

Report of the Task Force on Regulatory Review of the Virginia Commission of Health Regulatory Boards to the Governor's Regulatory Reform Advisory Board

Task Force on Regulatory Review, Virginia Commission of Health Regulatory Boards. 53 pp., tables. May 1985 (Richard D. Morrison, Department of Health Regulatory Boards, P.O. Box 22708 Richmond, VA 23261, 804/786-0822.)

The Virginia Department of Health Regulatory Boards (DHRB) and the Commission of Health Regulatory Boards (CHRB) were created in 1977 by the General Assembly to provide policy coordination and administrative support to several boards. DHRB now provides administrative support to the boards of Dentistry, Funeral Directors and Embalmers, Medicine, Nursing, Optometry, Pharmacy, Veterinary Medicine, Professional Counselors, Psychology, and Social Workers.

Representatives from the 10 regulatory groups and four citizens comprise the commission. The commission's objectives include evaluating the need for board coordination; providing access to DHRB; advising the governor and director on regulation; promoting standards development to evaluate the competency of professional and occupational staff; and reviewing and commenting on regulations proposed by the boards. The Task Force on Regulatory Review was established to provide an analysis and recommendation to the Governor's Reform Advisory Board. The task force's report was published in May 1985.

The report is divided into four sections: a summary of issues and recommendations, a description of the regulatory review process, case studies of each board's reports or regulatory review, and a functional analysis of board regulations. Practitioners, board members, and oversight commission members will be particularly interested in the process used in Virginia for reviewing regulations. The recommendations will prove invaluable to other state department personnel and board members as they make their own recommendations to reduce and simplify the number of regulations in their states.

A Health Care Agenda for the States

Louise Arnheim and Lee Webb, eds. 151 pp., 1985. (The Conference on Alternative State and Local Policies, 2000 Florida Avenue, N.W., Washington, DC 20009, (202/387-6030).)

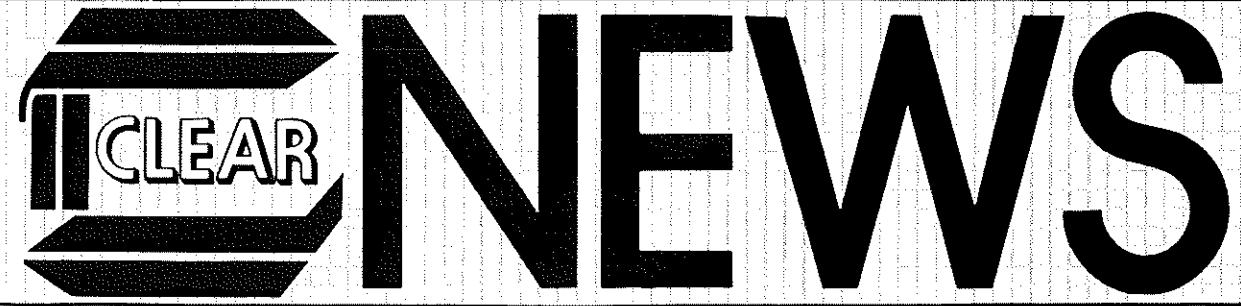
In 1983, over 10.5 percent of the gross national product was spent on health care. Health care costs have been increasing annually at twice the rate of inflation. The authors point out that even though America's health care system provides reasonable care at a very high cost to those who can afford the care, many do not have access to such health care, including the poor, farm workers, the unemployed, displaced homemakers, the disabled, the elderly, and children.

Approximately 10 percent of the population has no health insurance. Around 16 to 20 million Americans live in areas where primary care provisions are virtually nonexistent. Health insurance coverage is often inadequate for those who do have it. In recent years, hospital and health care cost containment measures have been the focus of attention. As a result, benefits have been reduced and eligibility limited. The authors contend that health care "cost containment is not in itself a progressive health care agenda."

A Health Care Agenda for the States seeks to outline an agenda for state governments based on best practices in the states. Issues discussed in the book include the health care crisis, health care for the elderly, new approaches to health care financing and delivery, new approaches to health care services and health protection.

A Health Care Agenda for the States was primarily written for the new generation of leaders elected in 1984, but will also be valuable to practitioners and lobbyists.

