VETTING AND NOMINATING PUBLIC MEMBER CANDIDATES FOR CALIFORNIA’S HEALTH PROFESSIONAL REGULATORY BOARDS

A Procedures Manual

➢ a publication of a grant project entitled “Strengthening the Community’s Voice on California’s Health Care Licensing Boards”

➢ funded by The California Endowment

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INTRODUCTION

This manual is one of three documents prepared for a project entitled “Strengthening the Community’s Voice,” funded by a grant from The California Endowment (TCE). The companion documents are “A Guide to California’s Health Care Licensing Boards” (GUIDE) and “Tapping the Full Potential of Public Members, a Tool Kit for Boards and Community-Based Organizations” (TOOL KIT). The GUIDE and TOOL KIT explain the multiple opportunities available to influence California’s regulation of the health care professions and its regulatory programs that affect health care delivery in the community. The GUIDE is a reference work that describes how 17 California health professional regulatory boards work. The TOOL KIT explores the many reasons why community-based organizations (CBOs) are advised to pay more attention to the work of regulatory boards. It also looks in depth at the important role and potential impact of public members who are appointed to boards to represent the interests and perspective of the consuming public. It would be helpful as background to this manual to become familiar with the contents of the GUIDE and TOOL KIT, which are available on the following Websites: www.cpil.org and www.cacenter.org. Both of these Web sites also contain a copy of the Final Report to TCE describing the project “Strengthening the Community’s Voice.”

Recapping briefly from the GUIDE and TOOL KIT, there are a number of reasons why it is desirable for communities, especially those with a stake in cultural and linguistic competence in health care delivery, to gain representation on the health care licensing boards. These boards – which consist of licensed professionals and non-licensed “public members” – have a significant, ongoing influence on the professions that they regulate. Through direct policy-setting activities, or through the use of the “bully pulpit,” their reach extends to professional education and training requirements, professional “scope of practice” (which defines the extent of what the individual professions can do), and standards of practice governing how individual practitioners treat and behave toward their patients.

Many health care professions have seen their licensing boards promote patient-centered initiatives such as support for cultural and linguistic sensitivity, interpreter/translator requirements, patient-friendly prescription labeling, and increased service to underserved communities. Much of this activity is in fulfillment of the boards’ responsibility to write the rules that implement laws passed by the legislature and signed by the Governor. This “rulemaking authority,” discussed more extensively in the GUIDE,
empowers boards to determine when and how laws come into practical effect. Rulemaking by boards significantly affects how laws are interpreted and implemented and therefore how well they relate to the needs of individual communities. It follows that it would be valuable for CBOs to have a representative actually at the table where the issues are debated and votes are cast.

This manual bores down one more level to provide practical guidance to CBOs in identifying, vetting, and nominating individuals to serve as public members on regulatory boards where they can articulate the interests of the communities represented by CBOs. Readers of the manual are likely to have worked within their communities on important issues of public policy long enough to realize that turning opportunities into tangible accomplishments takes planning, hard work and, sometimes, a little luck. This manual provides you with some background on the workings of the appointment process to help you get the most from your efforts to achieve representation on health professional licensing boards in California.

WHO SHOULD USE THIS MANUAL?

- Community-Based Organizations (CBOs): Perhaps the most important audience for this vetting procedures manual is CBOs interested in nominating representatives of their organizations to serve as a public member on one of California’s health care licensing boards. The 17 health professional licensing boards that are part of the state’s Department of Consumer Affairs have an average of 44% public member positions, giving public members (72 of them as of December 2009) a meaningful opportunity to influence health policies related to the regulation and discipline of licensed health professionals. Having a connection to a CBO can strengthen the effectiveness of an individual public member as she or he can represent the concerns of their organization and the larger community it serves during Board deliberations and policymaking activities. CBOs can use this manual to learn effective techniques for identifying, evaluating, and nominating qualified candidates to fill these important public member positions.

- Individuals considering having their names put forward as a candidate for public member of a health professional licensing board: The description of the qualifications that California’s appointing authorities value when filling public member vacancies will help interested citizens present themselves in the most favorable light should they decide to have their names put forward by coalitions of CBOs as potential nominees.

- The California Endowment’s (TCE) leadership and staff: TCE staff responsible for managing programs in California’s targeted areas will learn from this manual how to assist CBOs in identifying and nominating strong candidates for appointment as public members on one of California’s health professional licensing boards.
IDENTIFYING POTENTIAL CANDIDATES

Casting a Wide Net

Imagine you were responsible for identifying a roster of highly qualified candidates to become CEO of an important nonprofit organization, or to serve on the board of a community hospital, or hold another position of importance and responsibility. Obviously, you would want to develop as large as possible a pool of potential candidates from which to choose. The same is true when it comes to identifying potential community-based candidates for appointment as public members on health professional licensing boards. The first step, then, is for interested CBOs to cast a wide net to identify as many strong candidates as possible.

How to begin? An interested CBO (or group of CBOs) should ask staff and grassroots members of the communities they represent to submit their names and background information. (See Appendix A for a sample “I’m Interested” form.) CBOs that have a newsletter or a Web site, or both, might print a “Recruitment Notice” briefly describing the public member position, explaining why it is important, and setting forth the qualifications that interested persons should possess. (See the next section, entitled “Criteria Interested Candidates Should Meet.”) Ideally, the recruitment announcement will contain a phone number and/or email address interested persons could contact for further information. The objective of a “Recruitment Notice” should be both to encourage as many individuals as possible to submit their names and also to explain the criteria that will be used to evaluate potential candidates, so as not to create false expectations for individuals who do not meet the criteria. (See Appendix B for a sample “Recruitment Notice.”)

