

Serving on the Board of Medical Practice

One goal of the Board in starting to publish a newsletter is to let our licensees and the community know who we are and what it means to serve on the Board. Why do we want to get the word out? First, for our licensees, we want you to understand more about the Board that makes decisions on matters of licensing and discipline. Second, we want to inform people who may be interested in serving about what membership on the Board entails.

Like most organizations in state government, the Board's makeup and mission are set by statute. The law provides that there are 17 members – nine M.D.s, one physician assistant, one podiatrist, and six public members who have no close ties to the practice of medicine. Each member is appointed by the Governor. Terms are five years long, and the law limits members to two consecutive full terms, not including serving a partial term to complete the term of a member who left early. All the statutes relating to the Board and oversight of physicians are found in Chapter 23 of Title 26 of the Vermont Statutes: <http://www.leg.state.vt.us/statutes/sections.cfm?Title=26&Chapter=023>.

Generally, members are asked to attend two meetings per month and to engage in preparation for the meetings. Each member is expected to attend the monthly full Board meeting, held at Gifford Hospital the first Wednesday afternoon of the month. In addition each member is assigned to an investigative committee (North, Central, or South) that meets an additional half day each month. In preparation for the investigative committee, the members are responsible for reading and reviewing case materials. The preparation for the investigative and full Board meetings usually takes from 4-16 hours per month. In the event of a case with charges that are contested, Board members may be asked to serve on a hearing panel (requires at least three Board members). Some Board members also serve on the licensing committee, which entails an additional monthly meeting that occurs in conjunction with the full Board meeting and additional reading preparation. All Board members attend an initial orientation program and participate in ongoing education concerning Board and regulatory rules and issues.

Members are paid \$50 per diem for each day they attend a meeting or sit on a panel. Typical Board meetings last three to four hours; contested hearings vary widely, from as short as a few hours to days long. Members also receive mileage reimbursement and are provided meals at meetings. The time devoted to preparation for meetings (e.g., reading of materials outside of the meeting time) is not compensated.

While much is asked of Board members, the state has been fortunate to have many people dedicated to the work and charge of the Board over the years. We've asked two members, one a physician and one a public member, to share some thoughts about their service.



Much is asked of Board members, but they all seem to enjoy serving. We've asked two members, one a physician and one a public member, to share some thoughts about their service. [Read More](#)

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med_board/bmp.aspx](http://healthvermont.gov/hc/med_board/bmp.aspx)



Member Profiles: Their Stories

Public Member Profile: Saran McClain



“Serving on the Board has been a truly rewarding experience. Although it was an effort to meet the steep learning curve I faced when I started, it has been rewarding to gain an insider’s view of what goes on behind the scenes to protect both the public and our licensees. I’ve benefitted from this unique and valuable education and gained confidence speaking among a room full of highly educated and committed physicians, lawyers, staff and fellow public members.

The process begins in our monthly investigative committee meetings where a small gathering of physician and public members discuss the facts of each case, intent upon approaching the information without bias. These meetings are an opportunity to dig deeper, ask questions, and voice concerns until we are ready to present a recommended path to closure. We then present these cases in front of the full Board for discussion. I look forward to those round table deliberations where the investigative committees present their cases. It’s always interesting to receive the fresh perspective of the other Board members, who are learning about the case for the first time and who must vote to approve, modify, or reject the committee’s recommended resolution. These discussions are thoughtful, at times lively and very focused. I am honored to be a part of the vigorous discussion among this group of experienced medical professionals and talented and dedicated Vermonters who serve as public members. “

Saran was appointed as a public member of the Board in August 2011, and serves on the South Committee and the Licensing Committee. Saran and her husband Owen Ready-McClain live in Lincoln, Vermont with their two daughters. After graduating from Skidmore College in 2004, Saran worked in a number of print, web, and film editorial and production positions in Vermont and Washington, D.C. Saran has been active on a number of community boards and became interested in serving on the Board of Medical Practice when she learned about it through Susan Spaulding, a former public member of the Vermont Board of Medical Practice and President of the Federation of State Medical Boards.

Physician Member Profile: Robert Hayward, MD



“Although I mostly grew up in Virginia and attended medical school there, I am a third generation Vermont physician. My grandfather came here in 1900 and practiced for over 50 years. Two of his sons (my uncles) were also physicians. I returned to Vermont in 1977 to enter residency and have been here ever since. When I was asked to join the Board a few years ago I was happy to have an opportunity to contribute. As an Ob/Gyn I felt it was important that the Board include a member from my specialty. One of the major strengths of the Board is the fact that there is broad physician representation.

As a Board member I feel that I have two important jobs. Number 1 is making sure that the public is protected by ensuring that we hold physicians to standards. Number 2 is ensuring that physicians are not punished unfairly for doing their jobs, while at the same time giving full consideration to each patient’s complaint.

There is one observation that I would like to share after having served on the Board for a few years. It seems that many of the complaints that we spend time assessing might never have been brought if the physicians had just done a better job of communicating with their patients. The ultimate goal is not to discipline physicians, but to improve practice, so we are spending more and more time discussing how we can educate physicians about the issues we are seeing in complaints. The rest of the Board and I hope that efforts such as the forums on opioid treatment presented last year were helpful. On the horizon, in addition to the challenges of chronic pain treatment, I anticipate that the Board will be involved in discussions surrounding end-of-life care.”

Dr. Hayward has served on the Board since 2010. He completed his residency in Obstetrics and Gynecology in 1981 at FAHC (then known as Medical Center Hospital of Vermont). He was in private practice for over twenty years before joining the staff of FAHC. He has also been an Associate Professor at the UVM College of Medicine. His numerous professional and teaching honors include being Board Certified in Ob/Gyn since 1983 and recognition for excellence in teaching Ob/Gyn.