlements for Petitioners for Early Termination from Probation**

#### **9.5 Public Comment for Items Not on the Agenda**

#### **9.6 Adjournment**

#### **NOTICE:**

All times are approximate and subject to change. Items may be taken out of order to maintain a quorum, accommodate a speaker, or for convenience. The meeting may be canceled without notice. For verification of the meeting, call (916) 574-7600 or access the Board's Web Site at <http://www.rn.ca.gov>. Action may be taken on any item listed on this agenda, including information only items.

Public comments will be taken on agenda items at the time the item is heard. Total time allocated for public comment may be limited.

The meeting is accessible to the physically disabled. A person who needs a disability-related accommodation or modification in order to participate in the meeting may make a request by contacting the Administration Unit at (916) 574-7600 or email [webmasterbrn@dca.ca.gov](mailto:webmasterbrn@dca.ca.gov) or send a written request to the Board of Registered Nursing

Office at 1747 North Market #150, Sacramento, CA 95834. (Hearing impaired: California Relay Service: TDD phone # (800) 326-2297. Providing your request at least five (5) business days before the meeting will help to ensure the availability of the requested accommodation. Board members who are not members of this committee may attend meetings as observers only, and may not participate or vote.

**BOARD OF REGISTERED NURSING  
Intervention/Discipline Committee  
Agenda Item Summary**

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**AGENDA ITEM:** 9.1

**DATE:** May 10, 2017

**ACTION REQUESTED:** Information Only: Complaint Intake and Investigations Update

**REQUESTED BY:** Cynthia Klein, RN, Chairperson

**BACKGROUND:**

**COMPLAINT INTAKE:**

Staff

A limited term support staff position in the Enforcement File Room expired and there are no immediate plans to replace this position. Otherwise, there are no vacancies in the Complaint Intake Unit.

Program

Expert Practice Consultant recruitment notices, currently included in all printed renewal notices, are having positive results. In the last two months, the BRN has received applications from over 25 new RN's interested in participating in the program. As we transition new Expert Practice Consultants into the program, we anticipate improvement in our enforcement timeframes related to Experts. Currently, there are 69 investigation cases referred out to Expert review.

RN's interested in more information regarding the Expert Practice Consultant Position are encouraged to visit our website at the following address: [www.rn.ca.gov/pdfs/enforcement/expwit.pdf](http://www.rn.ca.gov/pdfs/enforcement/expwit.pdf).

Statistics

As of April 24, 2017:

**Fiscal Year 2016/2017 - Incoming Complaints to date**

Complaints Received	3,399
Arrest & Conviction Criminal Offender Reports	4,322
Total Complaints Received (FY 16/17)	7,721

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## Current Pending Complaint Intake Workload

Complaint Intake Desk Investigations Pending (All open complaints, not-including field investigations)	1,181
Complaints over 1 year	34

### Additional Complaint Intake Statistics

Attached to this report are a variety of charts summarizing seven months of Complaint Intake Unit workload volume and timeframes. The charts are designed to measure timeframes for identified milestones in the complaint resolution process. Some highlights of the charts include the following:

- Averaging over 800 incoming complaints per month, incoming complaints are being processed within five (5) business days, on average (Chart: BRN-ENF-001).
- Desk investigations are being initiated within two (2) business days of opening (Chart: BRN-ENF-002).
- The Expert Practice Consultant referral and processing timeframes are currently taking longer than we would like. BRN Management and Staff will be focusing on recruitment efforts & training in the coming months.

Additional summary reports are available in the attachment for the committee's review.

### INVESTIGATIONS:

#### Staff

The Northern California Supervising Special Investigator position has been vacant since January. The interview and selection process to hire a replacement was completed in April and the new Supervisor is scheduled to start on Monday, May 15.

Special Investigator Christina Malig (L.A. County) announced her retirement, and her last day with the BRN was April 24<sup>th</sup>. Christina was with the Investigation Unit since February 2012, and she was instrumental to the development of the then very young Investigation Unit. The Investigation Unit staff all wishes her well in her retirement. She will be missed.

Recruitment for this open position will be started immediately, with a projected hire date in July.

One investigation unit support position is temporarily assigned to the probation unit to alleviate a critical staffing shortage.

#### Program

The pace of incoming investigation referrals remains very high. Since December 1, the BRN has referred 543 cases for investigations (BRN & DOI). In this same period, 521 investigations were completed (DOI & BRN). Both BRN and DOI have unassigned cases.

As of April 24, 2017, there were approximately 46 BRN investigative cases and 39 DOI cases that

have been within their respective units for more than one year.

Statistics

Cumulative Investigation Referrals - Fiscal Year to Date ( July 1 to April 24)

	No. of Cases	Percent of all Referrals
Referred to DOI	463	47%
Referred to BRN Investigation Unit	514	53%

Historical Production Numbers

BRN Investigations	Oct 2016	Nov 2016	Dec 2016	Jan 2017	Feb 2017	Mar 2017
Total cases assigned	383	446	482	484	471	464
Total cases unassigned (pending)	115	32	32	0	0	28
Cases closed	45	46	46	50	86	52
Average days to case completion	309	336	228	272	279	262
Average cost per case	\$3,203	\$3,148	\$2,626	\$2,366	\$3,054	\$2,272
Division of Investigations	Oct 2016	Nov 2016	Dec 2016	Jan 2017	Feb 2017	Mar 2017
Total cases assigned	280	291	290	311	236	278
Total cases unassigned (pending)	30	32	52	38	36	40
Cases closed	16	29	26	49	24	35
Average days to case completion	385	297	353	330	302	292
Average cost per case	\$7,029	\$6,303	\$7,837	\$6,527	\$4,346	\$6,721

**NEXT STEP:**

Monitor our recruitment of Expert Practice Consultants. Continue workload analysis and make staffing recommendations as needed.