It will be beneficial to convene a meeting with representatives from as many CBOs as possible within a given geographic region to explain the search effort and to enlist the CBOs’ enthusiastic support. Representatives from the project team, including Consumer Action, the Citizen Advocacy Center (CAC), current and past regulatory board public members, and TCE area leaders, among others, would all participate in this initial meeting. “Buy-in” from CBO leadership is essential for the recruitment effort to succeed. A conference call should be considered to include CBO leaders who are unable to be present at the meeting and one-on-one follow-up appointments could be scheduled with project staff.

You will need to determine which health professions you want most to influence and what qualifications you are seeking in a nominee. What might you consider as you sort through these issues and prioritize them? A starting point would be to identify the important variables that you will be dealing with: the composition and priorities of your community organization, health care issues of importance to your community, the various licensing boards and their authorities, the pool of candidates, and the offices that will actually make the appointment.¹ Each of these variables is discussed in greater detail in this manual (in the context of selecting individual nominees) and in the GUIDE and TOOL KIT.

¹ These offices – the Governor’s Office, the Office of the President Pro Tem of the Senate, and the Office of the Speaker of the Assembly – are routinely referred to as “appointing authorities.” Throughout this document, reference to appointing authorities should be considered as referring to these offices collectively.
Before addressing the individual qualities to look for in candidates for public member positions, it is important to consider the scope of the effort. At any given time, you may be seeking a single candidate for one board or multiple candidates for many boards. While the desirable qualifications are the same for appointment to most boards, individual candidates may possess particular personal characteristics which you believe make them particularly suitable for a specific board.

Most CBOs are likely to know of certain people who could be considered for nomination as a public board member. A good rule of thumb when seeking to identify potential candidates is to never pre-select your nominee and never exclude someone from consideration until the vetting process has been completed. You may be surprised at who embodies the best opportunity to effectively strengthen the community’s voice.

Working collaboratively with other CBOs to develop a slate of nominees can be a very effective way for communities to take advantage of established working relationships and expand the pool of high-quality potential candidates. Working in coalitions may also increase your leverage in the appointment process.

Hopefully, reading this manual and the GUIDE and TOOL KIT will convince you of the relevance of health professional regulatory boards to the quality and availability of care in your communities and inspire you to develop a slate of qualified nominees ready to be surfaced when vacancies occur. A strong demonstration of interest on your part will likely increase the chances of your nominees being selected.

**Criteria Interested Candidates Should Meet**

Not everyone is cut out to be an effective public member of a licensing board. Over the years, a consensus has emerged as to the most important qualities to look for when selecting public members. The following list of attributes reflects the views of both governors’ appointment secretaries and people who have themselves served as public members:

1) a track record of consumer and/or public service advocacy;
2) communication and negotiating skills;
3) a willingness to commit the time necessary to fully participate in all board activities;
4) an interest in health care, including access and quality of care issues;
5) an awareness of the health care concerns of diverse population groups within their community;
6) connections to, or a willingness to cultivate connections to grassroots organizations representing diverse population groups; and
7) “boardsmanship” skills gained from experience serving on civic, educational, benevolent, or other organizations.
Consumer leaders who participated in a workshop convened by the Citizen Advocacy Center (CAC) in 1994 commented about the practical meaning of some of these attributes:

- **Advocacy skills**
  People with a track record of advocacy on behalf of the public interest and familiarity with the political process, who have developed skills in convincingly articulating a point of view.

- **Boardsmanship skills**
  People who have worked their way up to positions of responsibility in voluntary health and welfare organizations, community groups, planning commissions, and local government, and who have learned how to get things accomplished in a board situation - how to work with the media, how to deal with legislative bodies, and other boardsmanship skills.

- **Consumer orientation**
  People without significant financial interests in hospitals, nursing homes, or other health care delivery organizations or companies who are able to be impartial vis-a-vis the financial or professional turf questions at stake in many health care regulatory and governing board decisions. Consumer orientation can be contrasted to “technical expertise” (although any given public member might possess both). Consumer orientation and advocacy skills are the expertise that public representatives should bring to the board. Sometimes these consumer advocacy skills are insufficiently appreciated by licensee members serving on health licensing boards.

- **Ties to a Constituency**
  There are a number of reasons for seeking candidates who have ties to a broad consumer constituency:
  - A constituency group can offer support for a public member in the form of ideas and financial resources; and
  - A constituency can help keep the public member (and the board or staff) accountable.

**What California’s Appointing Authorities Look For When Evaluating Nominees for Public Member Positions**

Appointing authorities are interested in identifying appointees who are fit to perform the duties of the office, are of strong character, and are free from any conflicts of interest. They do so by requiring all applicants to complete an application similar to the one attached as Appendix C. This is the application being used by the Governor’s Office in 2009; other appointing authorities (the President Pro Tem of the Senate and the Speaker of the Assembly) use very similar forms.

You will notice that the questions are concerned mostly with existing conflicts of interest or the potential that your nominee could cause embarrassment, both to the appointee and to the office that made the appointment. It is advisable to respond as openly and honestly as possible to all questions.
These application questions can be viewed as the “minimum requirements” that any applicant should possess, but answering them does not provide any guarantee that an applicant will be selected. In the following sections, we will discuss what CBOs should be doing in order to select candidates who are best suited to public member positions and, therefore, most attractive to appointing authorities.