Recommendations on long-term care, community-based care, nursing homes, hospice programs, the development of health maintenance organizations, projective payment systems, efficient primary care and case management, family planning, maternal and child care, health, public health, and occupational health programs, health care alternatives for state government employees, patient rights, health promotion, and licensure and standards are outlined.



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Five-Year Service Awards Presented

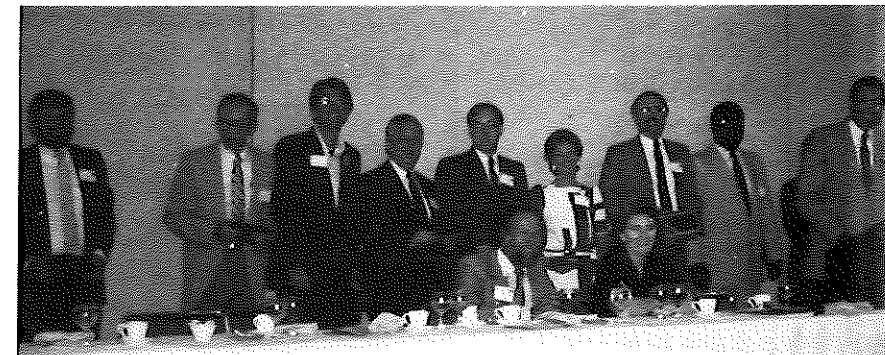
Seventeen people received CLEAR five-year service awards at the fifth annual CLEAR conference to recognize their leadership and strong support on behalf of CLEAR and the national occupational and professional licensing community.

Award recipients included Jim Ahler, Executive Director, Kentucky State Board of Accountancy; Charles Barner, Jr., Assistant Secretary, Florida Department of Professional Regulation; Gary Clark, Executive Secretary, Missouri Board of Registration for the Healing Arts; Gary Clayton, Director, Illinois Department of Registration and Education; James Douglas, Secretary of State, Vermont; William Dusso, Administrator, Wisconsin Department of Regulation and Licensing;

Mike Greer, Committee Administrator, Kentucky Legislative Research Commission; Marv Gregerson,

Chief, Idaho Bureau of Occupational Licenses; Phil Grose, Director, South Carolina Government Reorganization Commission; Ivan Hurwitz, Director, Licensure Program, Texas Board of Medical Examiners; Beverly Lynn, Principal Systems Analyst, Colorado Department of Regulatory Agencies;

Jerry McClendon, Project Officer, U.S. Public Health Service, Maryland; Robert Nebiker, Senior Department Director, Virginia Department of Commerce; Benjamin Shimberg, Senior Researcher, Educational Testing Service, New Jersey; Caroline Stellmann, Executive Director, Maryland Consumer Council; Rep. Sara Townsend, Majority Whip, New Hampshire House of Representatives; and Wellington Webb, Executive Director, Colorado Department of Regulatory Agencies.



Accepting five-year service awards at the CLEAR annual conference are (standing from left to right) Bob Nebiker, Virginia; Bill Dusso, Wisconsin; Jerry McClendon, U.S. Public Health Service; Gary Clark, Missouri; Jim Douglas, Vermont; Caroline Stellman, Maryland; Charles Barner, Florida; Bill Wood, New York; and Wellington Webb, CLEAR chairman, Colorado. Seated are Roger Hernandez, Texas, and Eugenia Carpenter, Michigan.

SCSSA Holds First Annual Conference

The first national conference for State Controlled Substances Scheduling Authorities (SCSSA) was held in Orlando, Florida, August 12-13 in conjunction with the CLEAR national conference. The theme of the conference was "Achieving the Balance between Drug Restriction and Drug Availability." A special thanks goes to David E. Joranson of the Controlled Substances Policy Specialist staff, Department of Health and Social Services, Wisconsin, for organizing the conference program.

Forty-six persons representing 29 states attended the conference.

Carlton E. Turner, deputy assistant to the president for drug abuse policy delivered the keynote address on drug policy in the 1980s. He reiterated President Reagan's position of strengthening drug enforcement practices and outlined steps under way to beef up state and federal enforcement capabilities.