**FISCAL IMPACT, IF ANY:**

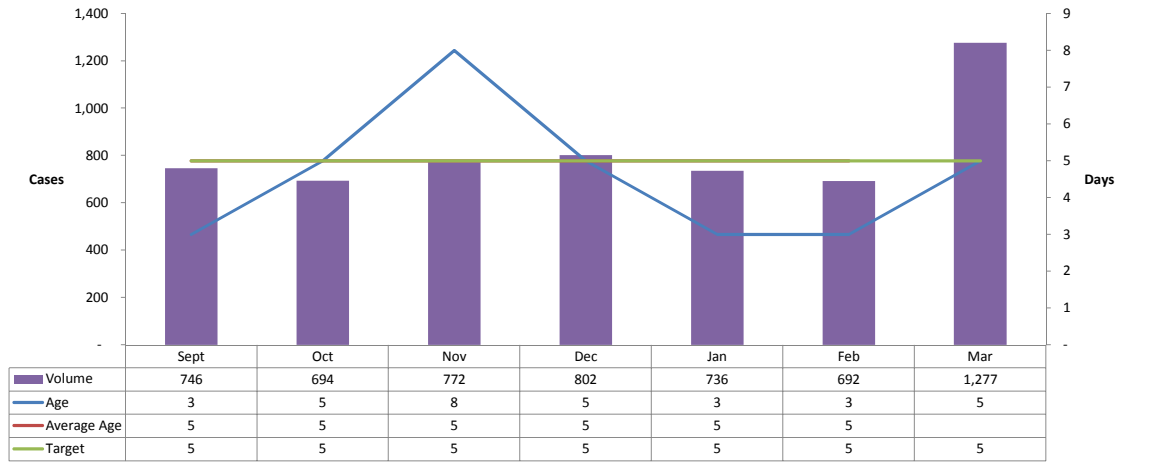
None at this time.

**PERSON TO CONTACT:**

Joseph Pacheco, Chief  
Complaint Intake & Investigations  
(916) 515-5268

# BRN Complaint Intake Statistical Reports

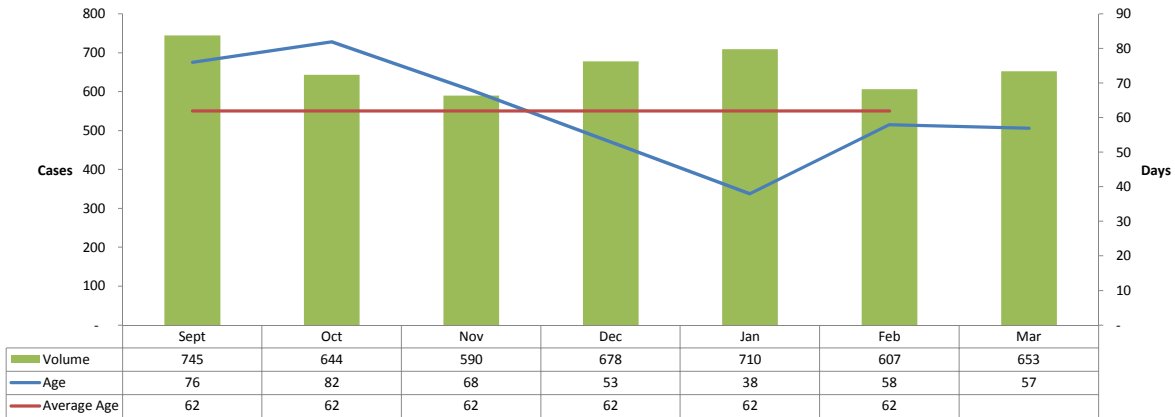
## BRN-ENF-001: Complaint Received to Complaint Entered



\*The Average Age and Target for this reporting period are the same (5 days).

\*\*The Case Age Average for March 2017 is not included for this reporting period, March's average will be calculated in subsequent months (Post-Audit 6 months' data) starting in April 2017.

## ENF-0013-400: Open to Close Without Field Investigation



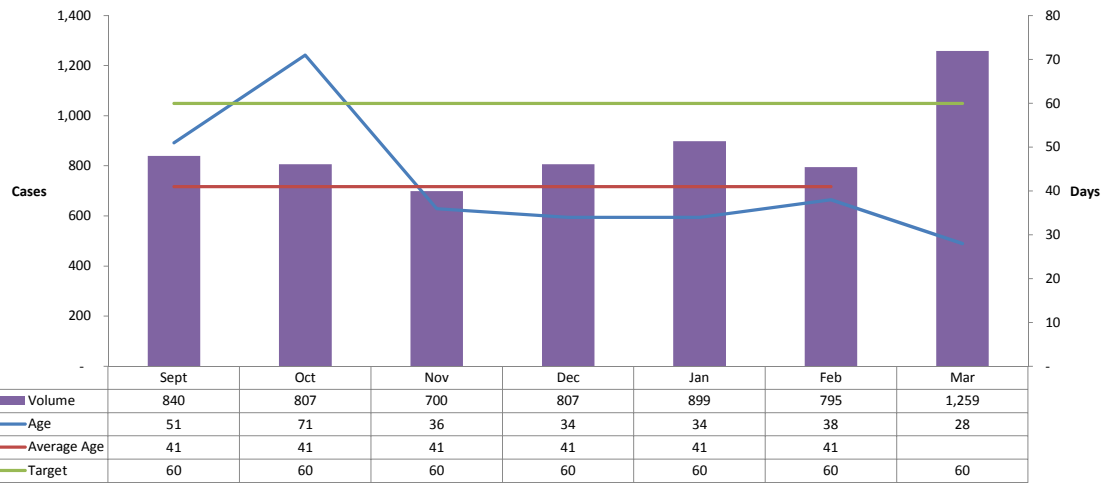
\* The Case Age Average for March 2017 is not included for this reporting period, March's average will be calculated in subsequent months (Post-Audit 6 months' data) starting in April 2017.