The process leading to appointment is rarely predictable. There are many factors to consider when seeking individuals with the potential to be effective public members of a health professions board. You are encouraged to review the TOOL KIT (particularly pages 8-18) for a thorough description of the challenges that public board members will face and the traits that can help to make them effective.

**Identifying Areas of Impact**

Consult the GUIDE to become familiar with the relevant boards and their responsibilities. The GUIDE provides brief information about all 17 health care boards housed in the California Department of Consumer Affairs. If you access the Department’s Web site (www.dca.ca.gov) and navigate through the “Business Functions” tab to “Board Member Information,” you will be able to determine the number and location of vacant public member positions by clicking on “Board Member Roster.” Although these will show which positions are vacant and currently available to be filled, you should not confine your focus exclusively to these boards. Vacancies can arise at any time on other boards and you will want to be prepared to take advantage of those opportunities.

In addition to learning about the boards and any current vacancies, you will find it valuable to attend one or more board meetings and to review recent and upcoming agenda materials and minutes to get a sense of what happens at a typical board meeting and an appreciation for upcoming issues. This information is available on each board’s Web site.

As you acquire more information about the issues that are being discussed by the various boards, you will be able to determine where your community’s voice will have the most impact on issues of importance to its health care needs. Do not assume that the boards responsible for the more populous or prominent professions are the only ones that enact policies that are important to health care delivery at the community level. While everyone wants competent primary care, most commonly delivered by doctors and nurses, consumers also have a periodic need for dental care, pharmacy services, and perhaps other specialty care, such as behavioral and psychological counseling, acupuncture, occupational therapy, respiratory care, and so on. These, and other, professional services are regulated by the boards that are discussed in the GUIDE. The opportunity to influence the way these less recognized professions serve your community should not be overlooked.

There are other reasons to pay attention to all of the health care licensing boards as you pursue the appointment of members from the community. For one thing, the health care professions form their own community. Yes, there may be a hierarchy within that community, but all members are part of the fabric

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2 You should be aware that there may be other boards of interest to you that are independent of the Department of Consumer Affairs and not mentioned in the Guide. The discussion of how to promote board appointments would apply to these boards as well.
of health care delivery in our society. Good ideas generated within one profession will be adopted by
other professions. There are neither unimportant professions nor unimportant boards in the health care
community. Having a presence on any one board can indirectly influence other boards. So, even though
your priority may be to seek representation on the boards that most directly impact your particular
community’s access to quality health care, you should not limit your interest exclusively to those
professions that you initially identify.

Another reason to be open-minded about your immediate priorities is that there are multiple influences in
the appointments process. It is possible that your nominee(s) for appointment may be asked to serve on a
board other than the one in which they have expressed an interest. If the nominee is willing to accept the
appointment, this can still provide an influential presence for your community (and may lead to other
board appointments in the future). Declining the appointment will yield no immediate benefit and may
delay, for some time, your ability to have influence in the regulatory arena.

SELECTING POTENTIAL NOMINEES

Being a board member is not easy. This is especially true for someone whose goal is to substantially
influence public policy. CBOs should look for nominees who share and understand the community’s
outlook regarding health care, and who are people they feel comfortable working with over their entire
tenure on a board. The community will derive the most benefit when the nominating organization is
committed to ongoing support and communication with the person who is representing their community
on a board. The appointing authority is likely to assume that since you promoted a candidate’s
appointment, you will give that individual your long-term support. Your ability to influence future
appointments may depend, to some degree, on the performance of your appointee(s).

CBOs need to think about which particular skills and what experience will make an individual attractive
to appointing authorities and enable him or her to be effective once appointed. You will want to consider
the individual’s work experience. Some kinds of jobs would enhance a candidate’s qualifications, such as
employment in government or in a legislative program area. Other experience – whether paid or unpaid –
can also enhance a candidate’s attractiveness, such as experience coordinating health care services for the
community or securing services, such as interpreters, that facilitate the delivery of care.

Like any other “job applicant,” your nominees will be evaluated for characteristics that indicate that they
are both interested in and suited to the position for which they are being considered. You will probably
be interested in these same qualities as you determine who is suited to represent the community. There
are no absolutes as you evaluate the qualities that might indicate future success, but a list of such factors
might include:

- Work History: responsibilities consistent with the type of work performed by the board; length of
  employment and level of responsibility.
- Community Involvement: history of activity and advocacy related to community concerns;
  experience working with multiple communities or multi-agency advisory bodies; and personal
  accomplishments.
- Education: courses or degrees relevant to fields of health care or community development.
- Other: appointments to other boards, commissions, or committees indicating a background in public service.

Keep in mind that the overriding purpose of having a community representative occupy a public member position is to be sure the community’s views are heard in an effort to influence public policy in a manner that improves the community’s access to high quality health care that is delivered in a culturally and linguistically competent manner. Effective board members are typically those who have the perseverance to stay with an issue and the capacity to work cooperatively with multiple constituencies to gather support for their position. The most successful board members are able to make persuasive arguments and win over adherents without alienating colleagues.

It is of utmost importance to understand that promoting one community’s interests should never become the sole purpose of a public member with CBO backing. Keep in mind that these are working boards with an array of important responsibilities related to improving standards of practice and protecting all Californians. All board members need to be engaged in the full range of board activities in a spirit of collegiality and dedication to a common goal if they want to gain and keep the respect of the rest of the board and the public that follows its work. Any member who is seen as disengaged from other board members’ issues will have a difficult time gaining support for the initiatives he or she wants to promote.