Major conference topics explored by scheduling authorities included:

- The Framework of Federal and International Controlled Substances Policy: Historical Objective, Current Provisions, and Key Issues.
- The Model Uniform Controlled Substances Act and Its Enactment in the States: How Uniform Is Uniform?
- How the Drug Scheduling Mechanism Functions under International and Federal Law.
- International and Federal Drug Scheduling.

(Continued on page 2)

SCSSA Conference
(Continued from page 1)

- Drug Abuse and Drug Distribution Information.
- Achieving a Balance between Drug Control and Drug Availability.
- Future Directions.

Roundtable regional breakout sessions were held to identify common problems, needs, and directions. On August 12, a business session was held. State controlled substances administrators formed the National Association of State Controlled Substances Authorities (NASCSA) for the purpose of improving communication among the states and between the states and the federal government in the critical areas of controlled substance scheduling issues and policy.

NASCSA's work plan includes:

- promoting understanding and information exchange among the states.
- addressing such issues as uniformity and the reasons for variation from it.
- examining the need for revisions to the model Controlled Substance Act.
- advocating greater cooperation with the federal government.
- promoting greater communication with the federal government.
- representing states' perspectives in federal policy decision-making.

First NCIT Program Held

Approximately 80 regulatory investigators and enforcement administrators attended the National Certified Investigator Training Program in Orlando on August 12-14. In conjunction with the University of Missouri, Columbia, CLEAR offered the 21-hour basic training and certification program in investigative procedures and techniques for regulatory investigators. After completing 21 hours of instruction, passing an examination, and possessing a year of experience, participants are eligible to apply for national certified investigator designation. The National Certified Training Program will be offered on a regular basis and at the regional level beginning in 1986. Attendees at the first training session included occupational and professional licensing enforcement staff; insurance, business, and other regulatory caseworkers; compliance monitors; and investigative staff.

Investigator Training for 1986 Scheduled

The National Certified Investigator Training (NCIT) Program will be offered three times in 1986. The schedule is as follows:

January 29-31, Seattle, Washington
April 22-24, Lincoln, Nebraska
First week in September, Denver, Colorado

Each of the training sessions will offer a standard 21-hour curriculum which includes:

- I. Overview and statement of purpose
- II. Professional conduct and human relations
- III. Fundamentals of administrative law, due process, and statutory construction
- IV. Investigative techniques
- V. Interviewing techniques
- VI. Evidence development
- VII. Investigative reporting
- VIII. Disciplinary and court proceedings
- IX. Examination

Enrollment for each session is limited to 100 people. Registration for the Washington NCIT program is \$180. For more information, contact CLEAR.

Washington State to Host Regional Training Program

The Washington State Department of Licensing will host the CLEAR Western Pacific Regional Conference in Seattle, Washington, January 31-February 1, 1986. The regional conference will be preceded by CLEAR's National Certified Investigator Training Program in Seattle, January 29-31.

The regional conference will have three concurrent programs to provide training for board members, administrators, and staff: I. The Examination Process; II. The Essentials of Leadership and Administration in the Professional Regulation Process, and III. Professional Discipline in Action.

Board members and administrators from the western and Pacific states (i.e., Alaska, Arizona, California, Colorado, Hawaii, Idaho, Montana, Nevada, New Mexico, Oregon, Utah, Washington, and Wyoming) are invited to attend the conference and meet their counterparts from the other states. Any CLEAR member—state, board, or agency—may send representatives.

For further information on registration, please contact Pam Brinegar at CLEAR, or Ron Weaver, Washington state conference coordinator, (206) 753-7007.

CLEAR Membership Dues

State membership	\$500
or membership for each state licensing board	50
Associate memberships for national associations of state boards and national professional associations	500
Membership for state professional associations	100
Individual membership	50

Introducing

A NEW

CLEAR REPORT

Antitrust, Competition Policy and State Professional Regulation:
A Manual for Regulators

This 40-page manual has been designed to satisfy the need of lay state regulators for nontechnical information on the major antitrust principles. The manual gives practical guidance on these principles as they apply to occupational and professional licensing.

