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Florida Department of Health Division of Medical Quality Assurance

2004–2005 Annual Report

Protecting and promoting the health of all persons in Florida by
diligently regulating healthcare practitioners and facilities.



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Executive Summary



During 2004–2005, the Department of Health’s Division of Medical Quality Assurance (MQA) continued to fulfill its mission “to protect and promote the health of all persons in Florida by diligently regulating healthcare practitioners and facilities.” This report, which was prepared pursuant to section 456.005, Florida Statutes, details MQA’s long-range policy planning and monitoring process. The information has once again been organized around the Sterling Criteria of management – leadership; strategic planning; customer and market focus; measurement, analysis, and knowledge management; human resource focus; process management; and organizational performance results – based on the Malcolm Baldrige Criteria, which are nationally recognized as the world-class standard for organizational excellence.

MQA continues its focus on leadership. As witnessed by the national regulatory appointments and accolades received by employees and board members alike, the division has established itself as a national leader.

The division continues to use its long-range plan (LRP) as the cornerstone to its strategic planning efforts. Grounded in the Sterling Criteria, the LRP solicits and incorporates stakeholder input; is the basis for improved process management and business results; depends heavily on measurement, analysis, and data management; and requires employee and board member participation.

As part of its customer and market focus, the division has continued to work with its key customer groups to obtain information about customers’ expectations, needs, and wants; utilized customer satisfaction surveys; continued to conduct meetings with partners to build relationships; and trained employees to deal more effectively with customers.

MQA’s measurement, analysis, and knowledge management is based on a wealth of data and information. This past year, the division upgraded its licensure data management system from the Practitioner Regulatory Administration and Enforcement System (PRAES) to the Customer Oriented Medical Practitioner Administration System (COMPAS). The system upgrade will offer greater flexibility in enhancing Web-based services for licensees.

Realizing the importance of its employees and the need for them to have one unified voice, the division places a strong emphasis on human resource focus. As such, the division has continued its focus on various employee trainings, to ensure its employees have the skills needed to excel. The division has also continued its focus on its Employee Recognition Program, which recognizes employees for meritorious achievement, including leadership, exemplary customer service, teamwork, and quality improvement.

Under process management, MQA has continued to adhere to its standard process-documenting system to compile policies and procedures for the various functions provided throughout the division. This ensures a comprehensive review of how functions are performed, providing the opportunity for process improvement. It also provides a standardized process for ensuring continuous quality throughout the division.

MQA’s commitment to organizational performance results was demonstrated by one individual and six work-unit Davis Productivity Awards, recognition of its disciplinary efforts as a national leader, and an increase in severe disciplinary outcomes.

Message from the Director

On behalf of all the healthcare practitioners and their boards and councils, it is my pleasure to present this year's annual report and long-range plan. This is in compliance with the requirements of section 456.026, Florida Statutes, for the Department of Health's Division of Medical Quality Assurance (MQA). During this past year, we have continued our customer-focused initiatives, gathering information to design and support measures of our organizational business results, and finding ways to improve the services we provide to our state's healthcare consumers and licensees.

This past year will certainly go down in the history books as the year that tested and strengthened this division and the entire department in its response to a record number of hurricanes. Yes, Charlie, Frances, Ivan and Jeanne gave us an opportunity to see just how selfless and generous this staff is. They gave thousands of hours to help support assistance efforts while continuing to perform their everyday work.

The Sterling Model, adopted by MQA a number of years ago, continues to be the roadmap we use in our journey toward organizational excellence. As we have done in the past, this year's annual report is organized around the Sterling criteria – leadership; strategic planning; customer and market focus; measurement, analysis, and knowledge management; human resource focus; process management; and organizational performance results.

Fiscal Year 2004-2005 heralded a number of accomplishments, not the least of which was the upgrade of our licensure data management system (PRAES) to the Customer Oriented Medical Practitioner Administration System (COMPAS). This conversion, in keeping with our customer focus, will allow greater flexibility in enhancing Web-based services for our licensees.

Our employees and board members continued to shine in the national arena, receiving national recognitions and appointments to national regulatory boards.

As a division, we are proud of what we have achieved, but are also aware our journey toward excellence is just that—a journey. With our long range plan as our roadmap, and with the invaluable input of our customers and stakeholders, we are excited, committed and confident that we will continue to stay true to our mission to promote and protect the health of all persons in Florida by diligently regulating healthcare practitioners and facilities.

Lucy C. Gee, M.S.

Director

Division of Medical Quality Assurance



Unlicensed Activity Program Continues to See Results

Fiscal Year (FY) 2004-2005 was a busy one for

MQA's Unlicensed Activity (ULA) Program. The ULA Program once again saw an increased number of investigators, expansion to additional cities, and an all-time high in complaints received and cases resolved. In FY 2004-2005, the ULA Program received 678 complaints, resulting in the issuance of 134 cease and desist orders, and 157 arrests.

The ULA program protects Florida's residents and visitors from the potentially serious and dangerous consequences – further injury, disease, or even death – of receiving medical and healthcare services from an unlicensed person. The unlicensed activity unit works in conjunction with law enforcement and the state attorney's offices to prosecute individuals practicing without a license.

One such case handled by the ULA Program involved the unlicensed practice of medicine. The division received a complaint, in which the victim stated that an unlicensed individual performed plastic surgery, gave her a narcotic, and performed surgical procedures on her without her consent. Although not licensed in Florida as a medical doctor, the subject had appeared on TV representing himself as a plastic surgeon, and had business cards printed with his name and the title "Dr." The investigation revealed that the unlicensed individual was working in conjunction with his brother, a licensed medical doctor, who was also arrested for aiding and abetting an unlicensed doctor.

Subsequent to his arrest, over 40 additional victims came forward to report that the unlicensed individual had performed surgeries on them, as well.

The Department of Health has several resources to combat unlicensed activity:

- **Consumers are encouraged to use the department's web site at: www.doh-mqaservices.com, where they can conveniently view the license information for their healthcare practitioner.**
- **Complaints may be filed anonymously by completing and mailing the complaint form, also located on the DOH web site, or by calling 1-877-HALT-ULA.**

During the coming year, the ULA Program expects a continued increase in the number of complaints received and cases resolved, as their law enforcement and community outreach efforts continue throughout the state.



The History of the Data of the Division of Medical Quality Assurance

The programs within the Division of Medical Quality Assurance have been located in several agencies throughout the years.

Originally, these programs were housed in the Department of Professional and Occupational Regulation. Reorganization in 1979 created the Department of Professional Regulation which then became the Department of Business and Professional Regulation in 1992. Programs transferred to the Agency for Health Care Administration in 1994 and then to the Department of Health in 1997, with the enforcement component remaining at the Agency for Health Care Administration until reuniting with the licensure program in 2002. These transitions provided challenges to the continuity and effectiveness of the licensure and enforcement programs, specifically data collection, as each agency had their own data collection methods.

The programs within the division began manually collecting licensure data in the 1960s. With the reorganization to the Department of Professional Regulation in 1979, programs began electronically collecting data. To keep up with ever-changing technology and the increasing demands for information, the division has gone through four data conversion projects since 1979, the latest conversion project completed in June 2005. Data conversions oftentimes reveal data voids or errors due to the different types of collection methods used in previous data systems. For example, Social Security numbers were not collected until the enactment of the Personal Responsibility and Work Opportunity Reconciliation Act requiring this information for child support enforcement. Another issue with data is the consistency in the way data is entered into the database, for example, Florida State University may be entered as FSU, Fla. State, or Florida State University. Additionally, there is always the possibility of human error, for example, transposition of numbers in a licensee's date of birth.

While the division has made great strides in ensuring the quality of our data, errors have been discovered and with ongoing quality assurance reviews, will continue to be discovered in the future. We are trying to homogenize data that came from different processes or lack of processes in terms of data entry. The division understands that to improve processes and assess quality and improvement, it is necessary to ensure valid data. We are committed to improving the reliability and validity of our data. This year, a unit was created specifically for this purpose. By establishing the Data Management Unit, the division commits to:

- **Establish data collection standards and definitions.**
- **Provide accurate and timely data.**
- **Provide consistent, reliable data.**
- **Create a quality assurance system – all reports will go through a standardization review.**
- **Establish an evaluative system for report generation to meet requests and needs of our stakeholders, e.g., develop standard reports that customers can access through our website.**
- **Maintain a system for periodic review through policy development and performance measurement.**
- **Create a glossary of terms, including naming conventions, boundaries, and specifications.**



Structure of MQA



Healthcare regulatory boards are created in Chapter 456, Florida Statutes, under the Department of Health within the Division of Medical Quality Assurance.

Advisory councils are created within individual practice acts. It is the Legislature's intent that healthcare professions shall be regulated only for the preservation of the health, safety, and welfare of the public. We regulate, as directed by law, because the unregulated practice of a healthcare profession has the potential to cause harm or endanger the public; the public is not already effectively protected by other laws or local regulation; and, a less restrictive way to regulate the profession is not available.

Boards are responsible for approving or denying applicants for licensure and routinely handle requests for declaratory statements (interpretations of statutes and rules) and waivers or variances from their rules. Boards are involved in disciplinary hearings, rule promulgations, and developing proposed legislation. The range of disciplinary actions taken by boards includes citations, fines, suspensions, reprimands, probations, and revocations, as well as continuing education requirements and mandatory participation in intervention programs. When provided for in their individual practice acts, board members approve continuing education providers and/or courses for their licensees. Board members partner with the division to develop and implement a long-range policy plan that is submitted to the Governor and Legislature each year.

Boards and councils are composed of consumer and professional members with the number and other requirements established under each individual practice act. Board members are appointed by, and serve at the pleasure of, the Governor. Each board member is accountable to the Governor for the proper performance of duties as a member of the board. Council members are appointed by either the DOH Secretary or the supervising board.

Persons who are interested in being considered for appointment to any regulatory board may request a gubernatorial questionnaire from the Governor's Executive Office through its 2005 Boards and Commissions web page at www.myflorida.com. Type "2005 Boards" in the search box, then click on "2005 Boards and Commissions" in the search matches box, and then click on Gubernatorial Appointments Questionnaire PDF Format. They may also obtain a form by calling the Governor's Appointments Office at (850) 488-2183. Persons who are interested in being considered for an appointment to any advisory council may also contact the Department of Health at: www.doh.state.fl.us/mqa.

Leadership

Leadership addresses how senior leaders guide an organization in setting organizational values, directions, and performance expectations. An emphasis is placed on communication with employees, review of organizational performance, the creation of an environment that encourages high performance, and how the organization practices good citizenship.

The Division of Medical Quality Assurance (MQA) prides itself on finding ways to create an environment for empowerment, innovation, and organizational agility. By focusing on employee satisfaction and empowerment, the division has experienced a number of positive results.

Highlights/Accomplishments

National Regulatory Board Appointments Board of Osteopathic Medicine Chairman James Andriole, D.O., was elected to the Federation of State Medical Boards (FSMB) Nominating Committee; Board of Osteopathic Medicine Executive Director Pamela King was elected to the Administrators in Medicine (AIM) Board of Directors; Board of Chiropractic Medicine Executive Director Joe Baker was elected to serve as the Executive Fellow on the Federation of Chiropractic Licensure Boards' Board of Directors; Board of Optometry Chairman Robert Easton, O.D., served as Secretary-Treasurer of the Association of Regulatory Boards of Optometry; Board of Medicine member Raghavendra Vijayanagar, M.D., served as a member of the Advisory Committee to the Director of the National Institutes of Health; and Board of Medicine member Tully Patrowicz, M.D., was elected to serve on the Federation of State Medical Boards Board of Directors.

Establishment of Chiropractic Profession Award The Board of Chiropractic Medicine instituted a "Distinguished Service to the Chiropractic Profession Award" to recognize licensees who have contributed to better regulatory protection.

National Honors Council on Licensed Midwifery Chair Jennie Joseph received the Outstanding Leadership Award from the International Center for Traditional Childbearing; and Florida Board of Medicine Immediate Past Chair Elisabeth Tucker, M.D., received the Physician of the Year Award and Businesswoman of the Year Award from the National Republican Committee, as well as the International Peace Prize Award;

National Contribution The Board of Massage Therapy participated in initial meetings to develop a national regulatory entity for massage therapy.

Conducted National Trainings Investigative Services Unit Chief Tom Hannah served as an instructor on a national level through the National Certified Investigator Training (NCIT) program, and made a presentation to the Administrators in Medicine (AIM) titled *The Investigative Process and the Sharing of Information from State to State*.

Governor's Recognition The Florida Board of Medicine was recognized by Governor Bush for its leadership role in improving quality of health care, increasing patient safety, and increasing efficiency.

Presentation to Florida Bar The Prosecution Services Unit (PSU) presented a mock license disciplinary action at a Continuing Legal Education event sponsored by The Florida Bar.





Presentations to Professional Associations and Student Organizations As part of its educational outreach program, the Investigative Services Unit conducted numerous presentations to both professional and student organizations on a range of topics, including background on common violations, as well as laws and rules education.