Also you must keep in mind that your nominee, if appointed, will be associated with the political office that makes the appointment, whether it is the Governor’s Office, the President Pro Tem of the Senate, or the Speaker of the Assembly. You should be sure that the individuals you ask them to appoint are people who will embody the appointing office’s commitment to the importance of regulatory boards. If one of your nominees fails to have the qualities that are important to successful participation on a board, there is a risk that he or she will end up embarrassing not only your organization, but also the office that made the appointment. If this were to happen, it could reduce your chances of success with future appointments.

In addition to the skills nominees should possess, personal qualities will be important as they go through the nomination process. These include patience and flexibility. Patience is important because there may be long periods where there is little perceptible activity. Even when there is a vacancy to fill, delays can occur because the legislative calendar is so busy that it demands the full attention of appointing authorities, or because those authorities want to better understand emerging issues in the professional field before selecting an individual to be appointed. Both the nominating organization and the individual applicant must be aware that delay is not a reflection on either of them. It merely indicates that this is one of many processes that are occurring simultaneously and delay is often the result. Flexibility is also important for both the CBO and the applicant. Despite all the thought and work undertaken by a CBO in order to nominate the best candidate for a particular board, the appointing authority may propose to appoint the person to another, entirely different board.

Other important personal qualities are a nominee’s commitment to regular attendance at board and committee meetings and punctuality. Public member positions are not ceremonial. They call for hard work and often lengthy deliberations leading to the adoption of important public policies. Board
members count on one another to share an equal commitment to serving the public. Board members tend to be receptive to the arguments of colleagues whom they perceive to be working as hard as they are in pursuit of good public policy. Members who have a tendency to arrive late or unprepared, or who periodically miss meetings, may find that the message that they seek to deliver is rarely persuasive enough to overcome the feeling of the other members that they lack commitment to the board’s mission.

To summarize, the characteristics shared by effective board members include:

- Understanding of and commitment to the needs of the community
- Understanding and acceptance of the role of the board
- Sense of responsibility to protect all of the public
- Flexibility
- Ability to ask the big picture questions
- Persuasiveness
- Ability to work with diverse groups
- Ability to earn and maintain confidence
- Patience
- Punctuality
- Absence of conflicts of interest

**UTILIZING A “COALITION MODEL” TO RECRUIT AND SCREEN CANDIDATES**

For several reasons, it is desirable for CBOs interested in nominating candidates for public member positions to work together in a coalition. A coalition of CBOs would give public member nominees the backing of several community groups during the appointment process. After appointment, the public member can utilize these same groups as a sounding board to air issues, test ideas, and stay accountable to the community. If the coalition were broadly based, the public member could enjoy the advantages of having a large, diverse constituency, and not be seen as having a narrow political or parochial interest group bias.

Rather than attempt to create a coalition solely for this purpose, a more practical and more productive approach may be to try to enlist existing coalitions to expand their current agendas to include direct participation in the regulatory and policy-making activities of health licensing boards as a way of promoting health care quality and consumer protection. Involvement in the appointment process and maintaining communication with public members would be logical components of this larger objective.

CBOs should weigh the pros and cons of different types of coalitions. For instance, it can be advantageous when coalition members are located in the same geographic area. Proximity avoids the
need for long distance travel to attend meetings or otherwise work jointly with other coalition members. On the other hand, coalitions of CBOs interested in a particular subject matter (e.g., oral health, rural health, mental health, etc.) could have members located anywhere in the state.

**The Initial Screening Process**

The purpose of the initial screening is to weed out applicants who meet so few of the established criteria that there is no point in imposing on their or a CBO’s time to conduct an interview. Each coalition should identify two to four individuals who will be assigned the task of initial screening of applicants who have submitted their names for consideration. Each member of the screening committee should evaluate each application according to how well the applicant, on paper, meets the established criteria and then recommend either acceptance or rejection of the application. (See Appendix D for a “Screening Summary Evaluation Sheet.”)

**The Interview Process**

Applicants recommended by the screening committee for further consideration should be interviewed by two or three members of a small “interview committee.” The interview committee may be composed of the same people who served on the screening committee, or it could be a separate group of individuals. But, having a different group conduct interviews has the advantage of making the selection process more democratic by involving a greater number of people from different CBO members of the coalition.

The interview is a critical element of the vetting process. Without interviews, individuals can be evaluated only on how well or poorly they appear “on paper.” An interview allows the individual applicants to demonstrate their ability to communicate orally, and to discuss how their work and volunteer experience demonstrates that they meet essential evaluation criteria. It allows the interviewers to evaluate the candidate’s level of interest – even passion – for health care advocacy in general and for health professional regulation in particular.

Interviews can be conducted one-on-one, or by all members of the interview committee sitting together. If you choose to interview one-on-one, interviewers should meet afterwards to exchange opinions. Each interview might take 20 to 30 minutes. At the end, each interviewer should complete an evaluation form. (See Appendix E for a “Model Interview Evaluation Form.”) The objective of the rating is to determine whether an interviewee should be included in a data bank of names to be submitted to the appointing authorities from time to time.

**Keeping the Data Bank of Potential Nominees Up-To-Date**

At least once a year, all individuals in the data bank of potential nominees should be contacted to make certain that the data in their file is current. Each person contacted should also be informed of the experience to date with appointment of candidates in the data bank to public member positions, and be told specifically of the status of their application. Not only will this help assure that the information in the data bank is up-to-date, it will serve to keep those whose names are in the data bank aware that the process, though long and stretched out, is still viable.
Initial Training

There are two distinct areas where training is critical to the success of a vetting process. First, the individuals selected to participate on the initial screening and interview committees need training on how to go about their assignments. This training could easily be conducted via Webinar or telephone conference call.