The first part of the manual is organized topically. Chapter 1 describes the basic principles of antitrust law and policy which can influence board action. Chapter 2 explores the immunity issue involving actions by the state. Chapter 3 reviews immunity for petitioning the government. Chapter 4 describes the importance of due process, equal protection, and rational basis for decision-making, and provides several specific examples of their application. Chapter 5 concludes with observations based on the previous chapters.

The manual also includes seven appendices with detailed reference material. The appendices are (1) a compilation of specific state antitrust statutes and constitutional provisions; (2) the text of pertinent federal antitrust laws which serve as models for many state laws; (3) a statement of the six federal enforcement actions taken against state boards; (4) a list of antitrust actions taken by the U.S. Department of Justice; (5) a list of selected antitrust actions taken by the Federal Trade Commission in the health care field; (6) a sample state agency antitrust review completed by the Maryland Office of Attorney General; and (7) a compendium of selected state antitrust authorities and opinions of state attorneys general on competition issues.

YES! I want to order *Antitrust, Competition Policy and State Professional Regulation*. C-32. ISBN 0-87292-059-3. The report is \$15.00 per copy with a 30% discount for state officials.

- Please send me _____ copy(ies).
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CLEAR News

Vol. II No. 4

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This quarterly CLEAR newsletter is free to all CLEAR members and is available for \$25.00 to others. Contact Pam Brinegar (606) 252-2291 for subscription information.

Fran Berry, *Director, CLEAR*
Ellen Hume, *Project Coordinator*
Pam Brinegar, *Research Assistant*
Blessing Brown, *Administrative Assistant*
Wanda Hines, *Secretary*



In cooperation with
The Council
of State Governments

staff. The concerns were that the process is too lengthy, board members are not kept informed, the rules and statutes are out-of-date, the board's attorney general is not always available or does not assist the board, and the administrative law division does not fully understand the profession.

4. *Budget*—More money needs to be allocated so that members can conduct more board or committee meetings and attend state, regional, or national professional meetings.

5. *Staff's Preparation*—Board members felt that better communication between staff and the board is needed. The staff needs to ensure that information provided prior to meetings is clear and complete, the agenda must be maintained after it has been submitted, and the materials must be provided early enough for members to review prior to the meeting.

In summary, the overall perception of board meetings and their efficiency/effectiveness was positive. The areas which posed the greatest concern—professionalism of board members, training, appointments, complaint process, budget—are those areas which have been recognized by the department as being in need of work. Although there are still activities which the department must undertake to improve board meetings, there have been a number of changes made during the last year which could make the current comments obsolete in the near future. For example, microcomputers have been installed which will improve the staff's efficiency in generating information; yearly training of board members has been implemented; board member handbooks have been developed and distributed; and the investigatory process has been streamlined. These improvements, along with others being planned, demonstrate the department's responsiveness to the needs of staff and board members.

Typically, the departmental staff members are viewed as hard-working and trying to do their best. Although board members are frustrated with the time delays in getting some of the work accomplished, they are cognizant that the decrease in staffing has created some problems.

The areas viewed as concerns for Michigan may or may not be the same for other states in which an umbrella agency exists. Nevertheless, the use of a survey provides an opportunity for all concerned parties to express their views which may not be expressed at any other time or in any other format. The efforts required to produce the survey, tabulate the results, and report on the data will have an overall positive effect of helping the department and boards form a more efficient and effective partnership.

This report was written by Kara Lynne Schmitt, Ph.D., Office of Testing Services, Michigan Department of Licensing and Regulation. The survey and more extensive analysis are available upon request at (517) 373-3877.

NEW YORK—On July 28, Governor Cuomo signed legislation creating a new program whereby licensed professionals who are impaired as a result of drug or alcohol abuse may surrender their licenses temporarily while undergoing treatment if their impairments have not caused harm to patients. The new program will be administered within the State Education Department's Office of the Professions. It applies to all licensed professionals other than physicians for whom a somewhat parallel program, administered by the Department of Health and State Medical Society, was previously established.

While the new program will have a variety of contacts with other components in the Office of Professional Discipline, the Division of Professional Licensing Services, and the 20 state boards, it will be distinct from them. Its executive secretary will report directly to Assistant Commissioner Thomas E. Sheldon, who would welcome comments and suggestions from other states that have established similar programs. His address is Empire State Plaza, Cultural Education Center, Albany, NY 12230.