Fred T. Mahaffey Award The National Association of Boards of Pharmacy (NABP) honored the Florida Board of Pharmacy with the Fred T. Mahaffey Award for demonstrating exemplary performance in advancing the protection of the public health through the enforcement of federal laws and regulations.

State Awards Florida Board of Pharmacy member Eric Alvarez, Pharm. D., received the Interamerican Pharmacists Association Roman Corrons Inspiration and Motivation Award from the Florida Pharmacy Association.

Working to Address Drug Diversion Members of the Investigative Services Unit have been participating as members of the Drug Diversion Response Teams across the state that have been responsible for criminal arrests and emergency suspensions of practitioners operating illegal Internet pharmacies and diverting controlled substances.

Sterling Award Florida Board of Nursing Executive Director Dan Coble, and Bureau of Operations Chief Lola Pouncey were the recipients of the Medical Quality Assurance (MQA) Director's Sterling Award. This award is given twice a year to an individual within MQA that best demonstrates the implementation of the Sterling Criteria in the organization.

Key to City of Miami The Florida Board of Nursing was recognized for their efforts to eliminate the nursing shortage by the Miami-Dade County Office of the Mayor and Board of County Commissioners with the presentation of the Key to the City of Miami.

Boards Recognized as National Leaders The Board of Osteopathic Medicine was awarded the AIM Best of the Boards award for their work with increasing access to patient care.

Strategic Planning

Although all the Sterling Criteria are significant, strategic planning is the only means that exclusively looks to the future of the organization.

Although a strategic plan is a road map for accomplishing our mission two to five years into the future, it must be refreshed and modified as circumstances change and as objectives are accomplished. A broad-based group of MQA employees has achieved the objective of developing a methodology and schedule for the annual review and revision of our plan. Part of the process of aligning our work processes and performance measures includes addressing ways to familiarize all MQA employees with the plan and involving them in accomplishing plan goals. A vital and continuing part of strategic planning is receiving input from our many stakeholders; our planning team has incorporated this significant task into our annual planning. Together we can ensure that our strategic plan remains the effective “map” that guides us to realize our vision.

In this section, you can view our previous long-range plan alongside our new plan. There are several key principles that guide MQA in creating our strategic plan:

- It is grounded in the Sterling Criteria.
- It solicits and incorporates input from our stakeholders on a periodic basis.
- It is the basis for improved process management and our noteworthy business results.
- It depends heavily on our measurement, analysis, and data management.
- It requires the participation of all our employees and board members to achieve success.

Highlights/Accomplishments

Merged Record Management Functions The division merged its record management functions to form a single point of contact for our customers.

Shutting Down Unlicensed Internet Pharmacies Consumer Services Unit staff have implemented a plan to identify unlicensed Internet pharmacies that are practicing in the state, and they are working with FDLE to obtain information that may be used to criminally prosecute this unlicensed practice.

Meeting Federal Requirements Through process mapping, the Florida Board of Nursing developed a business plan to meet federal requirements for Certified Nursing Assistant renewal by 2006.

Addressed Board Deficit The Board of Nursing Home Administrators reviewed all fees and increased them, where necessary, in order to address the board’s deficit. A one-time assessment of \$200 was adopted to bring in additional revenue to offset the board’s actual and anticipated deficit.

Added Needed Specialties The Board of Clinical Laboratory Personnel added the specialties of andrology and embryology as licensure categories, meeting a growing need in the area of human reproduction.

Added New Profession The Board of Medicine and Board of Osteopathic Medicine implemented new legislation, including the promulgation of rules to license anesthesiologist assistants in Florida. The boards granted licensure to the first applicant in 2005.





Creation of Partnership to Address Medicaid Fraud A partnership was developed between MQA Enforcement and the Agency for Health Care Administration's Medicaid Program Integrity (MPI) that has resulted in the signing of a Memorandum of Understanding and the routine referral of practitioners suspected of fraud and/or standard of care violations as well as the sharing of Medicaid claims data. Enforcement leadership and investigators meet monthly with MPI leadership and staff to coordinate efforts.

Long-Range Planning The division continued holding annual strategic planning meetings with the board/council chairs and professional associations.

2004–2005 Long Range Plan

GOALS:

I. Leadership

Create a self-sustaining culture where every employee is invested in our shared values.

II. Strategic Planning

Align work processes with our organization's long-range plan, thereby ensuring that improvement and learning reinforce our mission.

III. Customer & Market Focus

Integrate customer-driven excellence into our culture.

IV. Measurement, Analysis, and Knowledge Management

Systematically use information and data to manage change and improve processes in alignment with our mission.

V. Human Resource Focus

Develop motivated and empowered staff enabled to reach their full potential and achieve a high level of performance aligned with our objectives and action plans.

VI. Process Management

Manage our core and key processes to deliver ever-increasing value to our customers and improve our organizational effectiveness.

VII. Organizational Performance Results

Achieve superior performance results in customer satisfaction, products and services, fiscal soundness, human resources, and overall organization effectiveness that meet or exceed those of our competitors.



Objectives/ Tasks	Staff	Sterling References	Start Date	Due Date	Status & Comments
1. LEADERSHIP					
Goal: Create a self-sustaining culture where every employee is invested in our shared values.	Goal Owner: Amy Jones				
1.1 Define our shared values.		1.1 a (1)			COMPLETE
1.2 Establish performance expectations that shape the behaviors that exemplify our shared values, further our mission, and focus on our customers.		1.1 a (1) 1.1 b 1.2 a & b			COMPLETE
1.3 Integrate our performance expectations into the organization.		1.1 a (1) and (2)	6/1/05	7/1/05	COMPLETE
1.4 Develop and employ a systematic review of key performance results to improve organizational and leader success.		1.1 c	6/1/05	7/1/05	ON-GOING
2. STRATEGIC PLANNING					
Goal: Align work processes with our organization's long-range plan, thereby ensuring that improvement and learning reinforce our mission.	Goal Owner: Diane Orcutt				
2.1 Create and employ a strategy development process.		2.1 a	5/1/05	9/30/05	COMPLETE for 04/05
2.2 Annually develop/update strategic objectives.		2.1 b	On-going	10/31 of each year	COMPLETE for 04/05
2.3 Deploy strategic objectives through action plans aligned with performance measures.		2.2	6/1/05	6/30/06	ON-GOING

Objectives/ Tasks	Staff	Sterling References	Start Date	Due Date	Status & Comments
3. CUSTOMER & MARKET FOCUS					
Goal: Integrate customer-driven excellence into our culture.	Goal Owner: Lola Pouncey				
3.1 Identify customers aligned with each core/key business process.		3.1 a (1)			COMPLETE
3.2 Develop a system to determine, understand, anticipate, and respond to key customer requirements and expectations.		3.1 3.2			ON-GOING We've implemented the following systems: established annual planning meetings with professional associations; developed procedures for partnering with the professional associations to decrease the number of delinquent renewals; expanded our online services; and developed and implemented customer service training courses and established mandatory training requirements in our customer service policy.
4. MEASUREMENT, ANALYSIS, AND KNOWLEDGE MANAGEMENT					
Goal: Systematically use information and data to manage change and improve processes.	Goal Owner: Charlene Willoughby				
4.1 Develop and employ a performance measurement system that evaluates meaningful data for monitoring daily operations and supporting organizational decision-making related to core functions.		4.1	3/15/05	6/30/06	ON-GOING Bureau of Health Care Practitioner Regulation (HCPR) – 3 teams were created to map processes, recommend improvements and performance measures. Recommendations submitted and approved by the Bureau Chief and Executive Directors. Expanding to other Bureaus of MQA.
4.2 Develop a knowledge management system that makes needed data and information available to stakeholders.		4.2	6/15/05	6/30/06	

Objectives/ Tasks	Staff	Sterling References	Start Date	Due Date	Status & Comments
5. HUMAN RESOURCE FOCUS					
Goal: Develop motivated and empowered staff enabled to reach their full potential and achieve a high level of performance aligned with the division's objectives and action plans.	Goal Owner: Lorene Wilson				
5.1 Develop and implement a recruitment plan that supports our culture.		5.1 c			
5.2 Develop and deploy an effective succession plan for leadership and management positions.		5.1 c			COMPLETE MQA Leadership Model has been developed.
5.3 Evaluate and improve work systems to assess and promote cooperation, initiative, recognition of excellence, innovation, and communication.		5.1 a			
5.4 Develop employee work plans and provide feedback to employees that supports high performance and focuses on our customers.		5.1 b			ON-GOING Work plans are included as part of the Employee Development plan.
5.5 Develop and employ a training and career development support system that achieves our objectives and contributes to high performance.		5.2			Division has developed a Staff Development Training Policy.
5.6 Use employee feedback for improving our workplace and support climate.		5.3			ON-GOING

Objectives/ Tasks	Staff	Sterling References	Start Date	Due Date	Status & Comments
6. PROCESS MANAGEMENT					
Goal: Manage our core and key processes to deliver ever-increasing value to our customers and improve our organizational effectiveness.	Goal Owner: Susan Winter				
6.1 Design and re-engineer key processes to provide value to the division and its stakeholders.	Willoughby, Ruis, & team	6.1. a (1), (2) & (3)	12/99	ON-GOING	ON-GOING HCPR Analysis teams developed improvement & measure recommendations.
6.3 Design and re-engineer support processes to provide value to the division and its stakeholders.	Process owners	6.2	12/99	ON-GOING	ON-GOING HCPR Analysis teams developed improvement & measure recommendations.
7. ORGANIZATIONAL PERFORMANCE RESULTS					
Goal: Achieve superior performance results in customer satisfaction, products and services, fiscal soundness, human resources, and overall organizational effectiveness that meet or exceed those of our competitors.	Goal Owner: Lucy Gee				
7.1 Identify competitors and their performance levels on like services and products.		7.1-7.6			ON-GOING Completed for HCPR Expanding to other bureaus within MQA.
7.2 Compile data comparing our performance with those of our competitors.		7.1-7.6			ON-GOING HCPR - Identified available data from competitors Expanding to other bureaus within MQA.
7.3 Develop and modify organizational performance measures that utilize comparative data from competitors.		7.1-7.6			ON-GOING In progress-3 workgroups formed to develop measures for HCPR Expanding to other bureaus within MQA.

2005–2006 Long Range Plan

GOALS:

I. Leadership

Create a self-sustaining culture where every employee is invested in our shared values.

II. Strategic Planning

Align work processes with our organization's long-range plan, thereby ensuring that improvement and learning reinforce our mission.

III. Customer & Market Focus

Integrate customer-driven excellence into our culture.

IV. Measurement, Analysis, and Knowledge Management

Systematically use information and data to manage change and improve processes in alignment with our mission.

V. Human Resource Focus

Develop motivated and empowered staff enabled to reach their full potential and achieve a high level of performance aligned with our objectives and action plans.

VI. Process Management

Manage our core and key processes to deliver ever-increasing value to our customers and improve our organizational effectiveness.

VII. Organizational Performance Results

Achieve superior performance results in customer satisfaction, products and services, fiscal soundness, human resources, and overall organization effectiveness that meet or exceed those of our competitors.

1. LEADERSHIP

Goal Owner: Lucy Gee	Goal: Manage our core and key processes to deliver ever-increasing value to our customers and improve our organizational effectiveness.
	1.1 Establish a leadership enhancement system available to all staff that includes mentoring at all levels. Sterling References: 1.1(a) Start Date: 7/1/05 Due Date: 6/30/06
	1.2 Develop and employ a systematic review of key performance results to improve organizational and leader success. Sterling References: 1.2 b(2) Start Date: 6/1/05 Due Date: 6/30/07

2. STRATEGIC PLANNING

Goal Owner: Diane Orcutt	Goal: Align work processes with our organization's long-range plan, thereby ensuring that improvement and learning reinforce our mission.
	2.1 Create and employ a strategy development process. Sterling References: 2.1 a Start Date: 5/1/05 Due Date: 9/30/05
	2.2 Annually develop/update strategic objectives. Sterling References: 1.1(a) Start Date: On-going Due Date: 10/31 of each year
	2.3 Deploy strategic objectives through action plans aligned with performance measures. Sterling References: 2.2 Start Date: 6/1/05 Due Date: 6/30/06

3. CUSTOMER & MARKET FOCUS

Goal Owner: Lola Pouncey	Goal: Integrate customer-driven excellence into our culture.
	3.1 Develop a system to determine, understand, anticipate, and respond to key customer requirements and expectations. Sterling References: 3.1;3.2 Start Date: 7/1/05 Due Date: 6/30/06

4. MEASUREMENT, ANALYSIS, AND KNOWLEDGE MANAGEMENT

Goal Owner: Charlene Willoughby	Goal: Systematically use information and data to manage change and improve processes.
	4.1 Develop and employ a performance measurement system that evaluates meaningful data for monitoring daily operations and supporting organizational decision-making related to core functions. Sterling References: 4.1(a) Start Date: 3/15/05 Due Date: 6/30/06
	4.2 Develop a knowledge management system that makes needed data and information available to stakeholders. Sterling References: 4.2(a) Start Date: 6/15/05 Due Date: 12/31/06
	4.3 Develop a system of management by data that is linked to performance measures and customer satisfaction. Sterling References: 4.2(b) Start Date: 6/15/05 Due Date: 12/31/06
	4.4 Develop an enhanced data integrity system applicable to all staff. Sterling References: 4.2(c) Start Date: 6/15/05 Due Date: 6/30/06

5. HUMAN RESOURCE FOCUS

Goal Owner: Lorene Wilson	Goal: Develop motivated and empowered staff enabled to reach their full potential and achieve a high level of performance aligned with the division's objectives and action plans.
	5.1 Develop and implement a recruitment plan that supports our culture. Sterling References: 5.1(c) Start Date: 7/1/05 Due Date: On-going
	5.2 Evaluate and improve work systems to assess and promote cooperation, initiative, recognition of excellence, innovation, and communication. Sterling References: 5.1(a) Start Date: 7/1/05 Due Date: On-going

5. HUMAN RESOURCE FOCUS

Goal Owner:
Charlene Willoughby

5.3 Develop employee work plans and provide feedback to employees that supports high performance and focuses on our customers.