### BRN-ENF-002: Complaint Opened to Investigation Start



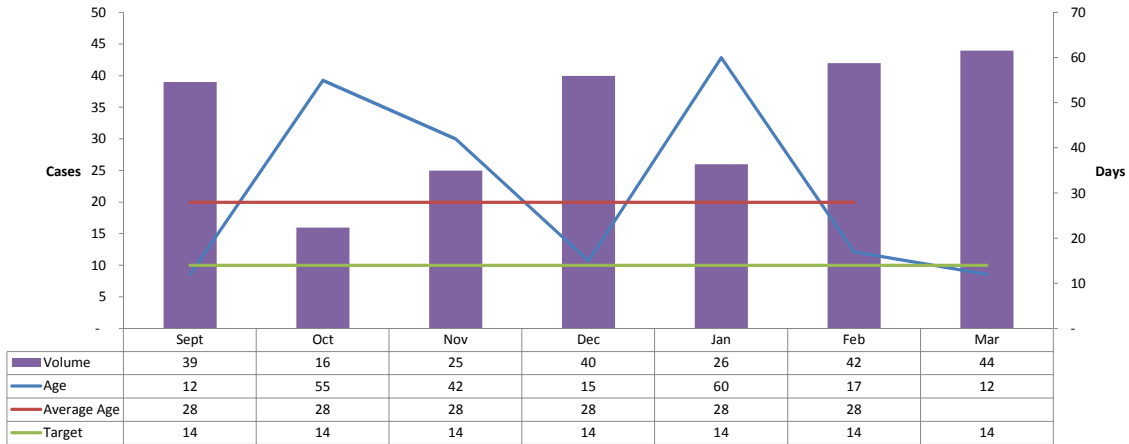
\* The Case Age Average for March 2017 is not included for this reporting period, March's average will be calculated in subsequent months (Post-Audit 6 months' data) starting in April 2017.

### BRN-ENF-004: Desk Investigation Time



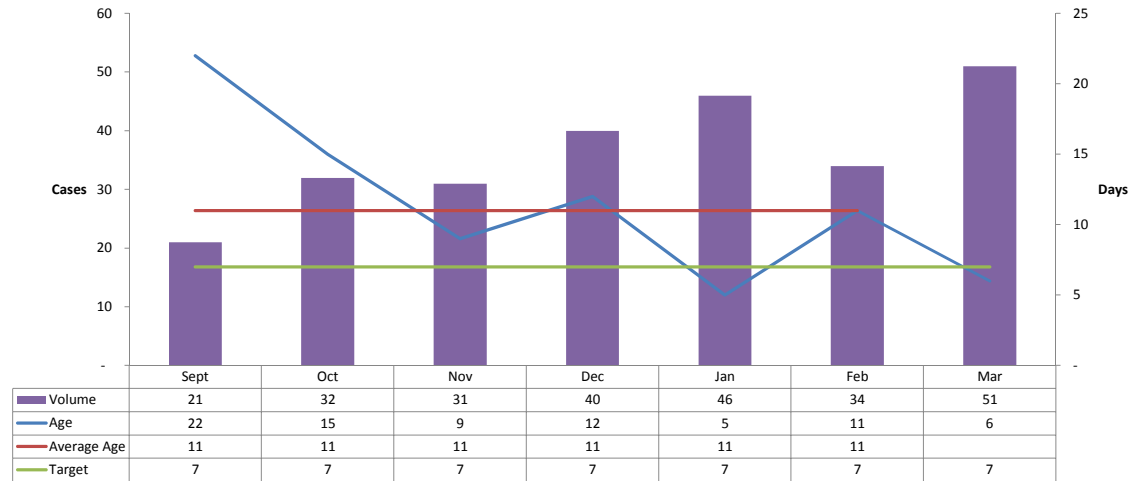
\* The Case Age Average for March 2017 is not included for this reporting period, March's average will be calculated in subsequent months (Post-Audit 6 months' data) starting in April 2017.