NEW YORK—A "self-styled" nutritionist has been charged by Attorney General Robert Abrams for defraud-

ing consumers to pay high fees for improper physical examinations, worthless laboratory tests, and unsound nutritional advice. Staff of two clinical laboratories, a "so-called" California nutritional university, and a nutritional testing firm were sued for violating New York laws.

The defendant has been barred from practicing medicine, illegally giving physical examinations, or calling himself a doctor. The defendant received a Ph.D. from an unaccredited California correspondence school known as The Donsback University School of Nutrition. The university is being sued for illegally advertising its degrees in New York state.

SOUTH CAROLINA—The Legislative Audit Council has recommended "sunset" for the licensing of accounting practitioners (APs). The council argued that since APs could not exercise the attest function, the public relies on other groups of practitioners, such as CPAs, for assistance with financial decision-making. This recommendation, made in one of four states currently licensing APs in perpetuity, is opposed by the South Carolina Association of CPAs and the State Board of Accountancy.

Based on report in State Regulatory Alert, National Society of Public Accountants, October 1985.

NDIS Update

The National Disciplinary Information System (NDIS) is a computerized, interstate service providing information on final disciplinary actions taken against licensed professionals in over 40 disciplines.

Disciplinary information is voluntarily submitted to CLEAR by participating enforcement agencies. NDIS reports alert state officials to actions taken against professional licensing officials and are disseminated quarterly to subscribing state licensing agencies.

For more information, contact CLEAR, The Council of State Governments, Iron Works Pike, P.O. Box 11910, Lexington, KY 40578.

Orlando Site of Fifth Annual CLEAR Conference

Over 550 persons attended the fifth annual CLEAR conference at the Sheraton World Hotel in Orlando, Florida, August 13-17.

Wayne Mixson, Lieutenant Governor and Secretary, Department of Commerce, Florida, and Fred Roche, Secretary, Department of Professional Regulation, Florida, gave welcoming remarks. CLEAR Chair Wellington Webb, Executive Director, Department of Regulation Agencies, Colorado, updated conferees on CLEAR activities.

James Douglas, Secretary of State, Vermont, moderated the opening session, "State Professional Credentialing in the Year 2010." Speakers were Theresa Anna Aragon, Director, Washington Department of Licensing; Benjamin Shimberg, Senior Research Scientist, Educational Testing Service, New Jersey; and Sen. George Stuart, Chairman, Joint Legislative Information Technology Resource Committee, Florida Senate. The session is being transcribed and will be available from CLEAR.



CLEAR steering committee members are pictured at the national meeting in Orlando, Florida. (Left to right) Jim Ahler, Kentucky; Bob Nebiker, Virginia; Bill Dusso, Wisconsin; Phil Grose, South Carolina; Gary Clark, Missouri; Roger Hernandez, Texas; Jim Douglas, Vermont; Eugenia Carpenter, Michigan; and Wellington Webb, CLEAR chairman, Colorado. Not pictured are Larry Dixon, Alabama; Mark Fleming, Arizona; Mary Jane Ploof, Minnesota; and Fred Roche, Florida.

Over 33 panel sessions were held during the three-and-a-half-day conference. Highlights of sessions will be included in upcoming issues of

CLEAR News. Cassette tapes of each of the sessions are available from Century Recording Service, P.O. Box 1808, St. Petersburg, FL 33731.



Host for the CLEAR meeting was Fred Roche (left). Ben Shimberg, Educational Testing Service, presented opening remarks (top right) as Wellington Webb, Florida Sen. George Stuart, and Vermont Secretary of State Jim Douglas looked on. Theresa Anna Aragon, Washington, also addressed the conference.

Upcoming Conferences

- "Credentialing Revisited: Practical Approaches to Familiar Problems," National Commission for Health Certifying Agencies, December 3-6, 1985, New York City. For more information, contact Ann Paxton, NCHCA, 1101 30th St., N.W., Suite 108, Washington, DC 20007, (202) 333-9300.

