



# Oregon

Kate Brown, Governor

## Oregon Veterinary Medical Examining Board

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**Education Subcommittee  
Joint Ways & Means Committee  
February 8, 2021**

**Testimony of Cassandra McLeod-Skinner, J.D.,  
Interim Executive Director, and  
Dr. Emilio DeBess, DVM, MPH, OVMEB Chair**

### **Governor's Budget – SB 5521**

The Oregon Veterinary Medical Examining Board (OVMEB) is an Other Funded agency responsible for the licensing and regulation of doctors of veterinary medicine (DVM), certified veterinary technicians (CVT), and certified euthanasia technicians (CET). The Board consists of eight members: five practicing DVMs, one CET, and two members of the public, all of whom are appointed by the Governor and confirmed by the Senate. Board administrative staff currently includes an Interim Executive Director (1.0 FTE), an Investigator (1.0 FTE), an Inspector (1.0 FTE), and an Administrative Assistant (.75 FTE currently working full time).

### **Proposed Migration to OHA/HLO**

Lori Makinen, OVMEB's long term Executive Director, retired on December 31, 2020, and the board appointed me as its interim E.D. to assist the agency and Board through this transitional period. All those involved with the agency (DAS, CFO, LFO, and the Governor's Office) agree that entering into a recruitment for a permanent E.D. is not a prudent use of agency time or resources, in light of the proposed migration of this Board and the other Health Licensing Related Boards (HLRBs) into the Oregon Health Authority's Health Licensing Office (HLO) structure within the Governor's Budget.

The Governor's Budget proposal for OVMEB, and the other HLRBs, provides funding in the existing structure for the first year of 2021-23 with the anticipated second year's budget being included within HLO's budget. Approved total positions would remain at 4 with FTE for the 1 year at 1.88.

## Licensee Overview

License Type	11-13	13-15	15-17	17-19	19-21*
Veterinarian/Intern	2,407	2,534	2,588	2,639	2,813**
Certified Veterinary Technician	1,197	1,283	1,331	1,395	1,491
Certified Euthanasia Technician	115	129	138	132	115
<b>Total</b>	<b>3,719</b>	<b>3,757</b>	<b>3,937</b>	<b>4,166</b>	<b>4,419</b>

\*As of Dec. 31, 2020

\*\*Includes Veterinary Active, Inactive, and Intern

## Licensee Geographical Demographics

Based on licensee mailing addresses within Oregon, 44% of veterinarians practice within the tri-county (Clackamas, Multnomah, Washington) area, 31% practice within Benton, Deschutes, Jackson, Lane, and Marion Counties, and 25% practice in the outlying rural counties.

56.6% of veterinary interns practice within the tri-county area, 20% practice within Benton, Deschutes, Jackson, Lane, and Marion Counties, and 23.4% practice in the outlying rural counties.

52.4% of certified veterinary technicians practice within the tri-county area, 25% practice within Benton, Deschutes, Jackson, Lane, and Marion Counties, and 22.6% practice in the outlying rural counties.

## Complaint Overview

Year	Opened	Closed	Type of Case(s)	
<b>2016</b>	61	51	2 Applicant 17 Diagnostic 1 Failure to Register Facility 1 License Renewal 2 Records 7 Miscellaneous	1 Permitting Unauthorized 1 Surgery 23 Treatment 3 Unauthorized 1 Unnecessary Force 2 Unsanitary
<b>2017</b>	51	69	12 Diagnostic 1 Expired Interns 1 Failure to Register Facility 4 Misc. 1 Permitting Unauthorized	2 Prescriptions 1 Substance 29 Treatment 1 Unauthorized 1 Unsupervised