Sterling References: 4.1(a)

Start Date: 3/15/05

Due Date: 6/30/06

4.4 Develop and employ a training and career development support system that achieves our objectives and contributes to high performance.

Sterling References: 4.2(a)

Start Date: 6/15/05

Due Date: 12/31/06

5.5 Develop and implement plan to provide cross-training of employees within units and across all units and bureaus of the Division.

Sterling References: 4.2(b)

Start Date: 6/15/05

Due Date: 12/31/06

5.6 Use employee feedback for improving our workplace and support climate.

Sterling References: 4.2(c)

Start Date: 6/15/05

Due Date: 6/30/06

6. PROCESS MANAGEMENT

Goal Owner:
Susan Winter

Goal: : Manage our core and key processes to deliver ever-increasing value to our customers and improve our organizational effectiveness.

6.1 Design and re-engineer key processes to provide value to the division and its stakeholders.

Sterling References: 5.1(c)

Start Date: 7/1/05

Due Date: On-going

6.2 Design and re-engineer support processes to provide value to the division and its stakeholders.

Sterling References: 5.1(a)

Start Date: 7/1/05

Due Date: On-going

7. ORGANIZATIONAL PERFORMANCE RESULTS

Goal Owner:
Pamela King

Goal: : Achieve superior performance results in customer satisfaction, products and services, fiscal soundness, human resources, and overall organizational effectiveness that meet or exceed those of our competitors.

7.1 Identify competitors and their performance levels on like services and products.

Sterling References: 7.1-7.6

Start Date: 2/05

Due Date: 12/31/06

7.2 Compile data comparing our performance with those of our competitors.

Sterling References: 7.1-7.6

Start Date: 2/05

Due Date: On-going

7.3 Develop and modify organizational performance measures that utilize comparative data from competitors.

Sterling References: 7.1-7.6

Start Date: 3/15/05

Due Date: 12/31/06

Customer and Market Focus

The customer and market focus category of the Sterling

Criteria examines an organization's processes for determining customer satisfaction and obtaining information about current and future customers with the aim of understanding longer-term and emerging customer requirements and expectation. This criteria also examines how an organization builds relationship with customers and determines the key factors that lead to customer satisfaction, retention, loyalty, and organizational expansion.

The division established a goal of creating a culture of customer-driven excellence. As an organization focused on our customers, we realize that nothing is more important than the quality of service we provide. As such, this year we looked at how our services and modes of customer access to our services contribute value to customers. This was achieved through the use of focus groups and customer satisfaction survey instruments.

Highlights/Accomplishments

Promotion of Dangers of Unlicensed Activity to the Public The division oversaw an unlicensed practice education campaign for the Board of Speech-Language Pathology and Audiology, as well as numerous media releases about individuals arrested for practicing various health care professions without a license.

Patient Safety The Electrolysis Council has continued dialogue with other boards concerning professionals and non-professionals performing laser hair removal.

Working with Other Entities to Address Unlicensed Activity The Dietetic and Nutrition Practice Council continued its efforts to notify entities employing persons who may be practicing beyond the scope of their license and/or unlicensed persons performing nutrition assessments.

Improvements to Licensure Process The Board of Psychology deleted the time limit for passing both parts of the examination and submitting evidence of completed post-doctoral work experience. This allows the applicant a greater length of time to pass all the requirements for licensure.

Sharing of Physician Data with National Program The Board of Osteopathic Medicine pilot began sharing physician data with the DocFinder program — a national website that allows consumers to obtain information about physicians throughout the United States.

Accommodations for Active Military Personnel The Board of Psychology amended its rule to allow applicants on military active duty to have a doctoral-level psychologist licensed in good standing in any state to supervise them during their post-doctoral level supervision while in the service. This exception for a supervisor reduced the number of petitions for waiver or variance of a rule that came before the board, and reduced costs to the board.

Physician Recognition Awards The Board of Medicine and Board of Osteopathic Medicine continued their recognition award programs to honor exemplary physicians.





Medical School Training Program The Florida Board of Medicine implemented a pilot training program. Board member Terence McCoy, M.D., provided classroom instruction on medical licensure regulation to the FSU Medical School.

Long Range Planning Meetings The division continued holding annual strategic planning meetings with the board/council chairpersons and professional associations.

Student Education Board members and staff continued to attend schools throughout Florida to educate students about the application and licensure process.

Public Outreach Investigative Services team members made numerous presentations to public, professional and educational groups on the complaint process and how to avoid complaints being filed. ISU staff also spoke in several national forums to share their successes in the investigative process. Florida Investigative Services and MQA enforcement is viewed as a benchmark by many other states.

New Inspection Program for Optical Establishments Training was held on a statewide basis and new inspection forms completed with the assistance of the Board of Opticianry. Optical establishments are inspected every two years and ISU has more than exceeded their goal for the first year.

Increased Access to Examinations and Examination Results The Division outsourced the administration functions for the dental licensing examination, offering improved customer service by increasing the number of exam administrations from two exam dates to four exam dates annually and by offering preliminary examination results onsite.

Faster Release of Exam Scores The Division improved the overall score release for all examinations from an average of 14 days to an average of 11 days, highlighted by the release of Opticianry clinical examination scores from 14 to 5 days.

A Guide to the Florida Practitioner Profile A guide was developed, and posted to the Division's website, to help consumers understand the information collected and published on a practitioner's profile.

Focus Groups The division conducted focus groups in major cities around the state to obtain information from customers about the user-friendliness and practicality of the Practitioner Profile and Online Services websites. These sessions were held after implementing improvements recommended by focus group sessions held in FY 2003 -2004.

Automated Standardized Data Reports The division automated standardized data reports, thereby offering MQA customers the ability to download the data reports online at no charge.

Secured Telephone Language Translation Services To ensure that all customers receive the proper service, the division secured telephone language translation services.

Clarifying Rules Regarding Professional Advertising The Board of Chiropractic Medicine has continued to work diligently on clarifying rules regarding professional advertising in an effort to control any misleading information being presented to the residents of Florida.

Increased Required Liability Coverage The Board of Podiatric medicine voted to increase required liability coverage for doctors of podiatric medicine from \$50,000 to \$100,000

WebBoards The boards of Medicine, Nursing and Pharmacy continue to provide a subscription service to their customers through the use of WebBoards. At the present time, the three (3) MQA WebBoards are providing information access to over 6,000 customers. Because of the demonstrated success of WebBoards with no out-of-pocket money, there are plans to upgrade the software that supports the service and expand the number of WebBoards within MQA.

Addressed Nursing Shortage As part of the Florida Board of Nursing's efforts to reduce the shortage of nurses, the NCLEX (national examination) is offered for visa screening purposes through the National Council of State Boards of Nursing for those nurses needing to meet immigration requirements.



Measurement, Analysis, and Knowledge Management

Measurement, analysis, and knowledge management serves as a key goal in the Division's strategic plan. The purpose of this goal is to achieve key organizational

performance results and strategic objectives by collecting and analyzing data to identify and respond to changing trends in the organization and the health care industry. In simple terms, what gets measured gets managed.

The division has begun an initiative to inventory all documented processes in policy. These documented processes are used to develop performance measures. The division collects data and information to determine the workload demands and productivity, and to evaluate the performance of the licensure and enforcement programs. Collected data is analyzed to identify opportunities for improvements in our processes.

In addition, the data is used to determine trends, conduct strategic planning, and also for setting goals and priorities for these programs. Currently, data is used internally for comparisons and to identify best practices within the division. In the coming year, the division will focus on comparisons to other states to establish national benchmarks. This is expected to continue the momentum for a better understanding of our processes, resulting in significant improvements.

Highlights/Accomplishments

Florida Continues as National Leader in Disciplinary Activity The joint efforts of the Florida Board of Medicine, its staff, and the division's Consumer, Investigative and Prosecution Services Units resulted in Florida once again leading the nation in disciplinary activity among large states, according to the Federation of State Medical Boards (FSMB) Annual Report.

Computer-Based Testing The division successfully transitioned the paramedic, chiropractic x-ray, dental prosthetic, and optometry pharmacology exams to computer-based testing.

Nationally Recognized Research Staff of the Board of Nursing presented the results of research projects dealing with the effect of special endorsement provisions in the Nursing Shortage Solutions Action of 2002, comparison of disciplinary actions before and after a board rule change, and satisfaction with credential evaluation services to the National Council of State Board of Nursing's annual meeting.

Upgraded Licensure Data Management System The division upgraded its licensure data management system from the Practitioner Regulatory Administration and Enforcement System (PRAES) to the Customer Oriented Medical Practitioner Administration System (COMPAS). The system upgrade is based on an Oracle database platform, which assists the agency's migration to a consolidated database platform and offers greater flexibility in enhancing web-based services for licensees.

Developed Statistical Data Forms The Council on Licensed Midwifery developed a new statistical data form to capture pertinent information related to home births.

Assisted with Development of National Dentistry Examination Current and former members of the Board of Dentistry took part in national meetings to discuss development of a national clinical examination.

Renewal Outreach Program The division continued its successful outreach program with professional associations to improve customer service during the renewal cycle.

Development of Board-Specific Strategic Plans The boards began work on developing specific goals and measures for their strategic plans.



Human Resource Focus

The Human Resource Focus of the Sterling Criteria looks at how an employee's skill and motivation and the organization's processes assist the employee to develop and utilize their full potential in alignment with the organization's overall objectives and strategy.

This year the Division of Medical Quality Assurance focused on developing a leadership model to enhance organizational performance.

The leadership development model is based on a leadership index consisting of 30 measures related to leadership behaviors approved by the division's management team. The measures help leaders understand leadership goals, behaviors, measures, and criteria. Employees who want to move into leadership positions may use this index to learn behaviors expected of them. Supervisors may use this index to help develop leadership in employees who report to them. Managers who want to improve their leadership may use the index to learn more about leadership behaviors.

Highlights/Accomplishments

20/20 Performance Feedback Employees and supervisors were given the opportunity to provide performance feedback to MQA supervisors, administrators and managers utilizing the 20/20 performance feedback system. The review criteria were based on the MQA leadership behaviors.

Employee Development Plan A team of supervisors and administrators led by the MQA Quality Improvement Unit developed an employee development plan for supervisors to identify their development and training needs and how to plan to meet those needs. The plan was used to develop a training plan for improvement opportunities identified in the 20/20 Performance Feedback

County Health Department Training The Investigative Services Unit provided statewide training to the County Health Departments who began performing inspections for massage, dental lab and electrolysis establishments. The result of this initiative is the availability of more inspectors, leading to quicker response times for our licensees.

Annual Investigator Training The Investigative Services Unit provided a statewide annual training in Orlando for investigators and prosecutorial staff from Consumer Services, Investigative Services, Unlicensed Activity and Prosecution Services units. The training was designed for staff to meet and discuss updates in statutes, rules and policies, to promote teambuilding, and to provide advanced knowledge of medical and healthcare-related subjects.

Annual Consumer Services Unit Retreat The Consumer Services Unit provided a one-day off-site training for staff to meet and discuss updates in statutes, rules, policies and procedures related to complaint analysis and investigation of medical and healthcare-related complaints.

Basic Investigator Training The Investigative Services Unit provided two Basic Investigator trainings in Tallahassee for new investigators. The training was for all new investigators in Consumer Services, Investigative Services, and Compliance Management units to receive a basic training and orientation of statutes, rules, policies and procedures.



Employee Enhancement The division continued its support of employees enhancing their job skills by attending the Certified Public Manager (CPM) training program.



Employee Recognition MQA's Employee Recognition Program encompasses meritorious achievement, Thanks-a-Million, and years of service. During Fiscal Year 2004-2005, MQA presented 524 certificates of nomination to employees who were nominated by a co-worker as either an individual or team member.