### ENF-0031-400: Desk Investigation Completed to Non-Sworn Investigation Referral



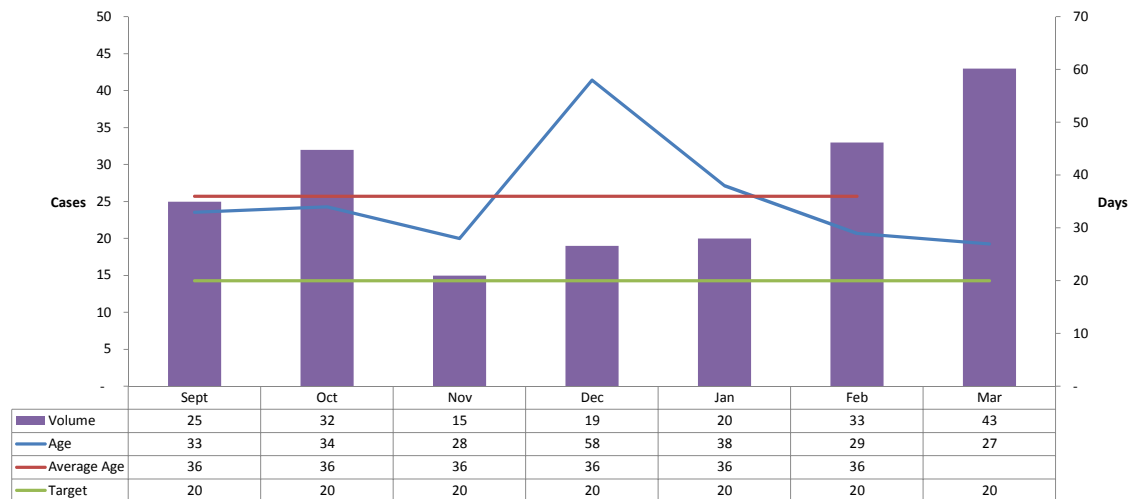
\* The Case Age Average for March 2017 is not included for this reporting period, March's average will be calculated in subsequent months (Post-Audit 6 months' data) starting in April 2017.

### ENF-0031-400: Desk Investigation Completed to Sworn Investigation Referral



\* The Case Age Average for March 2017 is not included for this reporting period, March's average will be calculated in subsequent months (Post-Audit 6 months' data) starting in April 2017.

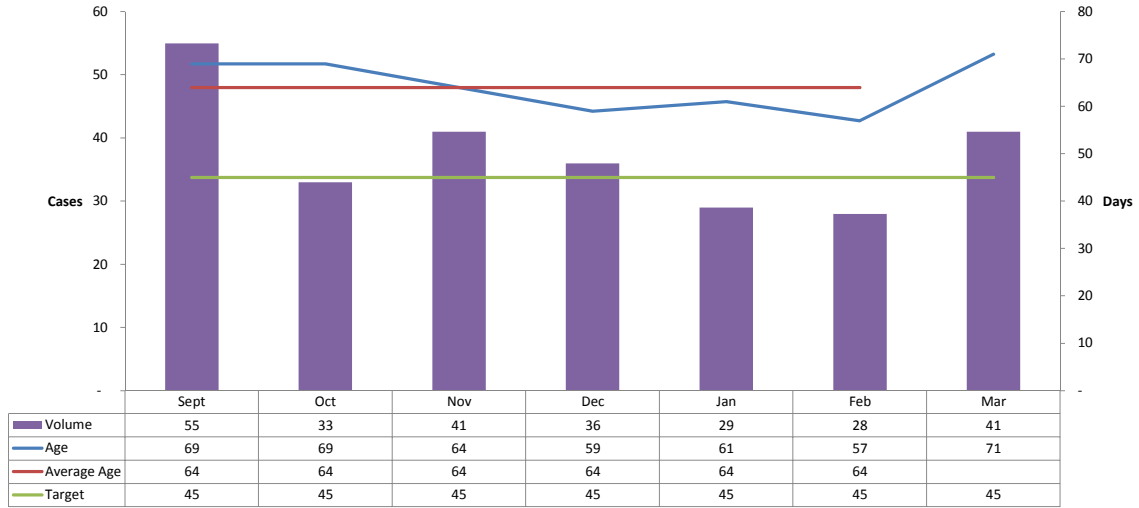
### ENF-0015-400: Field Investigation Closed to Expert Referral



\* The Case Age Average for March 2017 is not included for this reporting period, March's average will be calculated in subsequent months (Post-Audit 6 months' data) starting in April 2017.

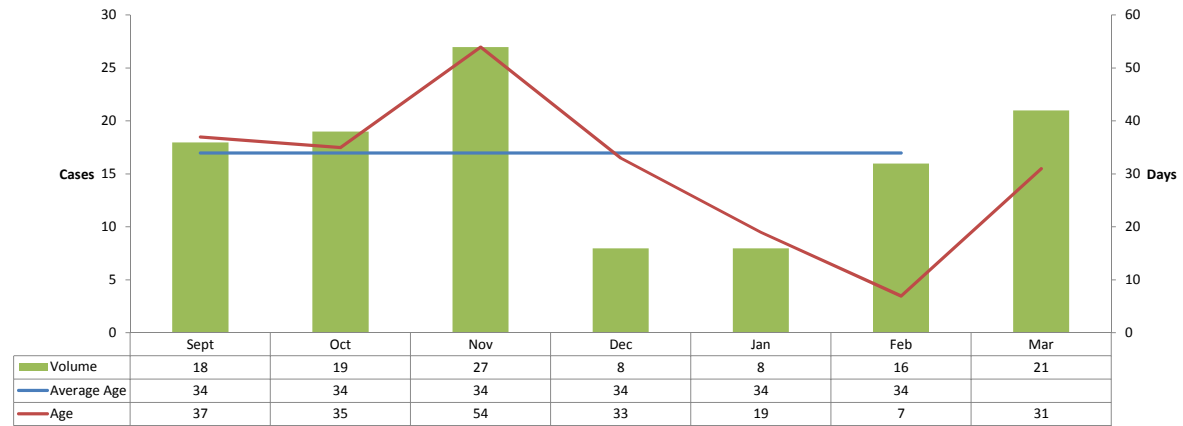


### BRN-ENF-005: Time at Expert Witness



\* The Case Age Average for March 2017 is not included for this reporting period, March's average will be calculated in subsequent months (Post-Audit 6 months' data) starting in April 2017.