- "Restructuring the Health Care Labor Force: The Rise of the Multiskilled Practitioner," sponsored by the American Hospital Association, the University of Alabama-Birmingham, and the W.K. Kellogg Foundation, February 24-25, Birmingham, Alabama. For more information, contact Barbara Bloom-Kreml, American Hospital Association, 840 N. Lake Shore Dr., Chicago, IL 60611, (312) 274-2467.

States Studying Licensing Issues In Legislative Interim

Although most states have already completed their formal activities for the 1985 legislative sessions, legislators and legislative staff continue developing interim research projects and committee studies for the year. (An interim is the period between one regular legislative session and the next session.)

A final report on 1985 legislative interim activities was issued by The Council of State Governments in September. By August, 34 states had already reported their 1985 interim activities. Staff in 14 states are currently or soon will be conducting research in licensing or regulations areas. A state list of research topics follows:

Alaska—Licensing of professionals, including the development of a licensing scheme for social workers and other behavioral science professionals.

Arkansas—Regulation of continuing care facilities by the Arkansas Insurance Department.

Connecticut—Certification of professional geologists.

Idaho—Alcoholic beverages.

Kansas—(1) Licensure and regulation of farm wineries under the Liquor Control Act. (2) Need for, and means of, assuring that unlicensed employees of adult care homes and home health agencies who are unqualified for employment by reason

of substance abuse, resident abuse, or other causes do not continue in the field. (3) Review of the Kansas Act on Credentialing and the credentialing process to determine whether staffing and funding of credentialing activities are adequate. (4) Regulation of tunneling, excavation, and discharging of underground explosives.

Louisiana—(1) Educational qualifications for certified interior design applicants. (2) Need for licensure of individuals employed as speech pathologists and/or audiologists in public schools. (3) Feasibility and appropriateness of licensing and regulating acupuncture practitioners in state.

Maryland—(1) Regulation of food establishments. (2) Licensing and regulation of new and custom home builders.

New Hampshire—(1) Food service licensure. (2) Continuing education for real estate brokers. (3) Increasing per diem fee paid on Saturdays and holidays by racing licensee to town in which racing plant is located. (4) Certifying clinical mental health counselors. (5) Board of Registration in medicine. (6) Bingo. (7) Establishing past performance review and bonding in licensing of solid and hazardous waste operators and land excavators. (8) Review current regulator functions of the Board of Psychologists and possible legislation for improvements in board. (9) Requiring notice

and hearing prior to liquor license revocation or suspension and providing an appeals process.

New Jersey—Alcoholic beverage control.

North Dakota—Regulation of property and casualty insurance plans created by local groups or associations.

South Dakota—(1) Prearranged funeral trusts and the related regulations, particularly in area of required percentage of funds retained and the question of whether agents soliciting prearranged funeral trusts should be licensed and registered. (2) Twenty-one drinking age impact on low-point beer licenses, the holders of those licenses, and the tax impact on state and local governments.

Tennessee—Contractor licensing.

Utah—(1) Licensure of dietitians. (2) Fireworks act. (3) Liquor laws. (4) Pari-mutuel betting. (5) Notaries public regulation. (6) Certification of construction inspectors.

Washington—(1) Need for further regulation of charitable solicitations. (2) Regulation of controlled substances.

For more information, contact Dr. Deborah Gona, Information Coordinator, Survey Research Services, Office of Information Services, The Council of State Governments, Iron Works Pike, P.O. Box 11910, Lexington, KY 40578, (606) 252-2291.

Antitrust Suits in Health Care

According to a survey conducted by the National Health Lawyers Association (NHLA), nearly half the pending antitrust suits in the health care area were filed by physicians and other health professionals trying to gain or retain medical staff privileges at hospitals. Some of the survey results on medical staff-related actions are as follows: 45 percent concerned

termination of current privileges; 28 percent involved denial of initial staff applications; 25 percent involved the challenge of an exclusive contract; and 7 percent related to limitations on restrictions on present privileges.

Members of NHLA, approximately 3,600 legal and health professionals, were polled. Fifty-seven attorneys with clients involved in 75 pending antitrust actions responded. Approximately 30 percent of the cases reported were filed in 1984 and involved individual rather than group plaintiffs.