Unlicensed Activity Training The division continued annual training for unlicensed activity investigators throughout the state.



Process Management

In 2000, soon after committing to manage with the

Sterling model, MQA began creating its process management system. The system ensures a closer link between customer satisfaction and production and delivery of all medical quality assurance products, programs, and services. It ensures that MQA processes are well-ordered and repeatable, and uses data and information to improve and learn.

First, MQA set up an electronic process index, then identified and documented its core processes, which are licensing and enforcement. Teams analyzed and documented the core processes into key processes, such as: application intake, testing, application review, issuing licenses, renewing licenses, complaint intake, investigation, prosecution, and discipline. The keystone to MQA's organizational learning, managers use the documented processes to communicate and train employees how to perform procedures. The documented processes are the procedural part of MQA policies.

Beginning in 2003, upgrade teams began using documented processes to determine features of its new computer system (COMPAS) needed to support business processes. It completed its business process analysis for COMPAS during 2004-2005.

Our enforcement units have already been operating with process performance measures. They have daily, weekly, and monthly measures that they use to monitor their processes. However, during this year, to reach its next milestone in controlling service quality, MQA began using its documented processes to develop performance measures for its licensing core process. It used documented processes to map common licensing processes across seven executive board offices.

Teams used the maps to identify tasks and process inputs, outputs, and cycles that need to be measured to control quality. They reviewed documented processes for effectiveness, efficiency, and other accountability and to identify needed improvements. They have recommended process measures and improvements to the processes.

During analysis for COMPAS and licensing performance measures, teams learned that MQA's rigorous process documentation system works well.

Highlights/Accomplishments

Improved Disciplinary Violation Process The Board of Psychology amended its disciplinary guidelines rule to include the range of penalties that may be imposed from first offense to third offense of the violation. This made it more clear, thereby aiding the Consumer, Investigative and Prosecution Services Units in determining the proper violation.

Process Mapping The Florida Board of Nursing developed detailed process maps of the Certified Nursing Assistant(CNA) Registry procedures to ensure integration into the MQA business processes. The maps were an integral component needed for successful strategic planning to meet federal regulations by 2006.

Improved Coordination with State and Federal Law Enforcement The Prosecution Services Unit improved coordination with state and federal law enforcement, resulting in more emergency actions and better protection of the public.





Online Application for Managing Licensing Images The division developed an online application for managing stored licensing images, allowing employees to search from one location and retrieve data from multiple databases.

Improved Renewal Methods The division implemented a one page self-sealed mailer for mailing renewal information to practitioners.

Mapping of Disciplinary Compliance Monitoring Process The division completed a comprehensive process mapping of the Disciplinary Compliance Monitoring Process.

Assistance for Indigent Nurses The division began a program with the Intervention Project for Nurses (impaired practitioner program) whereby MQA will pay for indigent nurses to have initial evaluations for impairment. This helps nurses get into the program quickly and often results in nurses obtaining treatment rather than entering the disciplinary process.

Addressing Criminal Activity The division has made changes to forms and coding, making it easier to report and track complaints which may involve criminal activity.

Organizational Performance Results

The Organizational Performance Results criteria provide a results focus that encompasses customers' evaluations of organizational products, services, and programs, as well as overall financial, budgetary, and market performance. It also encompasses employee and work-system results, governance structure and social responsibility, and results of all key processes and process improvement activities. These criteria provide "real-time" information for evaluation and improvement.

The tables listed in the appendices of this report detail the key data, including number of licensed practitioners, revenue/expenditures, projected cash balances, and a review of the adequacy of existing fees.

Highlights/Accomplishments

Increase in the Number of Legally Sufficient Complaints Resulting in Mediation, Disciplinary Citations and Non-Disciplinary Citations The number of legally sufficient complaints resulting in mediation, disciplinary citations and non-disciplinary citations increased during the year, both in total numbers and as a percentage of total complaints. Approximately 12.8 percent of all legally sufficient complaints were offered for alternative dispute resolution, and over 78 percent of those were successfully resolved with a significant savings.

Complaint Analysis The Consumer Services Unit consistently exceeded timeliness measurements by completing complaint analysis in less than six days on average compared to their target of 10 days.

Increased Desk Investigations The number of desk investigations completed by the Consumer Services Unit increased from 959 the previous year to 1,313 in fiscal year 2004-2005.

Increase in Collected Fines, Costs and Citations Imposed fines, costs and citations increased by more than \$1 million over the previous fiscal year.

Increase in Severe Discipline The division saw an increase in license revocations and voluntary surrenders, along with a near-doubling of license suspensions.

Davis Productivity Awards The division received one individual and six work-unit Davis Productivity Awards.

Increased Productivity The number of pharmacy inspections completed by Investigative Services staff increased by more than 200, even with the numerous delays caused by a heavy hurricane season. MQA inspectors visited many pharmacies immediately following the storms to provide assistance.





Cases Upheld by District Court of Appeals The Prosecution Services Unit had five written court opinions in which the District Courts of Appeal ruled in the division's favor by affirming the final order and one written opinion in which the court reversed an award of attorney's fees entered against the department. The most visible of the court-authored opinions was *Daniels v. Department of Health*, 898 So.2d 61 (Fla. 2005) issued by the Florida Supreme Court on March 10, 2005. In *Daniels*, the Supreme Court held in the department's favor that the owner of a partnership or corporation who prevails in an administrative proceeding initiated by a state agency is not entitled to attorney's fees and costs under the Florida Equal Access to Justice Act when the complaint is filed against the owner in his or her individual capacity. This decision has been remediated by the Legislature in CS/SB 1010 which now allows owners of small businesses to so recover attorney's fees in their individual capacities.

100 Percent Success Rate on Appeals from Emergency Actions On appeals from emergency suspension orders and emergency restriction orders, the division received 10 orders (100 percent success rate) from the District Courts of Appeal denying the appeals filed by the suspended/restricted practitioners.

Exceeding Performance Standards The Florida Board of Nursing staff maintained a performance level of issuing a license, examination eligibility or deficiency letter within 12.2 days of receipt of fees. The outcome of this performance in exceeding the statutorily-required 30 days is an increase in active licensees by 4.1 percent for registered nurses, 6.6 percent for advanced registered nurse practitioners, 11.3 percent for licensed practical nurses, and 11.3 percent for certified nursing assistants.

Online Renewal Cost Savings Online renewal resulted in a cost savings of over \$270,000 for the MQA Trust Fund.

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Table 1 • Summary of Licensed Practitioners • July 1, 2004 – June 30, 2005

PROFESSION	FLORIDA ACTIVE	FLORIDA INACTIVE	FLORIDA DELINQUENT ACTIVE	FLORIDA DELINQUENT INACTIVE	OUT-OF-STATE ACTIVE	OUT-OF-STATE INACTIVE	OUT-OF-STATE DELINQUENT
Acupuncturist (Licensed)	1,400	36	51	9	164	47	32
Anesthesiologist Assistant	1	0	0	0	3	0	0
Athletic Trainer	1,125	27	213	2	68	13	35
Audiologist	783	11	51	5	46	2	22
Audiology Assistant	20	0	8	0	0	0	0
Provisional Audiologist	47	0	0	0	0	0	0
Certified Nursing Assistant	317,117	0	0	0	7,276	0	0
Chiropractic Physician	4,073	117	84	21	691	370	119
Registered Chiropractic Assistant	2,501	0	1	0	6	0	0
Certified Chiropractic Physician's Assistant	248	13	53	5	4	5	0
Clinical Laboratory Personnel	12,610	610	736	160	983	322	302
Clinical Laboratory Trainee	359	0	0	0	14	0	0
Clinical Laboratory Training Program	34	0	8	0	3	0	0
Clinical Social Worker	5,435	194	342	124	323	174	191
Provisional Clinical Social Worker	24	0	0	0	4	0	0
Clinical Social Worker Intern	1,616	0	533	0	23	0	28
Certified Master Social Worker	4	0	1	0	0	0	1
Dentist	9,284	67	143	83	1,882	82	239
Dental Hygienist	9,101	112	215	57	1,492	136	171
Dental Radiographer	8,246	0	1	0	57	0	1
Dental Teaching Permits	235	0	0	0	0	0	0
Dental Residency Permit	204	0	144	0	0	0	0
Dietitian/Nutritionist	2,666	18	565	33	138	8	138
Nutrition Counselors	174	13	68	15	19	0	5
Electrologist	563	24	93	5	26	3	9
Hearing Aid Specialists	762	10	205	8	23	2	21
Marriage and Family Therapist	1,181	74	102	46	79	44	32
Provisional Marriage and Family Therapists	7	0	0	0	2	0	0
Registered Marriage and Family Therapy Intern	367	0	129	0	7	0	6
Massage Therapist	23,081	353	2,724	330	1,833	160	659
Medical Doctor	38,160	348	790	111	10,944	985	1,334
Medical Doctor Public Psychiatry Certificate	2	0	0	0	0	0	0
Medical Doctor Public Health Certificate	4	0	0	0	0	0	0
Medical Doctor Limited to Mayo Clinic	7	0	0	0	0	0	0
Medical Doctor Limited to Cleveland Clinic	0	0	0	0	0	0	0
Limited License Medical Doctor	224	3	26	0	7	0	5
Medical Doctor Area Critical Need	52	1	4	0	7	1	0
Medical Doctor Medical Faculty Certificate	44	0	23	0	14	0	1
Medical Doctor Visiting Faculty Certificate	0	0	0	0	1	0	0
Medical House Doctor	307	0	1	0	0	0	0
Medical Doctor In-Training	2,730	0	60	0	736	0	37
Medical Doctor Restricted	3	0	0	0	0	0	0
Diagnostic Radiological Physicist	46	0	6	0	33	0	2
Therapeutic Radiological Physicist	154	1	9	0	36	1	14
Medical Nuclear Radio Physicist	35	0	4	0	26	0	2
Medical Health Physicist	30	1	1	0	14	1	3
Medical Physicist in Training	28	0	1	0	7	0	0
Mental Health Counselor	5,894	276	340	132	302	152	133
Provisional Mental Health Counselor	55	0	0	0	6	0	0
Registered Mental Health Counselor Intern	1,629	0	667	0	35	0	43

Table 1 • Summary of Licensed Practitioners • CONTINUED

PROFESSION	FLORIDA ACTIVE	FLORIDA INACTIVE	FLORIDA DELINQUENT ACTIVE	FLORIDA DELINQUENT INACTIVE	OUT-OF-STATE ACTIVE	OUT-OF-STATE INACTIVE	OUT-OF-STATE DELINQUENT
Midwifery	110	2	11	1	11	1	4
Naturopathic Physician	7	0	0	0	0	0	0
Advanced Registered Nurse Practitioner	9,764	68	318	28	1,537	105	338
Registered Nurse	160,202	2,672	9,627	1,238	23,115	2,138	8,528
Licensed Practical Nurse	56,574	934	4,191	210	4,438	351	939
Nursing Home Administrator	1,341	54	126	20	174	14	61
Nursing Home Admin. Provisional	13	0	0	0	0	0	0
Occupational Therapist	5,003	58	518	45	481	59	382
Occupational Therapy Assistant	1,384	15	220	23	96	14	82
Optician	3,159	88	268	81	144	37	74
Apprentice Optician	654	0	0	0	6	0	0
Optometrist	2,036	11	43	3	549	68	92
Orthotist	110	0	7	0	7	0	3
Orthotic Fitter	93	0	19	0	0	0	0
Orthotic Fitter Assistant	112	0	23	0	1	0	1
Prosthetist	74	0	3	0	5	0	2
Prosthetist-Orthotist	154	1	5	0	6	0	0
Pedorthist	79	0	8	0	0	0	2
Osteopathic Physician	3,345	32	58	9	1,107	230	144
Unlicensed Osteopathic Registration	213	0	530	0	48	0	188
Osteopathic Limited License	5	0	2	0	0	0	0
Osteopathic Faculty Certificate	0	0	0	0	0	0	0
Pharmacist	16,037	103	288	20	6,333	330	705
Pharmacist Intern	3,917	0	0	0	1,637	0	0
Consultant Pharmacist	2,114	76	356	83	121	21	55
Nuclear Pharmacist	148	4	9	1	45	9	9
Physical Therapist	9,261	171	407	40	1,450	388	506
Physical Therapist Assistant	4,215	97	216	31	281	75	92
Physician Assistant	3,558	31	114	7	367	27	88
Podiatric Physician	1,214	21	26	7	421	77	60
Certified Podiatric X-Ray Assistant	370	0	104	0	3	0	1
Psychologist	3,439	22	66	5	338	61	70
Provisional Psychologist	15	0	0	0	2	0	0
Limited License Psychologist	4	2	0	0	0	0	1
Registered Respiratory Therapist	4,634	121	534	93	244	65	255
Certified Respiratory Therapist	3,799	120	1,155	109	156	41	192
Respiratory Care Practitioner by Exam	0	0	0	0	0	0	0
Respiratory Care Practitioner Critical Care	78	2	16	6	2	0	2
Respiratory Care Practitioner Non-Critical Care	32	2	8	2	1	0	0
Respiratory Care Registered Student Exemption	74	0	383	0	0	0	1
School Psychologist	572	23	31	9	12	7	6
Speech-Language Pathology	5,200	50	244	16	307	31	75
Speech-Language Pathology Assistant	312	11	100	5	2	0	2
Provisional Speech-Language Pathology	458	0	1	0	13	0	0
Totals	756,555	7,100	28,437	3,238	70,794	6,657	16,545

***Definitions:**

Florida Active—The licensed practitioner has a Florida address of record and is clear to practice his/her profession in the state of Florida.