The second type of training is an initial one-day training for all candidates who have successfully completed the vetting process and are included in the data bank. This one-day training could be offered periodically in different geographic areas of the state. The training would be offered by project team members from Consumer Action and from the Citizen Advocacy Center (CAC). The text books for the training would be the GUIDE and the TOOL KIT. (See Appendix F for a “Training Syllabus.”)

THE APPOINTING AUTHORITIES

As mentioned previously, three offices make appointments of public (non-licensee) members to boards. These are the Governor’s Office, the President Pro Tem of the Senate, and the Speaker of the Assembly. Regardless of their political party, all of the appointing authorities are seeking high-quality individuals to serve on licensing boards, and they understand the need for the public members of these boards to represent a broad cross-section of California and its diverse resident population. History shows that appointments to licensing boards are regularly made in a non-partisan fashion. Competence is routinely honored above political affiliation. Moreover, the fact that you have “pre-vetted” your nominee adds a level of comfort that the applicant has met some reasonable standard of qualification. This helps your nominee to “stand out” in a field that is sometimes quite crowded.

Among the 17 health care boards discussed in this document, there are currently 72 public member positions. At any given time, a number of these positions are vacant, or soon will be.

WHEN AND TO WHOM NOMINATIONS SHOULD BE SUBMITTED

Once you have vetted and selected your nominees, you will want to get their names before the appointing authorities in a way that increases the chances they will be appointed. Of the 72 public member positions on the health care boards, a few more than half are appointments made by the Governor’s Office. The remainder is divided equally between the President Pro Tem of the Senate and the Speaker of the Assembly. Many variables will influence when and how applications are reviewed in these offices. Most of them are out of your control, and many may seem confusing. Nevertheless, following a few simple guidelines will increase your likelihood of success.

First, avoid being too selective. Remember, there are no unimportant boards or unimportant positions. Therefore, you should put forward as many names, for as many vacancies, as you feel you have qualified candidates. There is a tendency to think that concentrating one’s energies on only one or a few positions will increase the likelihood of success. This is not necessarily true, because appointing authorities are routinely facing multiple vacancies across a number of boards and frequently are searching for many
qualified applicants at once. There is also a tendency for appointments to be made in clusters for similar types of positions. For example, multiple appointments to a licensing board are often made simultaneously; and appointments to multiple licensing boards often are made at the same time. When this happens, another round of licensing board appointments is unlikely to occur for a long period of time. In this situation, if you are holding names back, it may be months before those names will have a chance to be considered.

Second, don’t be too committed to the person-position match that you have proposed. Each of the appointing authorities operates in the political arena and reacts to changing demands (the proverbial “squeaky wheel”). At such times, they will often seek out the best available candidate for appointment to the position with the greatest need. So, while you may have promoted the appointment of someone who you believe to be the perfect candidate for the Board of Behavioral Sciences, a developing program need or the emergence of a hot button issue may result in this person being appointed to the Pharmacy Board. Rather than viewing this as a setback, it should be seen as a compliment because your nominee was considered to be the strongest candidate when there was a need to find someone capable of handling an emerging issue in a competent fashion.

Also, do not feel constrained to submit names for only those positions that are currently vacant. When the staffs of the appointing authorities are reviewing applications for public member positions, they are aware of upcoming vacancies in addition to those that currently exist. Furthermore, unanticipated events (such as the resignation of a board member) sometimes lead to positions being vacated in the middle of a term. In either case, having your nominee’s application already in the office will increase the prospect that it will be considered.

Finally, you do not need to be concerned about which of the three appointing authorities is the right one to receive your nominations. Each of the offices finds it a challenge to locate high-quality appointees who will advance the cause of good public policy. You should be confident that your nominees fit this description and that any of the three offices will be interested in considering them for appointment.

Once the nominees have been selected, and the “slate” has been submitted to the appointing offices, coalition members can work together to express support for their nominees. Whether this support is best expressed through letters, phone calls, or personal visits will depend on the individual offices, the source of the support, and the current policy issues that are before the boards.

**CONCLUSION**

In summary, the effort to add the community’s voice to regulatory boards is enhanced by nominating individuals who can be effective representatives, by marshalling support for their appointment, and by showing the appointing authorities that your organizations will stand behind these appointees throughout their terms. With enough momentum, this process can become self-sustaining and ensure the ongoing representation of communities on the regulatory boards that influence how their health care is delivered.
APPENDIX A – SAMPLE “I’M INTERESTED” FORM

I’m interested in having my name put forward for appointment as a public member on one of California’s health licensing boards.

Name:
Address:
Telephone:
Cell Phone:
Email:
Date of Birth:

Please attach

1) a current biographical description or resume
   and/or

2) a short description of activities you have been involved with (paid or volunteer) that demonstrate that you meet the qualifications to be an effective public member:
   - a track record of consumer and/or public service advocacy;
   - communication and negotiating skills;
   - a willingness to commit the time necessary to fully participate in all board activities;
   - an interest in health care, including access and quality of care issues;
   - an awareness of the health care concerns of diverse population groups;
   - connections to, or a willingness to cultivate connections to, grassroots organizations representing diverse population groups; and
   - “boardsmanship” skills gained from experience serving on civic, educational, benevolent, or other organizations.