Based on an update in the *American Psychological Association's Professionally Speaking*, April 1985.

Brinegar Assumes CLEAR News Duties

Pam Brinegar, who is new to the CLEAR staff this month, assumed editorial duties for the *CLEAR News* with this issue. Her additional responsibilities will include coordinating the regional training conferences, conducting survey research, and writing reports. Pam has a master's degree in applied anthropology and comes to CLEAR from central administration at the University of Kentucky.

STATE LINES

CALIFORNIA—Oral competency exams may now be given to California physicians if the State Board of Medical Quality finds there is reasonable cause to doubt the competency of practicing doctors. Reasonable cause is defined as: "(1) a single incident of gross negligence; (2) a pattern of inappropriate prescribing; (3) an act of incompetence or negligence causing death or serious bodily injury; or (4) a pattern of substandard care."

Effective January 1, 1985, the law orders that individuals charged with one or more of these offenses be evaluated by a four-member board of examiners proficient in the individual's area of specialization. Neither the administration of an examination nor its results is made public unless all four examiners agree to an incompetency judgment.

According to board members who testified during legislative hearings on the bill, the competency examination process could be particularly beneficial in situations where the physician's competence is in question but the evidence is not conclusive enough to lead to an accusation. The board has been working for over a year with representatives of organized medicine to work out the provisional specifics of the bill which passed during the 1983 legislative session.

Based on update in *The State Board Report* 16,6 (June 1985).

MICHIGAN—In order to determine general perceptions regarding board meetings, the director of Michigan's Department of Licensing and Regulation recently surveyed current and past board members as well as Commercial and Health Bureau staff members about board effectiveness and efficiency. The individuals surveyed were asked to provide ratings for 29 specific board activities and written responses to general questions about areas of potential concern. Approximately half of those receiving questionnaires completed and returned them, including 154 current

board members, 31 former board members, and 32 employees of bureaus who have an association with the boards.

The results indicated that the overall perception of board meetings and their efficiency/effectiveness was positive. Only 10 of the activities were viewed by the various groups as being less than efficient (see Table 1). Interestingly, in all instances, bureau employees evaluated the various board meeting components lower than did the current or former board members. In fact, had the department relied solely on the views of employees, only 9 of the 29 categories would have received an overall rating of "efficient"; however, all four groups surveyed were in agreement that the least efficient area is that of approving continuing education programs.

Comments that have proved particularly useful to the department in planning its activities were elicited with the question "What do you believe is the most critical area for the department to address in order to improve the efficiency/effectiveness of

board meetings?" Five general areas of concern were identified:

1. *Professionalism of board members*—Board members need to do a better job of attending meetings, preparing for meetings, and demonstrating a concern/interest in the professions. The chair must have a clear understanding of his/her role and lead the meeting. In one bureau, both members and staff stated that board members must do a better job of attending scheduled meetings. The lack of a quorum merely delays the work which must be done. Finally, board members need better training as to their role and responsibility.

2. *Appointment Process*—The process used to select and appoint board members is viewed as being inefficient. The overall view was that there is too much delay in getting new members on the board. Although board members can remain on a board until new appointments are made, a "lame duck" board is not as effective.

3. *Complaint Process*—This area was viewed as a problem by board members more frequently than by

Table 1
Michigan Board Perception Survey
Specific Activities

Composition of board	*Legislative recommendations
Training of board (Prof)	Review/handle complaints
*Training of board (Pub)	Review applications
Role of board (Pub)	*Impose sanctions
Role of board (Prof)	*Approve CE programs
Attaining a quorum	*Approve educational programs
Timely decision-making	Agenda adherence
Scheduling meetings	Accepting department decisions
Preparation of materials	Listening to citizens
Staff's response to questionnaire	Decision-making process
*Complaint presentations	Appeal process
Policy/procedure decisions	Policing own profession
*Subcommittee work	*Reviewing examinations
*Subcommittee reports	*Examining administrative issues
Rule-making process	

*Activities rated as inefficient.

Adapted from a table provided by the Office of Testing Services, Michigan Department of Licensing and Regulation.