Florida Inactive—The licensed practitioner has a Florida address of record and is not authorized to practice his/her profession in the state of Florida because the practitioner inactivated his/her license.

Florida Delinquent Active—The licensed practitioner has a Florida address of record and is not authorized to practice his/her profession in the state of Florida because he/she failed to renew his/her active license by the expiration date.

Florida Delinquent Inactive—The licensed practitioner has a Florida address of record and is not authorized to practice his/her profession in the state of Florida because he/she failed to renew his/her inactive license by the expiration date.

Out-of-State Active—The licensed practitioner has an out-of-state address of record and is clear to practice his/her profession in the state of Florida.

Out-of-State Inactive—The licensed practitioner has an out-of-state address of record and is not authorized to practice his/her profession in the state of Florida because the practitioner inactivated his/her license.

Out-of-State Delinquent—The licensed practitioner has an out-of-state address of record and is not authorized to practice his/her profession in the state of Florida because he/she failed to renew his/her license by the expiration date.

Table 2 • Summary of Licensed Establishments • July 1, 2004 – June 30, 2005

PROFESSION	ACTIVE	DELINQUENT
Dental Laboratory	1,133	0
Electrolysis Facility	264	0
Massage Establishment	7,717	0
Office Surgery Registration	285	0
Optometry Branch Office	657	89
Optical Establishment Permit	1,352	0
Pharmacy	7,095	257
Total	18,503	346

Table 3 • CE Providers • July 1, 2004 - June 30, 2005

BOARD NAME	TOTAL APPROVED PROVIDERS (ACTIVE)	APPLICATIONS RECEIVED	LICENSES ISSUED	COURSES SUBMITTED
Florida Board of Acupuncture	72	20	20	455
Florida Board of Athletic Training	17	9	9	219
Florida Board of Chiropractic Medicine	38	6	6	588
Florida Board of Clinical Laboratory Personnel	175	28	28	4,892
Florida Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling	572	50	50	5,924
Florida Board of Dentistry	224	39	39	756
Florida Board of Hearing Aid Specialists	10	5	5	159
Florida Board of Massage Therapy	410	35	35	902
Florida Board of Medicine	40	12	12	611
Florida Board of Nursing	1,132	85	85	21,706
Florida Board of Nursing Home Administrators	56	22	22	587
Florida Board of Occupational Therapy Practice	149	30	30	1,431
Florida Board of Opticianry	15	1	1	684
Florida Board of Optometry	100	23	23	1,409
Florida Board of Orthotists and Prosthetists	4	2	2	178
Florida Board of Osteopathic Medicine	13	4	4	676
Florida Board of Pharmacy	133	28	28	871
Florida Board of Physical Therapy Practice	30	13	13	1,040
Florida Board of Podiatric Medicine	14	6	6	188
Florida Board of Psychology	125	28	28	3,360
Florida Board of Respiratory Care	128	20	20	3,756
Florida Board of Speech-Language Pathology and Audiology	81	7	7	661
Florida Council of Dietetics and Nutrition	31	9	9	1,028
Florida Council of Licensed Midwifery	4	2	2	2,866
Florida Council of Medical Physicists	4	2	2	9
Florida Electrolysis Council	10	5	5	270
Florida Office of School Psychology	19	3	3	3,080
Florida Physician Assistants	11	1	1	463

Table 4 • Workload Summary of Applications Received and Licenses Issued • July 1, 2004 – June 30, 2005

PROFESSION	NO. OF INITIAL APPS RECEIVED	NO. OF LICENSES ISSUED	PROFESSION	NO. OF INITIAL APPS RECEIVED	NO. OF LICENSES ISSUED
Acupuncturist (Licensed)	174	141	Apprentice Optician	152	136
Anesthesiologist Assistant	4	4	Optometrist	107	131
Athletic Trainer	218	209	Orthotist	7	4
Audiologist	61	52	Orthotic Fitter	24	9
Audiology Assistant	8	6	Orthotic Fitter Assistant	32	27
Provisional Audiologist	22	30	Prosthetist	10	10
Certified Nursing Assistant	6,781	3,321	Prosthetist-Orthotist	6	6
Chiropractic Physician	220	198	Pedorthist	17	19
Registered Chiropractic Assistant	878	847	Osteopathic Physician	375	313
Certified Chiropractic Physician's Assistant	141	64	Unlicensed Osteopathic Registration	202	210
Clinical Laboratory Personnel	831	591	Osteopathic Limited License	2	0
Clinical Laboratory Trainee	345	317	Osteopathic Faculty Certificate	0	0
Clinical Laboratory Training Program	5	1	Pharmacist	1,276	1,233
Clinical Social Worker	622	413	Pharmacist Intern	1,845	1,581
Provisional Clinical Social Worker	34	33	Consultant Pharmacist	104	87
Clinical Social Worker Intern	423	397	Nuclear Pharmacist	15	13
Certified Master Social Worker	3	1	Physical Therapist	779	601
Dentist	383	422	Physical Therapist Assistant	426	279
Dental Hygienist	575	666	Physician Assistant	591	538
Dental Radiographer	687	647	Podiatric Physician	88	54
Dental Teaching Permits	37	32	Certified Podiatric X-Ray Assistant	102	93
Dental Residency Permit	105	103	Psychologist	251	193
Dietitian/Nutritionist	226	216	Provisional Psychologist	17	12
Nutrition Counselors	0	0	Limited License Psychologist	2	1
Electrologist	122	109	Registered Respiratory Therapist	422	376
Hearing Aid Specialists	189	155	Certified Respiratory Therapist	459	392
Marriage and Family Therapist	108	62	Respiratory Care Practitioner by Exam	0	0
Provisional Marriage and Family Therapists	5	4	Respiratory Care Practitioner Critical Care	0	0
Registered Marriage and Family Therapy Intern	106	95	Respiratory Care Practitioner Non-Critical Care	0	0
Massage Therapist	3,316	2,805	Respiratory Care Registered Student Exemption	0	0
Medical Doctor	3,059	2,804	School Psychologist	38	30
Medical Doctor Public Psychiatry Certificate	0	0	Speech-Language Pathology	568	486
Medical Doctor Public Health Certificate	2	0	Speech-Language Pathology Assistant	111	81
Medical Doctor Limited to Mayo Clinic	0	0	Provisional Speech-Language Pathology	306	282
Medical Doctor Limited to Cleveland Clinic	0	0	Totals	54,761	47,198
Limited License Medical Doctor	23	17			
Medical Doctor Area Critical Need	15	10			
Medical Doctor Medical Faculty Certificate	22	12			
Medical Doctor Visiting Faculty Certificate	1	1			
Medical House Doctor	60	41			
Medical Doctor In-Training	1,085	1,056			
Medical Doctor Restricted	5	0			
Diagnostic Radiological Physicist	6	4			
Therapeutic Radiological Physicist	18	15			
Medical Nuclear Radio Physicist	5	5			
Medical Health Physicist	0	0			
Medical Physicist in Training	21	18			
Mental Health Counselor	432	447			
Provisional Mental Health Counselor	67	63			
Registered Mental Health Counselor Intern	579	508			
Midwifery	14	11			
Naturopathic Physician	0	0			
Advanced Registered Nurse Practitioner	1,054	955			
Registered Nurse	14,849	14,081			
Licensed Practical Nurse	7,560	7,196			
Nursing Home Administrator	95	78			
Nursing Home Admin. Provisional	3	2			
Occupational Therapist	533	453			
Occupational Therapy Assistant	178	160			
Optician	112	123			

**Table 5 • Performance Statistics for Examinations Developed and Administered by MQA
• July 1, 2004 – June 30, 2005**

PROFESSION	SCHEDULED	EXAMINED	FAILED	% FAILED	PASSED	% PASSED
Certified Designated Representative Laws & Rules (CBT)	757	411	117	28.5%	294	71.5%
Chiropractic Medicine						
Laws & Rules (CBT)	208	192	5	2.6%	187	97.4%
Physical Diagnosis Clinical	237	216	33	15.3%	183	84.7%
Technique Clinical	219	199	15	7.5%	184	92.5%
X-Ray Interpretation (CBT)	220	203	27	13.3%	176	86.7%
Dentistry						
Clinical	518	494	63	12.8%	431	87.2%
Laws & Rules (CBT)	551	524	60	11.5%	464	88.5%
Dental Hygiene						
Clinical	768	704	30	4.3%	674	95.7%
Laws & Rules (CBT)	824	759	129	17.0%	630	83.0%
Massage - Colonics (CBT)	16	11	1	9.1%	10	90.9%
Nursing Home Admin. Laws & Rules (CBT)	138	106	20	18.9%	86	81.1%
Opticianry						
Clinical	157	157	29	18.5%	128	81.5%
Lens Neutralization Clinical	156	155	39	25.2%	116	74.8%
Optometry						
Laws & Rules (CBT)	148	143	3	2.1%	140	97.9%
Clinical	153	148	18	12.2%	130	87.8%
Pharmacology & Ocular Disease Clinical	188	176	31	17.6%	145	82.4%
Paramedic - Certification*	2,500	2,391	791	33.1%	1,600	66.9%
Psychology - Laws & Rules (CBT)	267	180	29	16.1%	151	83.9%
TOTALS						
Clinical Exams (non-CBT only)	4,896	4,640	1,049	22.6%	3,591	77.4%
Laws & Rules Exams	2,893	2,315	363	15.7%	1,952	84.3%
CBT Exams	3,129	2,529	391	15.5%	2,138	84.5%
ALL EXAMS	8,025	7,169	1,440	20.1%	5,729	79.9%

*Paramedic Number Scheduled is estimated - all other figures are actual

Note: This table includes statistics for only those examinations developed by the Department.

Table 6A• Emergency Orders Issued Against Healthcare Licensees •July 1, 2004 – June 30, 2005

PROFESSION	EMERGENCY RESTRICTION ORDERS	EMERGENCY SUSPENSION ORDERS	TOTAL EMERGENCY ORDERS
Certified Nursing Assistant	0	16	16
Chiropractic Medicine	0	14	14
Clinical Laboratory Personnel	0	1	1
Dentistry	0	4	4
Massage Therapy	0	1	1
Medicine	19	20	39
Mental Health Counseling	1	1	2
Nursing	3	104	107
Occupational Therapy	0	1	1
Osteopathic Medicine	2	6	8
Pharmacies	0	6	6
Pharmacists	0	9	9
Physical Therapy	1	0	1
Physician Assistant	1	1	2
Respiratory Care	0	2	2
Total	27	186	213

Definitions:

Emergency Restriction Order – An order issued by the Florida Department of Health stating that a practitioner may only practice in the state of Florida under restrictions specified by the department.

Emergency Suspension Order – An order issued by the Florida Department of Health suspending the license of a practitioner. A practitioner may not practice in the state of Florida while under an emergency suspension order.

Table 6B • Complaints and Reports Received and Investigations Completed • July 1, 2004 – June 30, 2005

PROFESSION	STATUTORY REPORTS	COMPLAINTS RECEIVED	LEGALLY SUFFICIENT ¹	INVESTIGATIONS COMPLETED ²	INSPECTIONS COMPLETED
Acupuncture	0	35	23	12	N/A
Athletic Trainer	0	17	16	1	N/A
Certified Nursing Assistant	607	566	637	691	N/A
Certified Social Worker	0	0	0	0	N/A
Chiropractic Medicine	43	315	199	101	N/A
Clinical Laboratory Personnel	5	112	79	24	N/A
Clinical Social Work	0	58	36	25	N/A
Dental Hygienists	0	0	0	0	N/A
Dental Labs	0	48	18	18	1,111
Dentistry	116	801	461	394	93
Dietetics and Nutritionist	0	15	7	5	N/A
Electrolysis	0	25	16	10	N/A
Electrolysis Facilities	0	3	3	2	235
Hearing Aid Specialists	1	175	95	51	N/A
Marriage and Family Therapy	0	16	8	10	N/A
Massage Establishments	0	145	102	66	7,891
Massage Therapy	1	216	163	131	N/A
Medical Physicist	73	4	1	2	N/A
Medicine	3,085	5,305	2,902	2,202	1,549
Mental Health Counseling	0	89	47	35	N/A
Midwifery	1	6	6	8	N/A
Naturopathic Medicine	0	0	0	0	0
Nursing	577	1,752	1,478	1,491	382
Nursing Home Administrators	96	33	38	32	N/A
Occupational Therapy	4	36	29	19	N/A
Optical Establishments	1	14	4	4	N/A
Opticianry	0	28	10	8	N/A
Optometry	7	50	23	27	12
Optometry Branch Offices	0	2	0	0	N/A
Orthotists & Prosthetists	2	18	18	54	N/A
Osteopathic Medicine	255	451	210	184	230
Pharmacies	5	619	387	338	7,228
Pharmacists	18	511	470	391	N/A
Physical Therapy	4	61	39	37	N/A
Physician Assistant	31	123	84	48	N/A
Podiatric Medicine	121	138	100	53	29
Psychology	1	113	57	42	N/A
Registered Health Care Clinic	0	4	0	0	N/A
Respiratory Care	7	53	41	38	N/A
School Psychology	0	3	4	3	N/A
Speech-Language Pathology & Audiology	0	25	11	12	N/A
Total	5,061	11,985	7,821	6,569	19,651
Referred Non-Jurisdictional	12,354	842	20	9	0
Grand Totals	17,415	12,827	7,841	6,578	19,651

¹Excludes 182 complaints found not legally sufficient following commencement of investigation.