Please return this form to:

(INsert appropriate name and address of cbo)
APPENDIX B – SAMPLE “RECRUITMENT NOTICE”

We are looking for a few good men and women who would be interested in being appointed by the Governor or the Legislature to serve as a public member on one of California’s 17 health care licensing boards.

These boards have a tremendous potential to influence how health care is delivered in our community. This is because each board is responsible for setting standards for and regulating the practice of the professions for which they are responsible. These professions include physicians, nurses, dentists, pharmacists, physical therapists and more. As a public member on one of these boards, you would be a voting participant in the process that leads to the adoption of policies that might improve how communities receive their health care.

Background

In 1961, the California Legislature enacted a law that set aside one slot on the then 11-member medical board for a non-physician; this slot was designated for a “public member” (as opposed to a “professional member” or “licensee member”). Thereafter, legislation changed the composition of other health care licensing boards to require the appointment of one or a token number of public members on the boards. The addition of public members to regulatory boards was intended to inject an independent voice into the regulation of trades and professions.

During the past three decades, the state’s legislative and executive branches have continued this gradual transformation in the composition of the state’s occupational licensing boards to the point where most non-health care boards now consist of a public member majority. While today only two of the state’s health care licensing boards have public member majorities, the current percentage of public members on these boards has grown to an average of 44%. Further, during 2005, the Schwarzenegger Administration called for public member majorities on a number of health care boards, including the Medical Board of California.

This evolution in board composition has created an environment in which public members can profoundly influence regulatory policy and practice and help to expand the state’s sensitivity to consumer needs. Indeed, health professional boards are poised to move beyond public protection through their traditionally narrow licensing and enforcement roles and begin to proactively promote the interests of the state’s diverse communities in ways that were not previously foreseen.

There is considerable support among community-based organizations (CBOs), licensing boards, and appointing authorities for the idea of seeking the appointment of CBO-nominated individuals to public member positions on the boards. Once at the table, these members can help ensure that the community’s health care concerns are factored into the board’s deliberations and decision-making. Community-nominated public members would commit to stay in contact with CBOs, which would in turn monitor board activities and participate, as appropriate, in rulemaking proceedings and legislative hearings.

If you are interested, please complete the following form and return it to the address shown:
Name:
Address:
Telephone:
Cell Phone:
Email:
Date of Birth:

Please attach

1) a current biographical description or resume
   and/or

2) a short description of activities you have been involved with (paid or volunteer) that demonstrate that you meet the qualifications to be an effective public member:
   ● a track record of consumer and/or public service advocacy;
   ● communication and negotiating skills;
   ● a willingness to commit the time necessary to fully participate in all board activities;
   ● an interest in health care, including access and quality of care issues;
   ● an awareness of the health care concerns of diverse population groups;
   ● connections to, or a willingness to cultivate connections to, grassroots organizations representing diverse population groups; and
   ● “boardsmanship” skills gained from experience serving on civic, educational, benevolent, or other organizations.

Please return this form to:

(INsert appropriate name and address of CBO)
APPENDIX C – APPLICATION FOR APPOINTMENT

Application Instructions Revisions:
To all persons interested in applying for a position in the Office of Governor Arnold Schwarzenegger:
Thank you for your interest in being considered for an appointment to a position in California State government.

If you have submitted your application in a previous administration or were appointed under a previous administration and wish to reapply you must fill out the current application. We do not have access to applications from previous administrations.

For individuals interested in interning with the Governor's office, please fill out the application accordingly. Please indicate that you are applying for an internship in the "positions sought" field.

Please fill out all required fields. All fields are required unless marked as optional with an asterisk (*). You must click the "SUBMIT" button at the bottom of the application when you are finished. The application will not go into our system if you do not click submit.

We require that you print, sign and mail or fax in the authorization form at the end of the application. Do not send in the entire application, only the signed authorization page is required.

We also ask that you include a copy of your current resume along with the authorization page.

We advise you keep a copy of all documents for your records.

Application materials should be returned to the Governor's Office at:

Office of Governor Arnold Schwarzenegger
Attn: Appointments
State Capitol Building
Sacramento, CA 95814

Or faxed to (916) 558-3170
APPLICATION FOR APPOINTMENT

Entries marked with an "*" are optional

1. Name of Applicant:
   Prefix: *
   First Name: 
   Middle Name: *
   Last Name: 
   Suffix: *
   Alias/Maiden Name: Not Applicable

2. Date of Birth: 
   Place of Birth: 
   Drivers License #: State: 
   Social Security #: Ex: ###-##-####

3. Positions Sought:

4. Name of Spouse: Not Applicable

5. Provide your current Residence address and county
   Address: 
   City: 
   County: State: 
   Zip: 
6. Please provide your current business or professional address. (Leave blank if currently not working.)

Professional Title: 
Business/Firm/Office: 
Address Line 1: 
Address Line 2: 
City: 
County: 
State: 
Zip: 
Phone: 
Fax: 
Mobile: 
Email: 

7. Are you a registered voter? Please Note: You have to be officially registered in your county as "American Independent" or as "Decline to State" in order to put it as your party affiliation.

a. Identify the county in which you are registered to vote.

County: Also Note: If you are unsure as to your party affiliation please visit http://www.sos.ca.gov/elections/elections_d.htm and find your County Registrar of Voters phone number, they will be able to provide this information.

Party: 

INFORMATION FOR REPORTING PURPOSES

To assist the Governor’s Office with its reporting obligations (Gov. Code, §12011.5, subdivision (n)), applicants are asked to voluntarily provide their gender and race/ethnicity. Use the categories below to choose the one with which you most closely identify.
9. Please provide your complete educational history starting with the most recent. Dates can be approximate. (Leave blank if there is no history.)