### ENF-0032-400: Field Investigation Closed to AG Referral w/out Expert (Complaint Intake)



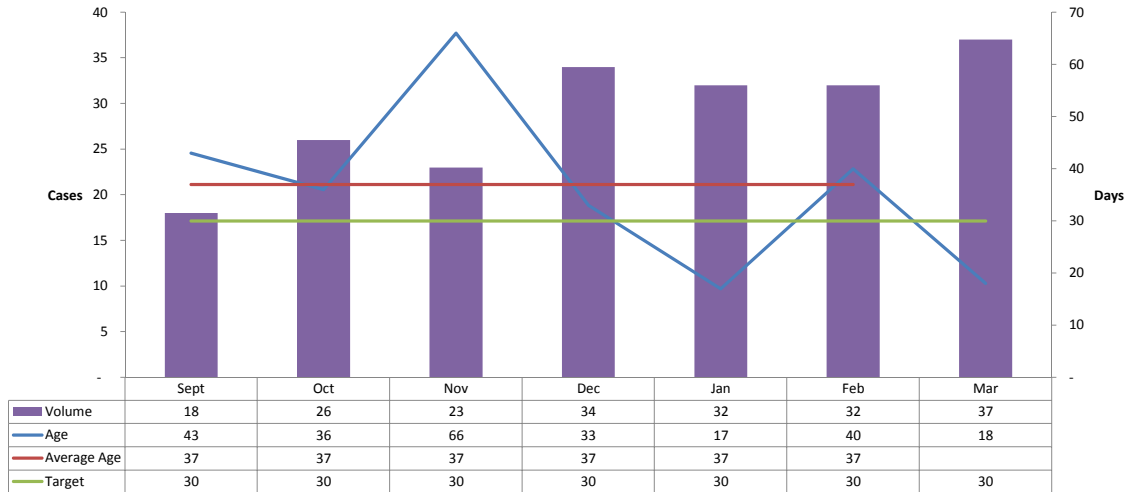
\* The Case Age Average for March 2017 is not included for this reporting period, March's average will be calculated in subsequent months (Post-Audit 6 months' data) starting in April 2017.

### ENF-0032-400: Field Investigation Closed to AG Referral w/out Expert (Total)



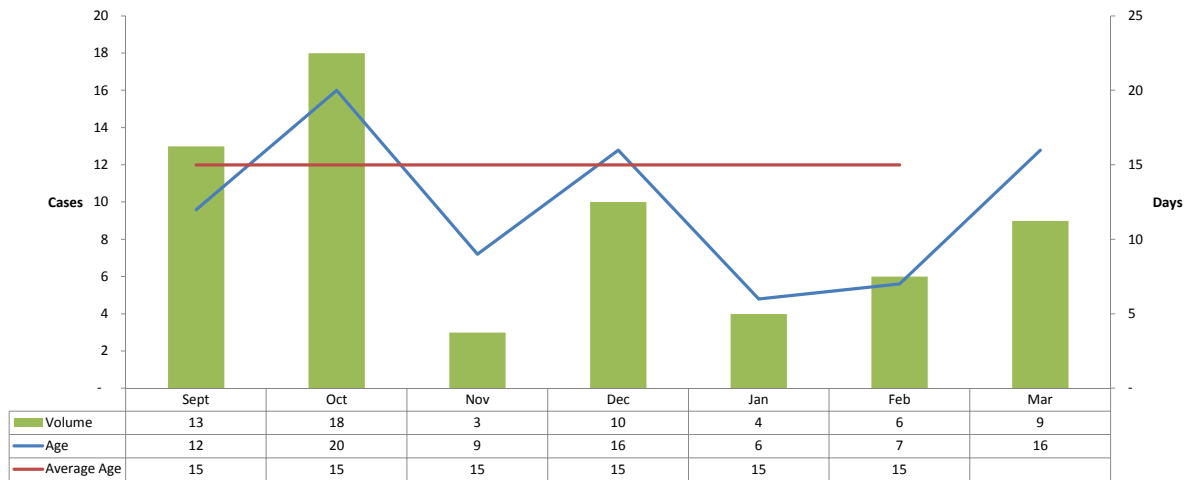
\* The Case Age Average for March 2017 is not included for this reporting period, March's average will be calculated in subsequent months (Post-Audit 6 months' data) starting in April 2017.

### ENF-0016-400: Field Investigation Closed to Case Closure



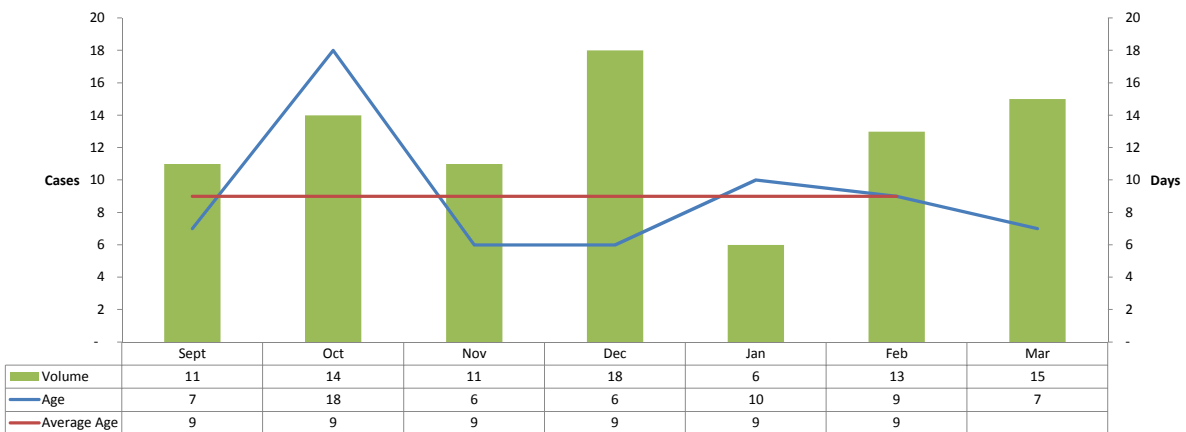
\* The Case Age Average for March 2017 is not included for this reporting period, March's average will be calculated in subsequent months (Post-Audit 6 months' data) starting in April 2017.