²Excludes 4 complaints found not legally sufficient upon completion of investigation.

Definitions:

Statutory Reports – Reports required by statute to be submitted and investigated by the Florida Department of Health.

Legally Sufficient – Complaints that if found to be true show a potential violation of Florida statutes or rules.

Table 7 • Performance Statistics for Probable Cause Actions • July 1, 2004 – June 30, 2005

PROFESSION	NO PROBABLE CAUSE FOUND	PROBABLE CAUSE FOUND	ADMINISTRATIVE COMPLAINTS FILED
Acupuncture	4	3	3
Athletic Trainer	2	0	0
Certified Nursing Assistant	714	234	234
Certified Social Worker	0	0	0
Chiropractic Medicine	77	72	32
Clinical Laboratory Personnel	0	16	5
Clinical Social Work	19	4	2
Dental Labs	11	9	9
Dentistry	314	59	66
Dietetics and Nutritionist	4	0	0
Electrolysis	2	2	2
Electrolysis Facilities	0	0	0
Hearing Aid Specialists	70	43	32
Marriage and Family Therapy	5	5	2
Massage Establishments	24	24	10
Massage Therapy	19	39	25
Medical Physicist	1	1	1
Medicine	1,265	292	327
Mental Health Counseling	21	13	3
Midwifery	5	0	0
Naturopathic Medicine	0	0	0
Nursing	796	889	885
Nursing Home Administrators	80	5	4
Occupational Therapy	15	7	7
Optical Establishments	0	0	0
Opticianry	0	0	0
Optometry	13	8	9
Optometry Branch Offices	0	0	0
Orthotists & Prosthetists	37	21	22
Osteopathic Medicine	80	33	31
Pharmacies	259	49	40
Pharmacists	243	129	121
Physical Therapy	24	27	22
Physician Assistant	24	13	15
Podiatric Medicine	33	7	9
Psychology	24	4	4
Registered Health Care Clinic	0	0	0
Respiratory Care	19	19	13
School Psychology	0	0	0
Speech- Language Pathology & Audiology	7	3	3
Total	4,211	2,030	1,938
Referred Non-Jurisdictional	2	0	0
Grand Total	4,213	2,030	1,938

Definitions:

Probable Cause – When a panel of a Board or the Florida Department of Health finds sufficient evidence to bring formal charges against a licensee.

Administrative Complaint – Legal document that charges violation(s) of Florida statutes or rules against a licensee.

Table 8 • Performance Statistics on Disposition of Disciplinary Cases Against Healthcare Licensees • July 1, 2004–June 30, 2005

PROFESSION	REVOCAATION	VOLUNTARY RELINQUISHMENT	SUSPENSION	PROBATION	LIMITATION/OBLIGATION	FINE AND/OR REPRIMAND	CITATION	DISMISSAL	NO. OF CASES RESOLVED THROUGH FINAL ORDERS*
Acupuncture	0	1	0	1	2	2	7	0	3
Athletic Trainer	0	0	1	0	1	2	0	1	1
Certified Nursing Assistant	65	27	17	8	21	63	0	11	130
Certified Social Worker	0	0	0	0	0	0	0	0	0
Chiropractic Medicine	0	10	17	7	36	47	44	7	76
Clinical Laboratory Personnel	1	0	2	1	7	7	39	5	8
Clinical Social Work	0	0	0	2	4	6	0	2	5
Dental Labs	0	0	4	2	4	10	1	0	9
Dentistry	0	6	13	10	63	84	30	13	87
Dietetics and Nutritionist	0	0	0	0	0	0	0	0	0
Electrolysis	1	1	0	0	0	0	4	1	2
Electrolysis Facilities	0	0	0	0	0	0	1	0	0
Hearing Aid Specialists	0	1	1	0	3	25	10	8	20
Marriage and Family Therapy	0	0	0	0	0	0	0	0	3
Massage Establishments	3	4	3	2	9	36	26	5	38
Massage Therapy	3	7	9	4	11	55	22	7	55
Medical Physicist	0	0	0	0	0	0	0	0	0
Medicine	17	31	40	13	154	207	432	30	245
Mental Health Counseling	1	5	1	2	4	7	1	3	13
Midwifery	0	0	1	1	0	0	0	0	2
Naturopathic Medicine	0	0	0	0	0	0	0	0	0
Nursing	55	60	184	41	275	561	5	62	759
Nursing Home Administrators	0	0	0	0	0	1	0	1	1
Occupational Therapy	0	0	1	1	2	2	11	1	4
Optical Establishments	0	0	0	0	0	0	0	0	0
Opticianry	0	0	0	0	4	4	1	0	4
Optometry	0	0	0	0	3	6	2	2	4
Optometry Branch Offices	0	0	0	0	0	0	0	0	0
Orthotists & Prosthetists	0	0	0	0	0	0	5	4	6
Osteopathic Medicine	0	5	1	3	8	11	13	0	17

*This number represents the actual number of cases resolved by the issuance of a final order, not the number of final orders issued. A final order may contain more than one type of discipline, e.g., probation, fine and reprimand.

**Table 8 • Performance Statistics on Disposition of Disciplinary Cases Against Healthcare Licensees
• July 1, 2004—June 30, 2005 CONTINUED**

PROFESSION	REVOCAION	VOLUNTARY RELINQUISHMENT	SUSPENSION	PROBATION	LIMITATION/ OBLIGATION	FINE AND/OR REPRIMAND	CITATION	DISMISSAL	NO. OF CASES RESOLVED THROUGH FINAL ORDERS*
Pharmacies	1	2	1	5	13	49	4	8	42
Pharmacists	2	9	8	17	76	64	21	16	99
Physical Therapy	1	4	1	0	6	8	3	2	17
Physician Assistant	1	0	2	1	4	7	23	1	7
Podiatric Medicine	0	1	1	0	4	8	25	1	7
Psychology	0	2	0	2	4	7	6	2	9
Registered Health Care Clinic	0	0	0	0	0	0	0	0	0
Respiratory Care	1	2	2	0	3	6	3	1	15
School Psychology	0	0	0	0	0	0	0	0	0
Speech-Language Pathology & Audiology	0	0	0	0	1	1	0	0	3
Total	152	178	310	123	722	1,286	739	195	1,691

*This number represents the actual number of cases resolved by the issuance of a final order, not the number of final orders issued. A final order may contain more than one type of discipline, e.g., probation, fine and reprimand.

Definitions:

Revocation — The licensing board or department disciplined licensed practitioner and his/her license was removed.

Voluntary Relinquishment — The licensed practitioner elected to give up his/her license to practice in the state of Florida.

Suspension — The licensing board or department disciplined licensed practitioner, prohibiting practitioner from practicing in Florida for a specified period of time outlined in the final disciplinary order.

Probation — The licensing board or department disciplined practitioner and placed his/her license in a probationary status as specified by final disciplinary order.

Limitation/Obligation — A penalty, including restrictions and requirements placed on a practitioner, in a disciplinary proceeding against the practitioner's license.

Citation — A disciplinary final order in a complaint resolved through the citation process; a formal alternative resolution of minor violations, usually involving a fine and obligations imposed as approved by a board rule.

Dismissal — Probable Cause was found but the case was not prosecuted.

Final Order — The official document that records the final decision which results from a disciplinary proceeding under chapter 120 and which has been filed with the department's agency clerk.

Table 9 • Performance Statistics for Medical Malpractice Claims • July 1, 2004 – June 30, 2005

PROFESSION	CIVIL COURT CLAIMS RECEIVED	CLOSED CLAIMS RECEIVED	NICA CLAIMS RECEIVED	"3 IN 5" INITIATED	"3 IN 5" DISCIPLINES	CLOSED CLAIMS DISCIPLINED	CLOSED CLAIMS NON-DISCIPLINE
Acupuncture	0	0	0	0	0	0	0
Certified Nursing Assistant	4	0	0	0	0	0	0
Chiropractic Medicine	5	22	0	0	0	0	0
Clinical Lab Personnel	1	0	0	0	0	0	0
Dentistry	13	92	0	5	3	7	15
Dietetics and Nutritionist	0	0	0	0	0	0	0
Massage Therapy	0	1	0	0	0	0	0
Medicine	342	1,358	53	3	1	7	147
Mental Health Counselor	0	0	0	0	0	0	0
Midwifery	0	0	0	0	0	0	0
Nursing	102	26	4	0	0	0	0
Nursing Home Administrators	86	0	0	0	0	0	0
Occupational Therapy	0	0	0	0	0	0	0
Optometry	1	6	0	0	0	0	0
Osteopathic Medicine	39	136	0	1	0	0	7
Pharmacies	1	0	0	0	0	0	0
Pharmacists	1	4	0	0	0	0	0
Physical Therapy	2	1	0	0	0	0	0
Physician Assistant	7	21	0	0	0	0	0
Podiatric Medicine	11	101	0	1	0	0	6
Psychology	0	0	0	0	0	0	0
Respiratory Care	0	0	2	0	0	0	0
Total	615	1,768	59	10	4	14	175
Referred Non-Jurisdictional	92	7	1	0	0	0	0
Grand Totals	707	1,775	60	10	4	14	175

Definitions:

3 in 5 Initiated – Investigation started when the practitioner has had three or more closed medical malpractice claims within the last five years that meet certain statutory conditions.

3 in 5 Disciplines – Three in five initiated investigations that resulted in a disciplinary action.

Table 10 • Hospital Annual Report (Source 75) Complaints • July 1, 2004 – June 30, 2005

Hospitals/Facilities Reporting	36
Practitioners Reported	337
Non-jurisdictional	28
Medicine	266
Nursing	19
Osteopathic Medicine	23
Physician Assistants	1

Table 11 • Performance Statistics on Unlicensed Activity • July 1, 2004 – June 30, 2005

PROFESSION	COMPLAINTS RECEIVED	REFERRED FOR INVESTIGATION	INVESTIGATIONS COMPLETED	CEASE AND DESIST ISSUED	REFERRALS TO LAW ENFORCEMENT*	ARRESTS
Acupuncture	4	4	5	1	0	0
Athletic Trainer	3	3	1	2	0	0
Certified Nursing Assistant	16	16	17	1	1	6
Certified Social Worker	0	0	0	0	0	0
Chiropractic Medicine	14	14	18	6	0	2
Clinical Laboratory Personnel	0	0	1	0	0	0
Clinical Social Work	1	1	4	1	0	0
Dental Labs	5	6	8	1	0	0
Dentistry	51	47	85	1	4	42
Dietetics and Nutritionist	11	9	9	5	0	0
Electrolysis	2	3	2	3	0	0
Electrolysis Facilities	1	1	2	2	0	0
Hearing Aid Specialists	3	5	4	1	0	2
Marriage and Family Therapy	0	0	3	0	0	2
Massage Establishments	130	132	95	32	2	8
Massage Therapy	73	69	77	18	2	38
Medical Physicist	0	0	2	0	1	0
Medicine	99	98	80	6	7	29
Mental Health Counseling	7	8	7	2	0	1
Midwifery	2	2	0	0	0	0
Naturopathic Medicine	4	4	1	0	0	0
Nursing	32	28	27	4	5	7
Nursing Home Administrators	0	0	0	0	0	0
Occupational Therapy	1	1	0	0	0	0
Optical Establishments	13	12	9	9	0	0
Opticianry	16	12	8	5	0	0
Optometry	1	1	5	1	0	3
Optometry Branch Offices	0	0	0	0	0	0
Orthotists & Prosthetists	33	32	22	10	2	5
Osteopathic Medicine	4	2	1	0	1	0
Pharmacies	86	58	22	13	3	2
Pharmacists	20	18	14	1	2	6
Physical Therapy	12	11	6	0	0	1
Physician Assistant	5	4	4	1	1	2
Podiatric Medicine	3	3	4	0	0	0
Psychology	10	10	9	5	0	1
Registered Health Care Clinic	0	0	12	0	0	0
Respiratory Care	5	5	3	1	2	0
School Psychology	1	1	0	0	0	0
Speech-Language Pathology & Audiology	2	2	4	2	0	0
Total	670	622	571	134	33	157
Referred Non-Jurisdictional	8	5	1	0	0	0
Grand Totals	678	627	572	134	33	157

*Note: "Referrals to Law Enforcement" replaces the column "Referrals to State Attorney" from previous Annual Report tables.