   College/Law School Attended: ____________________________
   Degree Received: ____________________________
   City: ____________________________
   Major: ____________________________
   From: ____________________________
   To: ____________________________

Add another entry
Remove entry

10. Please provide your complete professional work history, starting with the most recent. Be sure to include any past gubernatorial appointments. Dates can be approximate.

Work History
Name of Employer: ____________________________
Address: ____________________________
City: ____________________________
State: ____________________________
Zip: ____________________________
Title: ____________________________
Type of Business: ____________________________

Summary of job duties:

Name, current phone number and address of your supervisor:
Name: ____________________________
Phone: ____________________________
Address: ____________________________
From: ____________________________
To: ____________________________
11. Professional Licenses & Certificates:
(Licenses/Certificates, Date Issued, etc. Keep Blank if none.)
Name: 
Received on: 
Details: 

12. Organizations and society memberships:
(List all current organizations and societies of which you are a member. Include dates. Leave blank if none.)
Name: 
From: 
To: 
Details: 

13. Many positions require the appointment of persons with special background, experience, etc. Please indicate below those categories for which you may qualify. Please mark only the category which specifically describes your current occupation, employment or status.
☐ Advanced Technology
☐ Agriculture
☐ Attorney
☐ Business
☐ Communications
☐ Education
☐ Environment
☐ Financial Institution
☐ Health
☐ Higher Education
☐ Insurance
☐ Labor
☐ Law Enforcement
☐ Legislation
☐ Local Government
☐ Manufacturing
☐ Other
☐ Small Business
☐ Social Services
☐ Student
☐ Veteran
If other, specify: 

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14. Have you resided at your current residence less than 5 years? If yes, please list all residences for the past 5 years.

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15. Are you a citizen of the United States of America? If no, please identify country.
16. Have you ever been affiliated (as an officer, owner, director, trustee, partner, advisor or consultant) with any institutions (corporations, firms, partnerships, business enterprises, non-profit organizations, etc.) within the past five years which might present a potential conflict of interest or appearance of conflict of interest with your requested appointment? If yes, please explain.

17. Have you ever been a registered lobbyist or have you lobbied at any level of government?

18. Do you own real property, personal property, financial holdings or receive income from any source which might present a potential conflict of interest or appearance of conflict of interest with your requested appointment? If yes, please explain.

19. Do you have a spouse who is currently an employee or appointee of the State of California? If so, what is the entity, location and title?

20. Have you filed federal and state income tax returns for the past seven years?

21. Have you ever been convicted of a violation of any federal, state, county or municipal law, regulation or ordinance (including traffic violations for which a fine of $250 or more was imposed, this includes driving under the influence of alcohol and/or drugs)? If yes, please explain.
22. Have you ever been delinquent in child support payments?

23. Are you currently under federal, state or local investigation for possible violation of a criminal law or ordinance? If yes, please explain.

24. Has a tax lien or other collection procedure ever been instituted against you by federal, state or local authorities? If yes, please explain.

25. Have you ever been disciplined or cited for a breach of ethics or unprofessional conduct or been the subject of a complaint to any court, administrative agency, professional association, disciplinary committee, or other professional group? If yes, please explain.

26. Have you ever been involved in civil litigation, or administrative or legislative proceedings of any kind, either as plaintiff, defendant, respondent, witness or party in interest? If yes, please explain.
27. Have you ever run for political office, served on a political committee, or been identified publicly with a particular political organization, candidate or issue? If yes, please explain.

28. Have you been publicly identified, in person or by organizational members, with a particularly controversial national, state or local issue? If yes, please explain.

29. Have you ever submitted oral or written views to any government authority or the news media, on any particular controversial issue other than in an official government capacity? If yes, please explain.

30. Have you ever written any particularly controversial books or articles? If yes, please explain.

31. Have you ever had any association with any person or group or business venture which could be used, even unfairly, to impugn or question your character and qualifications for the requested appointment? If yes, please explain.
32. Do you know anyone who might take any steps, overtly or covertly, to oppose your appointment? If yes, please explain.

33. Is there anything in your background which if made known to the general public through your appointment would cause an embarrassment to you and/or the administration? If yes, please explain.

34. Can you perform the functions of this job (essential and/or marginal), with or without reasonable accommodation?

35. Are you applying for a position on a board or commission that the Governor is required to appoint people with disabilities? If so, please identify your disability.

36.
Identify your State Senator: ____________________________
and Assembly Member: ____________________________
If you are unsure as to your Senator or Assembly Member please visit http://www.leginfo.ca.gov/yourleg.html.

37. Please explain why you wish to serve in the Schwarzenegger Administration.
38. FOR FAIR BOARD APPOINTMENTS ONLY
Do you or any members of your immediate family:

- [ ] Own any interest in any enterprise which does or might do business with the fair?
- [ ] Own any interest in any real property adjacent to or in proximity with the fairgrounds?
- [ ] Have any interests or associations which might present a conflict of interest?
- [ ] Currently serve as an elected city or county official?

39. FOR INTERN APPLICANTS ONLY
Will you be receiving credit for this internship? [ ]
If yes, what is the name of program?
Applying for which term?
Availability:
Monday:     to     
Tuesday:     to     
Wednesday:   to     
Thursday:    to     
Friday:      to     

Office of Interest?