<b>2018</b>	48	53	2 Applicant 1 Criminal Conduct 11 Diagnostic 2 Records	1 Prescriptions 1 Substance 30 Treatment
<b>2019</b>	67	53	24 Diagnostic 1 Failure to Register Facility 1 Miscellaneous 1 Non-Licensed 1 Records 1 Permitting Unauthorized	3 Prescriptions 1 Substance 16 Surgery 13 Treatment 3 Unauthorized 2 Unnecessary Force
<b>2020</b>	63	48	6 Applicant 1 Criminal Conduct 10 Diagnostic 1 Expired Licenses 1 Miscellaneous 1 License Renewal 4 Records 1 Prescriptions	1 Surgery 31 Treatment 2 Unauthorized 2 Unnecessary Force 1 Unsanitary 1 Unsupervised

**Disciplinary actions taken per year:**

<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>
1 Probation 1 Reprimand 8 Civil penalties	1 Suspension 8 Civil Penalties 1 Reprimand 2 Reprimand + Civil Penalty	1 Suspension 10 Civil Penalties 1 Deny Application 1 Revocation	7 Civil Penalties 1 Deny Application 1 Reprimand + Civil Penalty	5 Stipulated Orders pending 1 Letter of Concern pending

**Fees**

Vet facility license	\$150	Vet late fee	\$100
Vet tech late fee	\$25	Vet license renewal (inactive)	0 (\$100)
Vet reactivation fee	\$150	Vet license renewal (active)	0 (\$150)
CET renewal	0* (\$10)	Vet initial	\$150
CET initial	\$25	Vet intern permit	\$150
CVT renewal	0 (\$35)	Vet app fee	\$75
CVT initial	\$35	Mailing list	\$25

\*CET renewal, CVT renewal, and DVM (active and inactive) renewal fees were waived for 2021 as part of the Board's COVID response.

We are not requesting any fee increases for the 2021-23 biennium.

## Facility Inspections

Required inspections completed within 3 years prior to the current date:

Inspection Type	As of 1/25/2019	As of 2/2/2021
Mobile Units	30	116
House Call only Facilities	1	17
Wild Life Foundation/ Biologic Diagnostics / Surgical Consulting Only	2	3
AAHA Certified	60	73
Physical Inspections Completed	132	373
Due for Inspection	441	71
<b>Total Facilities</b>	<b>666</b>	<b>653</b>
Inspection Completion Rate	34%	89%
Inspection Backlog Rate	66%	11%

## Key Performance Measures (KPMs)

Within the Special Reports section of the budget binder, you'll find the agency's 2020 Annual Performance Progress Report (APPR) that addresses the agency's performance in meeting its Key Performance Measures. In the process of undergoing an initial organizational assessment, there seems to be inconsistency between what has been reported and what the agency and Board practices actually are and concerns about the following KPMs, specifically.

**KPM #2: Public Protection – Percent of decisions not contested, appealed, and/or upheld on appeal.** The target for this KPM is 95% and the agency has seemed to meet this target for the majority of the previous five years. The concern with this unique KPM is that it may possibly motivate the Board or agency to close cases prematurely prior to Board review, to not discipline when it may be warranted, or to settle cases that should be appropriately adjudicated in order to protect the public. This KPM as written may serve a counter purpose than public protection and lead to unanticipated abuses.

**KPM #4: Best Practices – Percent of best practices met by the Board.** The OVMEB has not reported any data for this KPM in three of the last five reporting years. There appears to be insufficient information for this KPM to be measured accurately and is not consistent with board/agency practice. In order to report Board Best Practices, each member of the Board should be provided the Best Practices Self-Assessment Guidance and respond with their assessment, and the percentage of their response is what is reported for this KPM. This KPM has nothing to do with complaints received, due process, or whether the board complies with public meetings laws. An example of the Best Practices Self-Assessment Guidance form is included with these materials.

A fuller review of all KPMs with possible revision suggestions made with coordination of LFO and CFO and filing a supplemental APPR is warranted here.