### ENF-0017-400: Expert Report Received to Case Closure



\* The Case Age Average for March 2017 is not included for this reporting period, March's average will be calculated in subsequent months (Post-Audit 6 months' data) starting in April 2017.

### ENF-0018-400: Expert Report Received to Discipline Unit Referral



\* The Case Age Average for March 2017 is not included for this reporting period, March's average will be calculated in subsequent months (Post-Audit 6 months' data) starting in April 2017.

**BOARD OF REGISTERED NURSING  
Intervention/Discipline Committee  
Agenda Item Summary**

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**AGENDA ITEM:** 9.2

**DATE:** May 10, 2017

**ACTION REQUESTED:** Information Only: Discipline and Probation Program update

**REQUESTED BY:** Cynthia Klein, RN, Chairperson

**Probation Unit**

**Staffing**

The vacant SSA (Probation Monitor) has been filled by Laura McLean. She comes to the Board with a criminal justice bachelor's degree and DCA enforcement experience. She started with the Board May 2, 2017.

There is a vacant Office Technician position. This position has not been filled due to budget constraints. We will be posting the position with an anticipated start date of July 1, 2017.

We continue to utilize one Staff Services Analyst from Discipline and one Office Technician from Investigations to assist in the probation unit.

**Program**

We have two staff currently working with DCA's SOLID training unit in preparation to instruct the Probation Monitoring module of the Enforcement Academy. This course is scheduled for July.

Probation continues to streamline probation processes and is currently focused on the backlog of petitioners awaiting a hearing for early termination or modification of their probation terms.

Fiscal Year as of April 25, 2017

Active In-State Probationers	1,219
Completed/Revoked/Terminated/Surrendered YTD	291
Tolled Probationers	364
Active and Tolled Probationers	1,583

The average case load of active probationers per probation monitor is approximately 135. However, the average number of cases per monitor including Tolled cases is 176. There are 64 Early Termination and 16 Modification of Probation cases waiting to be heard by the Board.

## **Discipline Unit**

### **Staffing**

The Discipline Unit currently has an Office Technician vacancy. We will be posting the position with an anticipated start date of July 1, 2017.

There is a vacant Cite and Fine AGPA position that has been filled and the start date is May 15, 2017.

### **Program**

We are working with the Attorney General's Office (AGO) to identify and prioritize the oldest cases, in an effort to ensure case completion in a timely manner.

We are planning a pilot project, utilizing DCA's Cloud to transmit cases to the AGO. This process would provide cost savings in regards to postage and paper copies as well as reduce the case aging time. We expect this to start in July 2017.

### **Statistics**

Fiscal Year as of April 28, 2017

Decisions Adopted	1,065
Pleadings served	870
Petitions to Revoke Probation served	88
Surrenders signed by E. O.	228
# of Cases at AG	1,293
# of cases at AG over 1 year	371
# of cases over 1 year without a pleading	51
# of cases awaiting hearing	147

**NEXT STEP:**

Follow directions given by committee and/or board.

**FISCAL IMPACT, IF ANY:**

AG's budget line item will be monitored for Discipline and Probation.

**PERSON TO CONTACT:**

Shannon Silberling, Chief  
Discipline, Probation, and Intervention  
(916) 515-5265

Board of Registered Nursing  
 Discipline Program  
 Statistical Summary  
 July 1, 2016 – April 24, 2017

License Type*	Case Outcome						Total FY 16/17
	Public Repeval	Revoked, Stayed, Probation	Revoked, Stayed, Suspension, Probation	Surrender	Revocation	Voluntary Surrender	
Registered Nurse	166	301	5	185	209	41	906
Public Health Nurse	19	31	-	16	14	5	85
Psych/Mental Health	-	-	-	-	-	-	0
Nurse Practitioner	12	17	-	14	3	3	49
NP-Furnishing #	12	16	-	9	3	3	43
Nurse-Midwife	1	1	-	-	-	-	2
NM-Furnishing #	1	-	-	-	-	-	1
Nurse Anesthetist	-	8	-	-	1	-	10
Clinical Nurse Specialist	1	-	-	-	2	-	3

\*Specialty certifications are a subset of the Registered Nurse license. When enforcement action is taken on an RN license, all advanced certifications a nurse holds is also included in the action. More than one enforcement action may be taken (thus counted here) against an RN during the time period.