Table 12 • Revenue/Expenditures/Cash Balances • July 1, 2004–June 30, 2005

PROFESSION	BEGINNING CASH BALANCE	REVENUES	EXPENDITURES	ENDING CASH BALANCE	UNLICENSED ACT CASH BAL
Acupuncture	\$1,554,470	\$111,663	\$232,156	\$1,433,978	\$9,526
Anesthesiologist Assistants	\$ -	\$3,425	\$55,513	\$(52,088)	\$ 20
Athletic Trainers	\$330,019	\$167,268	\$85,486	\$411,801	\$14,247
Chiropractic	\$1,610,388	\$645,911	\$1,614,876	\$641,423	\$56,242
Clinical Lab Personnel	\$(105,206)	\$1,386,427	\$834,833	\$446,388	\$152,720
Certified Nursing Assistants	\$(642,687)	\$499,323	\$3,178,533	\$(3,321,897)	\$(38,079)
Certified Social Worker	\$(128,917)	\$855	\$60	\$(128,122)	\$(6,541)
CSW,MFT,MHC	\$2,211,113	\$2,831,545	\$1,711,626	\$3,331,032	\$379,127
Dentistry	\$734,833	\$1,136,921	\$2,954,929	\$(1,083,175)	\$(175,189)
Dental Hygienist	\$1,066,434	\$477,469	\$736,725	\$807,178	\$66,945
Dental Labs	\$700,246	\$22,498	\$189,834	\$532,910	\$10,536
Dietetics & Nutrition	\$280,249	\$381,347	\$261,152	\$400,444	\$18,589
Electrolysis	\$(722,938)	\$92,681	\$186,272	\$(816,528)	\$(7,673)
Hearing Aid Specialist	\$(1,181,470)	\$806,850	\$360,042	\$(734,662)	\$(9,381)
Massage Therapy	\$3,622,533	\$2,233,493	\$2,242,349	\$3,613,677	\$222,072
Medical Physicists	\$135,223	\$76,626	\$24,982	\$186,868	\$3,541
Medicine	\$3,982,489	\$16,676,946	\$15,619,746	\$5,039,689	\$396,466
Midwifery	\$(647,014)	\$11,261	\$72,168	\$(707,922)	\$(9,757)
Naturopathy	\$(252,174)	\$1,520	\$1,757	\$(252,411)	\$(15,102)
Nursing	\$10,362,444	\$13,212,370	\$13,906,620	\$9,668,193	\$2,673,561
Nursing Home Administrator	\$(630,339)	\$393,111	\$394,420	\$(631,647)	\$20,621
Occupational Therapy	\$650,981	\$558,852	\$487,813	\$722,020	\$118,227
Opticianry	\$1,592,629	\$689,736	\$509,740	\$1,772,625	\$35,099
Optometry	\$186,789	\$1,188,084	\$726,554	\$648,319	\$23,232
Orthotist & Prosthetist	\$(379,982)	\$97,210	\$239,129	\$(521,901)	\$(41,850)
Osteopathic Medicine	\$1,667,602	\$386,323	\$1,396,824	\$657,101	\$16,782
Pharmacy	\$3,820,924	\$3,730,241	\$4,905,694	\$2,645,471	\$959
Physical Therapy	\$2,246,943	\$367,487	\$694,413	\$1,920,017	\$70,652
Physician Assistant	\$941,565	\$362,442	\$643,527	\$660,480	\$43,759
Podiatry	\$(230,084)	\$122,510	\$387,174	\$(494,748)	\$9,817
Psychology	\$1,605,818	\$360,905	\$750,457	\$1,216,267	\$33,969
Respiratory Therapy	\$276,531	\$1,255,561	\$629,146	\$902,946	\$146,437
School Psychology	\$125,782	\$15,719	\$24,880	\$116,621	\$6,244
Speech-Language & Audiology	\$2,725,395	\$222,542	\$459,929	\$2,488,008	\$151,385
Total	\$37,510,589	\$50,527,122	\$56,519,359	\$31,518,355	\$4,377,203

NOTE: NICA is a pass through and is excluded.

MQA provides testing services to Statewide Pharmacy, EMTs, and Paramedics and these dollars are excluded.

Table 13 • Projected Cash Balances • Medical Quality Assurance Trust Fund

PROFESSION	PROJECTED CASH BALANCE 2005-06	PROJECTED CASH BALANCE 2006-07	PROJECTED CASH BALANCE 2007-08	PROJECTED CASH BALANCE 2008-09	PROJECTED CASH BALANCE 2009-10	PROJECTED CASH BALANCE 2010-11
Acupuncture	\$1,771,880	\$1,611,251	\$1,944,683	\$1,777,917	\$2,105,115	\$1,932,030
Anesthiologist Asst	\$(81,930)	\$(103,297)	\$(130,435)	\$(147,484)	\$(175,315)	\$(188,066)
Athletic Trainers	\$384,901	\$515,233	\$487,042	\$615,601	\$585,609	\$712,342
Chiropractic	\$2,265,520	\$1,280,600	\$2,877,981	\$1,856,376	\$3,416,491	\$2,357,110
Clinical Lab	\$368,413	\$950,383	\$858,008	\$1,420,203	\$1,307,740	\$1,849,573
Cert Nurs Asst	\$(4,516,968)	\$(7,432,900)	\$(8,678,722)	\$(11,664,342)	\$(12,980,957)	\$(16,038,337)
Cert Social Worker	\$(127,897)	\$(127,072)	\$(126,847)	\$(126,022)	\$(125,797)	\$(124,972)
CSW,MFT,MHC	\$2,080,031	\$3,532,606	\$2,252,307	\$3,664,651	\$2,343,483	\$3,714,400
Dentistry	\$258,428	\$(2,112,463)	\$(1,102,108)	\$(3,556,325)	\$(2,630,616)	\$(5,170,636)
Dental Hygienist	\$1,482,103	\$885,236	\$1,808,595	\$1,193,181	\$2,097,699	\$1,463,186
Dental Labs	\$544,837	\$361,585	\$528,956	\$341,203	\$353,906	\$161,519
Dietetics & Nutrition	\$229,459	\$404,618	\$229,462	\$398,894	\$217,919	\$381,452
Electrolysis	\$(804,499)	\$(882,030)	\$(872,782)	\$(954,131)	\$(948,762)	\$(1,034,043)
Emergency Med Tech	\$(233,854)	\$(71,244)	\$85,519	\$244,992	\$398,569	\$554,812
Hearing Aid Spec	\$(961,428)	\$(611,782)	\$(844,408)	\$(502,808)	\$(743,608)	\$(410,294)
Massage Therapy	\$6,775,606	\$6,323,492	\$9,441,027	\$8,927,954	\$11,983,562	\$11,407,716
Medical Physicists	\$185,383	\$248,438	\$246,655	\$309,300	\$307,101	\$369,325
Medicine	\$9,780,328	\$9,194,083	\$13,609,530	\$12,661,890	\$16,710,211	\$15,390,428
Midwifery	\$(703,143)	\$(764,906)	\$(761,319)	\$(824,718)	\$(822,794)	\$(887,879)
Naturopathy	\$(258,539)	\$(262,992)	\$(269,220)	\$(273,810)	\$(280,176)	\$(284,906)
Nursing	\$8,680,862	\$5,524,716	\$4,293,366	\$802,146	\$(769,592)	\$(4,605,852)
Nursing Home Admin	\$(514,209)	\$(425,558)	\$(673,879)	\$(593,411)	\$(850,044)	\$(778,002)
Occupational Therapy	\$408,548	\$562,506	\$241,585	\$385,315	\$54,004	\$187,202
Opticianry	\$1,459,335	\$1,712,258	\$1,391,221	\$1,633,506	\$1,301,663	\$1,532,995
Optometry	\$147,525	\$551,935	\$38,826	\$426,326	\$(103,962)	\$266,124
Ortho & Prosth	\$(320,455)	\$(469,659)	\$(272,285)	\$(427,081)	\$(235,387)	\$(395,940)
Osteopathic	\$1,416,454	\$243,912	\$978,237	\$(228,671)	\$470,742	\$(771,555)
Paramedics	\$(186,767)	\$(252,475)	\$(320,979)	\$(388,188)	\$(458,216)	\$(526,969)
Pharmacy	\$3,367,673	\$1,767,862	\$2,402,766	\$683,081	\$1,196,210	\$(646,914)
Physical Therapy	\$3,043,957	\$2,513,568	\$3,622,810	\$3,072,238	\$4,160,976	\$3,589,620
Physician Assistant	\$1,090,982	\$644,194	\$1,121,286	\$657,723	\$1,117,774	\$636,938
Podiatry	\$(186,788)	\$(538,823)	\$(238,610)	\$(601,283)	\$(311,876)	\$(685,502)
Psychology	\$2,267,002	\$1,754,674	\$2,791,405	\$2,259,848	\$3,277,045	\$2,725,687
Radiological Tech	\$300,000	\$600,000	\$900,000	\$1,200,000	\$1,500,000	\$1,800,000
Respiratory Therapy	\$420,993	\$1,179,692	\$687,013	\$1,430,983	\$923,342	\$1,652,146
School Psychology	\$250,113	\$218,044	\$350,742	\$317,582	\$449,171	\$414,888
Speech-Language	\$3,061,641	\$2,752,542	\$3,317,336	\$2,996,100	\$3,548,564	\$3,214,829
Total	\$43,145,497	\$31,278,227	\$42,214,764	\$28,988,736	\$38,389,794	\$23,764,455

NICA and Unlicensed Activity are excluded from the amounts shown above.

Table 14 • A Review of the Adequacy of Existing Fees

PROFESSION	FY 05-06 & 06-07 ESTIMATED EXPEND	NUMBER OF LICENSEES	COST TO REGULATE	RENEWAL FEE CAP	CURRENT RENEWAL FEE	SUFFICIENT CURRENT RENEWAL FEE
1. Acupuncture	\$544,583	1,748	\$312	\$500	\$300/\$150	Yes
2. Anesthesiologist Asst	\$60,509	4	\$15,127			
3. Athletic Trainers	\$157,324	1490	\$106	\$200/\$100	\$125/\$50	Yes
4. Certified Nursing Asst	\$6,184,047	324,678	\$19	\$50	\$20	
5. Chiropractic	\$3,255,399	8,381	\$388			Yes
A. Chiropractic				\$500	\$500/\$250	
B. Chiropractic PA				\$250	\$50/\$28	
C. Registered Chiro PA				\$25	\$25	
6. Clinical Lab	\$1,754,769	16,170	\$109			Yes
A. Director				\$150	\$150	
B. Supervisor				\$150	\$143	
C. Technologist				\$150	\$121	
D. Technician				\$150	\$82	
E. Training Program				\$300	\$300	
F. Inactive				\$50	\$50	
7. Cert Social Worker	\$0	5	\$0	\$250	\$150	
8. CSW,MFT,MHC	\$3,570,047	19,724	\$181			Yes
A. Active				\$250	\$145	
B. Inactive				\$50	\$50	
C. Interns				\$100	\$75	
9. Dentistry	\$7,394,233	11,804	\$626	\$300	\$300	
10. Dental Hygienist	\$1,645,852	11,551	\$142	\$300	\$135	Yes
11. Dental Labs	\$399,361	1,096	\$364	\$300	\$200	Yes
12. Dietetics & Nutrition	\$508,278	3,529	\$144	\$600	\$100/\$95	Yes
13. Electrolysis	\$338,852	967	\$350	\$100	\$100	
14. Hearing Aid Spec	\$714,009	952	\$750	\$600	\$600	
15. Massage Therapy	\$5,409,529	36,335	\$149			Yes
A. Massage Therapist				\$200/\$250	\$150	
B. Massage Establishment				\$200	\$150	
16. Medical Physicists	\$36,305	460	\$79	\$500	\$150	Yes
17. Medicine	\$32,069,913	57,063	\$562	\$500	\$424	Yes
18. Midwifery	\$145,222	141	\$1,030	\$500	\$500/\$100	
19. Naturopathic	\$12,101	7	\$1,729	\$1,000	\$250	
20. Nursing	\$29,734,255	285,304	\$104			
A. Nurse				No Cap	\$55	
B. ARNP				\$105	\$105	
21. Nursing Home Admin	\$726,111	1,799	\$404	No Cap	\$250	
22. Occupational Therapy	\$907,639	7,744	\$117	No Cap	\$55	Yes
23. Opticianry	\$943,944	3,852	\$245	\$350/\$50	\$150/\$50	Yes
24. Optometry	\$1,500,630	3,428	\$438			Yes
A. Optometrist				\$300	\$300	
B. Branch Office				\$100	\$100	
25. Orthotists & Prosthetics	\$496,176	724	\$685	\$500	\$500	
26. Osteopathic	\$3,049,667	5,206	\$586	\$500	\$400	
27. Pharmacy	\$10,637,530	39,505	\$269			
A. Pharmacists				\$250	\$245	
B. Consultant Pharmacist				\$250	\$50	
C. Nuclear Pharmacist				\$250	\$100	
D. Pharmacies Permit				\$250	\$250	

Notes:

1. Cost to regulate is computed by adding FY 05-06 and FY 06-07 estimated expenditures divided by the total number of active and inactive licensees as of June 30, 2005.
2. If there is a positive cash balance at June 30, 2011 then the current renewal fee is deemed to be sufficient.
3. Two amounts in the column for fee caps and/or current fees represent two different amounts for active and inactive licensees.