☐ Appointments
☐ Cabinet
☐ Communications
☐ Constituent Affairs
☐ Executive Writers
☐ External Affairs
☐ First Lady
☐ Legislative Affairs
☐ Mailroom
☐ Newsroom
☐ Press Office
☐ Scheduling

Submit Application
**APPENDIX D – SCREENING SUMMARY EVALUATION SHEET**

<table>
<thead>
<tr>
<th>Date Reviewed:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Potential Candidate:</td>
<td></td>
</tr>
<tr>
<td>File Number:</td>
<td></td>
</tr>
<tr>
<td>My Name (reviewer):</td>
<td></td>
</tr>
<tr>
<td>My Contact Information:</td>
<td></td>
</tr>
<tr>
<td>Organization:</td>
<td></td>
</tr>
<tr>
<td>Address:</td>
<td></td>
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<tr>
<td>Phone Number:</td>
<td></td>
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<tr>
<td>Email:</td>
<td></td>
</tr>
</tbody>
</table>

Enter 1, 2, 3, or 4 for each criterion.

**Rating Scale:**

1 = Does not meet this screening criterion
2 = Only slightly meets this screening criterion
3 = Meets this screening criterion
4 = Excels at this screening criterion

<table>
<thead>
<tr>
<th>Recommendation:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes, this person should be interviewed</td>
<td></td>
</tr>
<tr>
<td>No, this person should not be interviewed</td>
<td></td>
</tr>
</tbody>
</table>

1) a track record of consumer and/or public service advocacy;___

2) communication and negotiating skills;___

3) a willingness to commit the time necessary to fully participate in all board activities;___

4) an interest in health care, including access and quality of care issues;___

5) an awareness of the health care concerns of diverse population groups;___

6) connections to, or a willingness to cultivate connections to, grassroots organizations representing diverse population groups;___

7) “boardsmanship” skills gained from experience serving on civic, educational, benevolent, or other organizations._____

TOTAL SCORE (add items 1 – 7) _______
APPENDIX E – MODEL INTERVIEW EVALUATION FORM

Suggested discussion guideline to be used when interviewing potential public member candidates:

Study the rating sheet prepared by the screening committee. During the interview, explore each of the seven criteria, and draw out the candidate, having him or her explain how he or she believes they do or do not meet each criterion.

Ask whether the candidate has a preference for appointment to certain of the 17 health licensing boards, and ask whether there are any boards he or she would not be willing to serve on. Explore reasons.

<table>
<thead>
<tr>
<th>BOARD</th>
<th>WOULD PREFER</th>
<th>WOULD REFUSE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acupuncture Board</td>
<td></td>
<td></td>
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<tr>
<td>Board of Behavioral Sciences</td>
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<td></td>
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<tr>
<td>Dental Board of California</td>
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<tr>
<td>Dental Hygiene Committee of California</td>
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<tr>
<td>Medical Board of California</td>
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<td></td>
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<tr>
<td>Board of Registered Nursing</td>
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<tr>
<td>Board of Occupational Therapy</td>
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<tr>
<td>Board of Optometry</td>
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<tr>
<td>Osteopathic Medical Board of California</td>
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<tr>
<td>Board of Pharmacy</td>
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<tr>
<td>Physical Therapy Board of California</td>
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<td></td>
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<tr>
<td>Physician Assistant Committee</td>
<td></td>
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<tr>
<td>Board of Podiatric Medicine</td>
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<tr>
<td>Board of Psychology</td>
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<tr>
<td>Respiratory Care Board</td>
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<td></td>
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<tr>
<td>Speech-Language Pathology and Audiology Board</td>
<td></td>
<td></td>
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<tr>
<td>Board of Vocational Nursing and Psychiatric Technicians</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Explore candidate’s knowledge of the health licensing system, and the basis for any knowledge he or she may have. Explore with candidate his or her reasons for seeking appointment as a public member. Explore any possible conflict of interest candidate may have, specifically:

- Anyone in family a licensed health professional (parent, child, sibling, husband/wife/significant other).
- Currently or previously employed by a health professional, hospital, nursing home, or other health delivery entity.

Determine whether candidate is willing and able to attend a one-day initial training session of all candidates. Explain to candidate that the appointment process is “political”, and ask if candidate is willing to state his or her political affiliation. Emphasize that this question is optional:

<table>
<thead>
<tr>
<th>Democrat</th>
<th>Republican</th>
<th>Independent</th>
<th>Other party affiliation (specify)</th>
</tr>
</thead>
</table>

At conclusion of interview, write up impression of the candidate based on both the screening rating sheet and the interview, and rate candidate on the following scale:

1 = Not qualified
2 = Qualified
3 = Well-qualified
4 = Highly qualified

Date of Interview: ________________________________________________________________

Name of Candidate Interviewed: ____________________________________________________

Name of Person Conducting Interview: ______________________________________________

Contact Information for Person Conducting Interview:

  Organization: ________________________________________________________________
  Address: _________________________________________________________________
  Phone Number: ____________________________________________________________
  Email: ____________________________________________________________

Attach comments by person conducting interview, and screening rating sheet, with all attachments.
APPENDIX F – TRAINING SYLLABUS

One-day initial training for all individuals who are included in data bank of vetted potential nominees for public member slots on health licensing boards.

1) Evolution of Licensing Boards
2) Why Boards Matter
3) Board Responsibilities
4) Board Governance
5) Why Public Members Matter
6) Challenges Public Members Face
7) Board Operations
8) Being an Effective Public Member
9) Board Actions that have Impacted Access, Quality, and Cost of Health Care
10) Public Members in Action: Illustrations of Ways Public Members Have Made a Difference