**Probation Program Statistics**  
**July 1, 2016 to April 25, 2017**

Probation Data	Numbers	% of Active
Male	366	30%
Female	853	70%
Chemical Dependency	787	64.6%
Required Drug-Screening	608	49.9%
Practice	288	23.6%
Mental Health	10	0.8%
Conviction - excluding chemical dependency/alcohol use	134	11.0%
Advanced Certificates	114	9%
Southern California	713	58%
Northern California	502	41%
Pending AG - Tolled	4	0%
Pending AG	130	11%
License Revoked Fiscal YTD	13	
License Surrendered Fiscal YTD	71	
Terminated Fiscal YTD	41	
Successfully Completed Fiscal YTD	166	
Active In-State Probationers	<b>1219</b>	
Completed/Revoked/Terminated /Surrendered YTD	291	
Tolled Probationers	364	
Active and Tolled Probationers	<b>1583</b>	

**BOARD OF REGISTERED NURSING**  
**Intervention/Discipline Committee**  
**Agenda Item Summary**

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**AGENDA ITEM: 9.3**

**DATE: May 10, 2017**

**ACTION REQUESTED:** Information Only: Intervention Program Update and Statistics

**REQUESTED BY:** Cynthia Klein, RN, Chairperson

**Staffing**

We have completed the process of re-classing a vacant Office Technician (OT) position to a full time permanent Staff Service Analyst (SSA) position and are currently in the process of reviewing submitted applications.

**Program Update**

On April 9<sup>th</sup> and 10<sup>th</sup>, Intervention program staff and Virginia Matthews, MAXIMUS Project Manager provided two full days of training to the Hospital Association of Southern California (HASC). There were approximately 50 attendees in each session, including nursing leadership, pharmacy leadership and human resources personnel. Topics of discussion were, what is the Intervention program, what is Substance Use Disorder and the signs, symptoms and progression of the disease. Both days were well received, and we have been invited back to provide the same training to the San Diego and Orange County hospital leadership groups.

On April 20, 2017, MAXIMUS staff provided training to the Association of California Nurse Leaders, San Diego chapter. Topics of discussion were the prevalence of Substance Use Disorder and signs of diversion of medications in the healthcare setting. There were approximately 20 attendees and the presentation was well received.

On April 18th, 2017, the Intervention program hosted the second meeting in a series of approximately four Mental Health Ad Hoc Committee meetings. The committee members worked effectively to review all current practices and are scheduled to discuss potential changes at the next meeting in the third quarter of 2017.

The purpose of this committee is to develop best practice strategies to meet the unique needs of nurses with mental illness and to develop a model rehabilitation plan for use by all the Intervention Evaluation Committees.

**Intervention Evaluation Committees (IEC)**

There are currently two physician member vacancies, one in Oakland (IEC 13) and one in Fairfield (IEC 11).

There is currently one Public Member vacancy in Fairfield (IEC 11).

**Statistics – Intervention**

The Statistical Summary Report is attached. To date there have been 2,172 successful completions.

**NEXT STEP:**

Follow directions given by Committee and/or Board.

**FISCAL IMPACT, IF ANY:**

None at this time.

**PERSON TO CONTACT:**

Shannon Silberling, Deputy Chief  
Enforcement  
(916) 515-5265



Board of Registered Nursing  
**Intervention Program**  
**Statistical Summary**  
February 2017 - March 2017

COMPLAINTS REFERRED			
	Current Months	Year To Date	Program To Date
Complaints Referred	187	973	15,883

INTAKES			
	Current Months	Year To Date	Program To Date
<b>Referral Type*</b>			
Board-Referred	24	96	3,890
Self-Referred	5	21	1,364
<b>TOTAL INTAKES COMPLETED</b>	<b>29</b>	<b>117</b>	<b>5,254</b>

**NUMBER OF PARTICIPANTS: 380 (as of March 31, 2017)**

*\*May change after Intake*

PRESENTING PROBLEM AT INTAKE			
	Current Months	Year To Date	Program To Date
Substance Abuse (only)	23	85	3,302
Mental Illness (only)	1	4	172
Dual Diagnosis	5	27	1,695
Undetermined	0	1	85
Most Common Drug of Choice	Alcohol		

CLOSURES			
	Current Months	Year To Date	Program to Date
Successful Completion	17	88	2,172
Failure to Derive Benefit	0	2	125
Failure to Comply	1	5	983
Moved to Another State	0	0	52
Not Accepted by IEC	0	1	61
Voluntary Withdrawal Post-IEC	1	3	342
Voluntary Withdrawal Pre-IEC	4	17	546
Participant Withdrawn-Failure to sign contract	0	0	1
Closed Public Risk	4	15	366
No Longer Eligible	0	3	20
Clinically Inappropriate	0	0	34
Client Expired	0	0	41
Sent to Board Pre-IEC	0	0	2
Withdrawal Post-IEC due to costs	1	1	1
Withdrawn Pre-IEC due to costs	2	2	2
<b>TOTAL CLOSURES</b>	<b>30</b>	<b>137</b>	<b>4,748</b>

<b>INTAKE DEMOGRAPHICS</b>
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	Current Months	Year To Date	Program to Date
<b>Gender</b>			
Female	24	92	4,102
Male	5	25	1,125
Unknown	0	0	27
<b>Age Category (at Intake)</b>			
20-24	0	0	34
25-29	1	8	426
30-34	0	17	880
35-39	8	30	1,099
40-44	4	14	1,077
45-49	5	21	847
50-54	5	11	539
55-59	4	10	247
60-64	0	3	79
65+	1	2	12
DOB Error/Not Entered	1	1	14
<b>Ethnicity</b>			
American Indian/Alaska Native	0	0	39
Asian/Asian Indian	0	0	124
African American	2	4	169
Hispanic	4	13	232
Native Hawaiian/Pacific Islander	0	1	31
Caucasian	17	81	4,298
Other	2	6	83
Not Reported	4	12	278
<b>Worksite at Intake**</b>			
Case Management	0	0	5
Clinic	0	0	118
Clinical - Public, non-profit	0	0	2
Corporation	0	0	9
Doctor's Office	0	0	46
Government Agency	0	0	7
Group Practice - profit	0	0	16
Health Maintenance Organization	0	0	6
HMO	0	0	1
Home Health Care	0	0	19
Hospital	3	9	2,606
Not Working in Nursing	0	0	4
Nursing Home	0	0	10
Other	0	1	248
Prison/Jail	0	0	13
Private Practice	0	0	9
Registry	0	1	179
Retail	0	0	1
School of Nursing	0	0	9
Telephone Advice	1	1	2
Temporary Service	0	0	3
Undetermined	25	67	634