Table 14 • A Review of the Adequacy of Existing Fees CONTINUED

PROFESSION	FY 05-06 & 06-07 ESTIMATED EXPEND	NUMBER OF LICENSEES	COST TO REGULATE	RENEWAL FEE CAP	CURRENT RENEWAL FEE	SUFFICIENT CURRENT RENEWAL FEE
28. Physical Therapy	\$1,791,075	17,307	\$103			Yes
A. Physical Therapist				\$200	100/\$50	
B. Physical Therapist Asst				\$150	100/\$50	
29. Physician Assistant	\$1,488,528	4,244	\$351			Yes
A. Physician Assistant				\$500	\$150	
B. Prescribing Phy Asst				\$400	\$300	
30. Podiatry	\$943,944	2,310	\$409			
A. Podiatric Medicine				\$350	\$350	
B. Certified Podiatric Tech				NoCap	\$100/\$50	
C. Cert Podiatric X-Ray Asst				NoCap	\$75	
31. Psychology	\$1,706,361	4,020	\$424	\$500	\$400	Yes
32. Respiratory Therapy	\$1,307,000	10,793	\$121	\$200	121/\$50	Yes
33. School Psychology	\$96,815	664	\$146	\$500	250/\$150	Yes
34. Speech-Lang, P & A	\$1,077,065	7,876	\$137	\$500	125/\$100	Yes

Notes:

1. Cost to regulate is computed by adding FY 05-06 and FY 06-07 estimated expenditures divided by the total number of active and inactive licensees as of June 30, 2005.
2. If there is a positive cash balance at June 30, 2011 then the current renewal fee is deemed to be sufficient.
3. Two amounts in the column for fee caps and/or current fees represent two different amounts for active and inactive licensees.

Table 15 • Internet Traffic Board/Council or Department Administered Professions • July 1, 2004 - June 30, 2005

PROFESSION	VISITS	DOWNLOADS	HITS	PROGRAM SERVICES SITES	VISITS	DOWNLOADS	HITS
Clinical Social Work, Marriage & Family Therapy & Mental Health Counseling (491Boards)	102,518	115,519	344,619	Client Services (Public Record Requests)	371,170	0	515,634
Acupuncture	16,180	6,115	39,356	Compliance	3,263	0	4,112
Anesthesiology Assistants	4,738	3,127	10,481	Enforcement (Compliants & Discipline)	126,519	468,202	630,977
Consumer Advocacy Program	4,700	1,045	7,890	Exam	58,248	53,287	165,744
Athletic Training	12,081	3,585	29,122	Application Total	429,173	0	1,252,851
Certified Nursing Assistants	97,659	82,046	222,766	Florida Commission on Excellence Health Care - Legislation	5,779	14,150	20,038
Chiropractic Medicine	36,932	26,512	106,220	Licensee Data	36,286	11,901	75,958
Clinical Laboratory Personnel	33,639	26,305	101,237	Profiling (non-system content)	298,922	116,099	759,158
Health Care Clinic Registration	5,703	0	6,765	PRAES (non-system content)	447,442	0	540,032
Dentist, Dental Hygiene, or Dental Labs	75,119	75,134	231,199	Publications	87,942	55,602	254,124
Dietetics & Nutrition	16,138	11,701	43,298	Unlicensed	16,395	7,062	28,370
Electrologist or Electrology Facilities	17,822	10,963	44,652	Total	1,451,966	726,303	2,994,147
Hearing Aid Specialists	10,288	3,949	24,795	MQA Sevcies (Program System)	429,173	0	1,252,851
Massage Therapist or Establishments	80,483	87,942	245,303				
Medical Physicists	9,396	1,604	21,883				
Medicine	161,300	200,097	491,120				
Midwifery	9,865	3,424	23,696				
Naturopaths	2,335	0	2,674				
Nursing	367,439	252,123	1,070,106				
Nursing Home Administrators	20,924	14,888	56,986				
Occupational Therapy	33,370	28,367	90,220				
Opticianry or Optical Establishments	17,963	12,104	48,445				
Optometry or Optometry Branch Facilities	21,979	12,458	60,036				
Osteopathic Medicine	25,976	12,256	60,863				
Pharmacists or Pharmacies	131,766	166,533	421,867				
Physical Therapy	57,084	35,175	156,724				
Physician Assistants	34,660	39,087	105,510				
Podiatric Medicine	11,471	5,468	27,576				
Orthotists & Prosthetists	11,579	6,583	30,266				
Psychology	41,242	32,516	118,795				
Respiratory Care	33,065	14,975	79,253				
School Psychology	11,401	4,100	26,516				
Speech Language Pathology & Audiology	28,560	30,716	82,944				
Total	1,545,375	1,326,417	4,433,183				

The MQA Services System consists of the several sub-systems which are listed below. The sub-systems have been grouped by their potential audience/user group:

Current Licenseholders:

- License Renewal
- Address Change
- Practitioner Profile Update System – five (5) profiled professions only
- Request Duplicate License System
- One Time Fee Assessment - for selected professions as required/needed

Potential Applicants or License Candidates:

- Initial Licensure Application - online initial application of selected profession(s)
- Examination Grade Report System & Online Testing Services Administration System - for license candidate to view exam information
- License Advisory System - public-accessible license evaluation tool for requirements of licensure of selected professions
- Application and Information Request System

Private Citizens, Employers or Potential Employers, and Other Interested Parties:

- License Look-Up Application - public-accessible view of all MQA Regulated Professions' basic license information
- Practitioner Profile Application - public-accessible view of Practitioner Profiling information for the five (5) profiled professions only
- License CD Data Request System & License CD Data Request Administration System - purchase license information of professions
- Licensure Certification & Non-Certification System - purchase license certification letters from MQA Compliance unit of licensee's practicing status
- CNA Look-up - public-accessible view of CNA Registry information

Definitions:

Visits - A visit is a series of actions that begins when a visitor views their first page from the server, and ends when the visitor leaves the site or remains idle beyond the idle-time limit.

Downloads - Number of times the specified file was downloaded by a visitor. If an error occurred during a transfer, the transfer is not counted.

Hits - Each file requested by a visitor registers as a hit. There can be several hits on each page. While the volume of hits reflects the amount of server traffic, it is not an accurate reflection of the number of pages viewed.

Table 16 • Online Renewals • July 1, 2004 – June 30, 2005

PROFESSION	RENEWALS PROCESSED ONLINE (NUMBER OF TRANSACTIONS)	E-RENEWAL USAGE PERCENTAGE (# OF ONLINE RENEWALS ÷ # OF ON-TIME RENEWALS)
Nursing	67,116	50.74%
Clinical Laboratory Personnel	6,952	50.60%
Nursing Home Administrator	717	48.51%
Naturopathic Physician	0	0.00%
Athletic Trainer	499	51.76%
Optician	1,299	39.97%
Medical Doctor	10,471	47.09%
Medical Physicists	190	54.44%
Optometry	1,119	36.16%
Pharmacy	2,404	27.60%
Occupational Therapy	3,826	58.38%
Hearing Aid Specialist	214	33.70%
Social Work, Marriage & Family, Mental Health	7,278	44.19%
Respiratory Therapy	5,564	63.06%
Dietetics and Nutrition	1,345	47.21%
Totals	108,994	49.22%

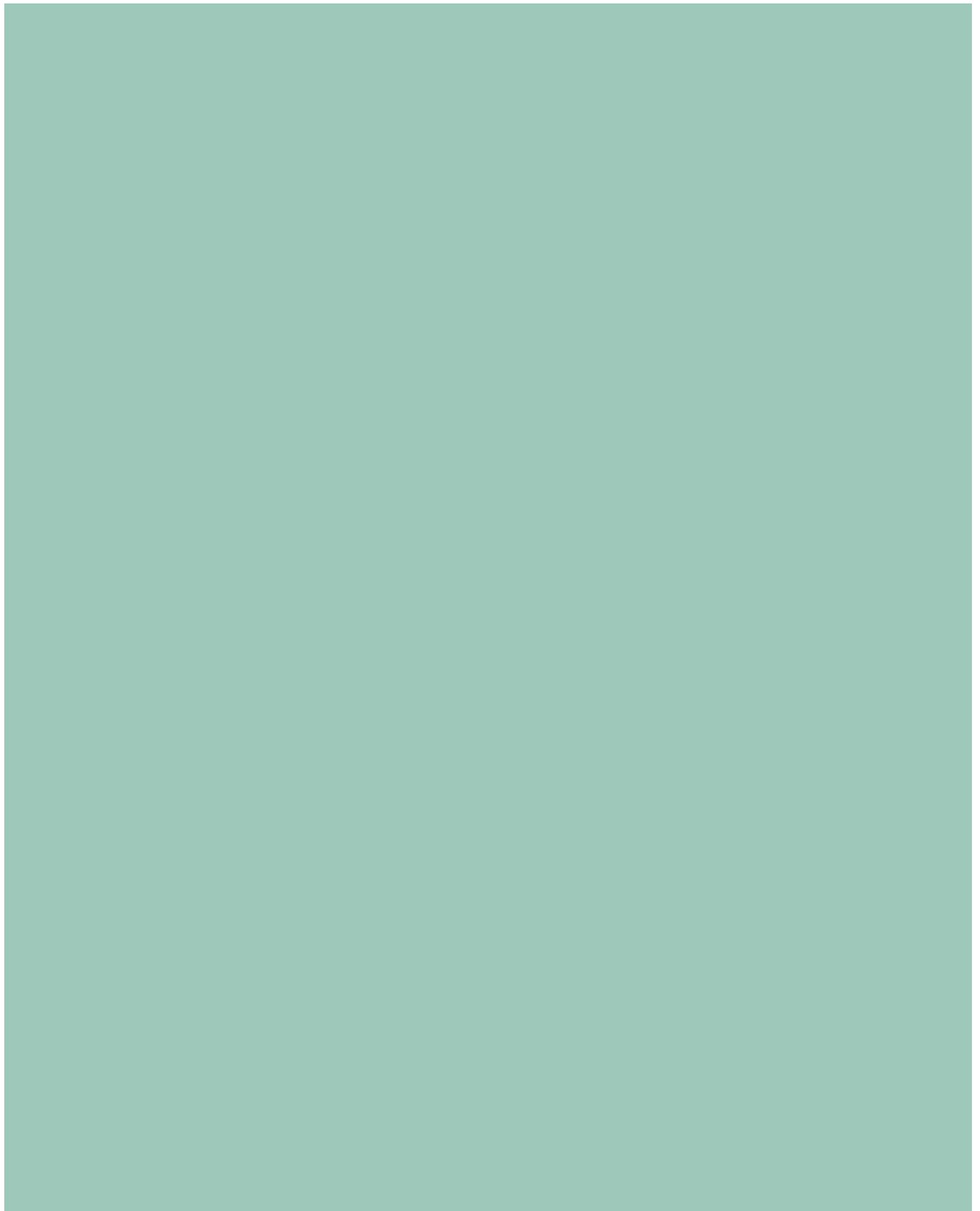
Table 17 • Performance Statistics for Student Loan Defaults • July 1, 2004 – June 30, 2005

PROFESSION	REPORTS OF DEFAULT RECEIVED	INVESTIGATIONS COMPLETED	ESO ISSUED	PROBABLE CAUSE FOUND	NO PROBABLE CAUSE FOUND	DISCIPLINARY ACTION TAKEN	FINE AMOUNTS COLLECTED
Chiropractic Medicine	16	12	7	11	4	9	\$20,499.34
Dentistry	4	2	1	0	0	0	\$0
Medicine	10	0	0	0	0	0	\$0
Nursing	1	0	0	0	0	0	\$0
Osteopathic Medicine	7	0	0	0	1	0	\$0
Pharmacists	1	1	0	0	0	0	\$0
Total	39	15	8	11	5	9	\$20,499.34

Definitions:

ESO (Emergency Suspension Order) – An order issued by the Florida Department of Health suspending the license of a practitioner. A practitioner may not practice in the state of Florida while under an emergency suspension order.

Probable Cause Found – A panel of a Board or the Florida Department of Health found sufficient evidence to bring formal charges against a licensee.



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