### **Secretary of State Audit (2019) and Agency Response**

The OVMEB was audited by the Secretary of State's office in November 2019. Three findings and recommendations were made:

<b>Findings</b>	<b>Recommendations</b>	<b>Board Action</b>
Facility inspections didn't include verification that federal DEA requirements for controlled substances were being followed.	Board action to ensure administrative rules for inspections of facilities to monitor controlled substances.	Rules were adopted May 18, 2020 to allow such inspections and closely mirrors Board of Pharmacy rules.
Agency did not conduct background checks on new or renewing licensees, despite 2014 board resolution to do so, in contrast with other agencies.	Complete implementation of administrative rules and begin conducting background checks.	Rules adopted Oct. 28, 2019, and background checks of new and renewing licensees commenced Jan. 1, 2020.
Veterinarians are exempt from participating in the Prescription Drug Monitoring Program (PDMP).	Work with OHA and the legislature to require participation in PDMP.	No action has been taken. LC 177 (2020) was drafted but no legislative action taken.

### **COVID-19 Response**

The OVMEB has been very proactive in communications with its licensee base regarding COVID Executive Orders, OHA guidelines, and resources around vaccinations. The Board waived 2021 renewals fees for CVTs, CETs, and DVMs (active and inactive), in addition to postponing the renewal deadline from Dec. 31, 2020 to Jan. 31, 2021. Fortunately, the Board had already been in the rulemaking process for its telemedicine rule immediately prior to the initial COVID stay home orders and implemented its telemedicine rule in February 2020.

The Board also implemented a temporary rule regarding abiding by Executive Orders and OHA guidance in August 2020 and is currently in the rulemaking process on a similar, permanent, rule.

## **Budget Requests and Ending Cash Balance**

We are making no additional requests at this time. The OVMEB, through the HLO, will have an estimated ending cash balance for 2023 of \$1,209,028, approximately 22 months of operating expenditure in reserve.

Thank you for your time and consideration.

Sincerely,

Dr. Emilio DeBess, DVM, MPH  
OVMEB Board Chair

Cassandra C. McLeod-Skinner, J.D.  
OVMEB Interim Executive Director

Board member name\_

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### Calendar Year 2019-2020 Best Practices Self-Assessment Guidance

Annually, board members are to self-evaluate their adherence to a set of best practices and report the percent of total best practices met by the board (percent of yes responses in the table below) in the *Annual Performance Progress Report* as specified in the agency Budget Instructions.

#### Recommended Assessment Process

1. Select a neutral party to facilitate the self-evaluation (recommended, not required).
2. Individual board members complete the score card shown below.
3. Tabulate the results for all board members (can be done by neutral party in advance).
4. Discuss the results—particularly the results for those areas where there are disparate responses or where the group agrees that they are not adhering to a best practice.
5. Record the group's joint response to each best practice on a new score card. If consensus is not achieved, the board or commission should record the response as "no."

#### Best Practices Assessment Score Card

Best Practices Criteria	Yes	No
1. Executive Director's performance expectations are current.		
2. Executive Director's receives annual performance feedback.		
3. The agency's mission and high-level goals are current and applicable.		
4. The board reviews the <i>Annual Performance Progress Report</i> .		
5. The board is appropriately involved in review of agency's key communications.		
6. The board is appropriately involved in policy-making activities.		
7. The agency's policy option packages are aligned with their mission and goals.		
8. The board reviews all proposed budgets.		
9. The board periodically reviews key financial information and audit findings.		
10. The board is appropriately accounting for resources.		
11. The agency adheres to accounting rules and other relevant financial controls.		
12. Board members act in accordance with their roles as public representatives.		
13. The board coordinates with others where responsibilities and interests overlap.		
14. The board members identify and attend appropriate training sessions.		
15. The board reviews its management practices to ensure best practices are utilized.		
16. Others [The board may add additional best practices; however, they are not to be counted when calculating the percentage adherence to best practices.]		
<b>Total Number</b>		
<b>Percentage of Total</b>		