Unemployed	0	38	1,307
<b>**NOTE: RN licenses are placed on inactive status once an RN enrolls in the Program</b>			
<b>Specialty at Intake</b>			
Chemical Dependency	0	0	8
Critical Care	0	5	913
Dental Public Health	0	0	1
Doctor's Office	0	0	27
Emergency Department	0	3	591
Gerontology	0	0	28
Home Care	0	2	100
Hospital	0	12	349
Insurance	0	0	5
Medical Surgical	2	6	988
None	0	0	74
Nurse Anesthesia	0	2	54
Nurse Midwife	0	0	7
Nurse Practitioner	0	0	108
Nursing Home	0	0	16
Obstetrics/Gynecology	0	1	291
Oncology	0	4	160
Operating Room	0	0	179
Other/Other Specialty	0	6	485
Pediatrics	1	2	140
Psychiatry	0	5	148
Recovery Room	2	3	103
Undetermined	24	66	479

**BOARD OF REGISTERED NURSING**  
**Intervention/Discipline Committee Meeting**  
**Agenda Item Summary**

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**AGENDA ITEM:** 9.3.1

**DATE:** May 10, 2017

**ACTION REQUESTED:** Intervention Evaluation Committee Members/ New Appointments and Reappointments

**REQUESTED BY:** Cynthia Klein, RN, Chairperson

**BACKGROUND:**

In accordance with B & P Code Section 2770.2, the Board of Registered Nursing is responsible for appointing persons to serve on the Intervention Evaluation Committees. Each Committee for the Intervention Program is composed of three registered nurses, a physician and a public member with expertise in substance use disorders and/or mental health.

**APPOINTMENTS**

Below are the names of the candidates who are being recommended for appointment and Reappointment to the Intervention Evaluation Committees (IEC). Their applications and résumés are attached. If approved, their terms will expire June 30, 2021.

<u>NAME</u>	<u>TITLE</u>	<u>IEC</u>	<u>NO</u>
Amber Steward-Davis	Public Member	Fairfield	11

**REAPPOINTMENTS**

<u>NAME</u>	<u>TITLE</u>	<u>IEC</u>	<u>NO</u>
Marshall Alameida	RN Member	North Central	12
Patricia Butler	RN Member	North Central	12
Sandra Johnson	MD Member	Folsom	1
Ernestine Leverette	RN Member	Santa Ana	3
Karen Mitchell	RN Member	San Diego	10
Pamela Moore	RN Member	Fresno	5
Katherine Walker	Public Member	San Jose	7
Gaye Wilson	RN Member	North Central	12

**NEXT STEP:** Continue recruiting efforts.

**PERSON TO CONTACT:** Don Henry Walker  
Intervention Program Manager  
(916) 574-7619

**BOARD OF REGISTERED NURSING**  
**Intervention/Discipline Committee Meeting**  
**Agenda Item Summary**

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**AGENDA ITEM:** 9.3.2

**DATE:** May 10, 2017

**ACTION REQUESTED:** Approval of Outreach Ad Hoc Committee

**REQUESTED BY:** Cynthia Klein, RN, Chairperson

**BACKGROUND:**

On October 24, 2016, at the Intervention programs annual Intervention Liaison Committee meeting, Intervention Discipline Committee Chairperson Cynthia Klein recommended the formation of an Ad Hoc outreach committee. The purpose of this committee would be to determine best practices for outreach and increased program exposure.

**NEXT STEP:** Follow directions given by committee and/or board.

**FISCAL IMPACT, IF ANY:** None at this time

**PERSONS TO CONTACT:** Shannon Silberling, Chief  
Enforcement  
(916) 515-5265

**BOARD OF REGISTERED NURSING**  
**Intervention/Discipline Committee**  
**Agenda Item Summary**

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**AGENDA ITEM:** 9.4

**DATE:** May 10, 2017

**ACTION REQUESTED:** Discussion and Possible Vote on Stipulated Settlements for Petitioners for Early Termination from Probation

**REQUESTED BY:** Shannon Silberling, Chief of Discipline, Probation and Intervention

**BACKGROUND:**

Board staff has been directed to look for ways to improve the petitioner process and reduce the backlog of petitioners for reinstatement, reduction of penalty and modification of probation.

As a result, staff consulted with the Attorney General's Office and met with DCA legal counsel to discuss a stipulation process for Petitioners for Early Termination from Probation.

BRN staff will review the probation history for the petitioner and if the petitioner had limited minor violations (i.e. late paperwork) to no violations and make a recommendation to the AG's Office to enter into a stipulated settlement and decision to reduce the probationary period. The stipulated settlement would still come before the board through the mail vote process and the board would make the final decision.

If this change is approved it will reduce the time it takes for petitioners for early termination of probation to have a board decision by approximately six months.

**Staff Recommendation:** That the Board approves staff to recommend stipulated settlements for petitioners for early termination to reduce the backlog of petitioners waiting to appear before the board.

**NEXT STEP:** Follow directions given by Committee and/or Board.

**FISCAL IMPACT, IF ANY:** None at this time.

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