Governor's GMAP Forum on Health Care

Implementation of the Governor's Health Care Goals, Strategies & Initiatives

July 12, 2006

Please visit our Website at:
http://www.accountability.wa.gov

DOH Health Professions

What have we accomplished since December GMAP?

- **We added "tools" to qualify applicants licensed to practice in Washington**
  - **Began national databank checks in June for other state's disciplinary actions**
  - **Revised applications to clarify instructions on disclosure of criminal convictions**

- **We strengthened standards for practice**
  - **Sanction guidelines adopted for Secretary professions**
  - **Sexual misconduct rule-making begun by all professions (16 already adopted)**

- **We made complaint process improvements**
  - **Began emergency investigation procedures for all professions**
  - **Began using a new case priority tracking system**
  - **Began new process to schedule hearings for quicker resolution**
  - **Began new process to speed suspensions for non-compliance**
  - **Signed new MOU with DSHS/HRSA, DOC, L&I to share investigation information**
  - **Completed protocols for sexual misconduct investigation**

- **We welcomed external perspectives on our complaint process**
  - **Completed national case/time benchmark survey**
  - **Medical Quality Assurance Commission review begun**
  - **State Auditor's Office performance audit underway**

Are we taking serious, appropriate action when necessary?

Goal: **Sanction Appropriately and Consistently**

Target: **Appropriate, consistent use of sanctions 100% of the time.**

Analysis:

- Sanctions have been inconsistently applied across professions for similar violations
- Public perception – sanctions not "tough" enough and practitioners protect their own
- Sanction guidelines adopted for Secretary professions May 30, 2006

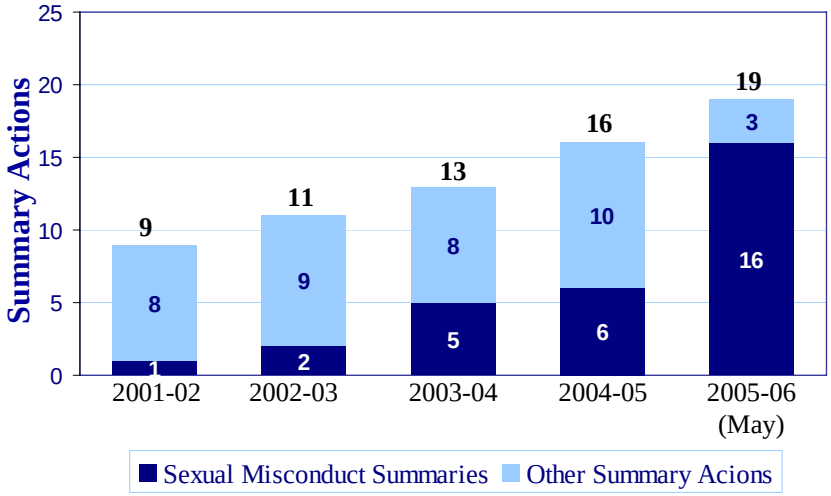
Challenges:

- Independent Boards, Commissions either have own guidelines or wish to adopt own
- Training staff and board, commission members on consistent use of guidelines

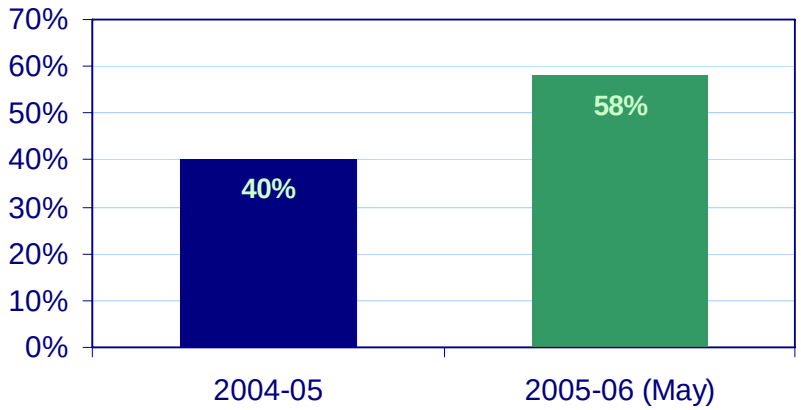
Actions	Who	Target Date
Share guidelines, explain testing and adoption process to boards, commissions.	Secretary Selecky Patti Latsch, Health Professions Deputy	Thru October
Analyze all legal orders against guidelines and make refinements.	Patti Latsch Laura Farris, Sr. Health Law Judge	Thru October
Adopt refinements. Determine need for rules.	Secretary Selecky Bonnie King, Health Professions Director	11/01/2006
Share results with boards, commissions & request guidelines adoption.	Secretary Selecky	12/01/2006
All boards, commissions adopt sanction guidelines.	Boards, Commissions	03/31/2007

Are we taking serious, appropriate action when necessary?

Sexual Misconduct Summary Actions Increased as a Portion of all Summary Actions 2001-May 2006



Percent of Summaries Completed Within 90 Days



Data source: DOH tracking systems.

Goal: **Take Appropriate Prompt Action**

Targets:
- **Secretary professions have sexual misconduct rules by 9/1/06; Boards/Commissions by 6/30/07**
- **Summary actions completed 60% of time (in conduct cases) 90 days from complaint**

Analysis:

- Sexual misconduct rules begun for all professions
- Boards, commissions began rule-making 3 months ahead of target
- Summary action investigation procedures for all professions implemented. 58% completed within 90 days. 2003-05 only 40%.

Challenges:

- Board, commission adoption of sexual misconduct rule language similar to secretary profession language.
- Board, commission meeting schedules lengthen process.

Actions	Who	Target Date
Establish separate summary action time targets standard of care cases.	Patti Latsch	09/01/2006
Complete rule-making for Secretary professions. Establish sexual misconduct definition.	Bonnie King	09/01/2006
Complete board, commission sexual misconduct rule-making.	Boards Commissions	06/30/2007
Report annually to the Governor.	Mary Selecky	09/01/2007

How long does it take to complete each step?

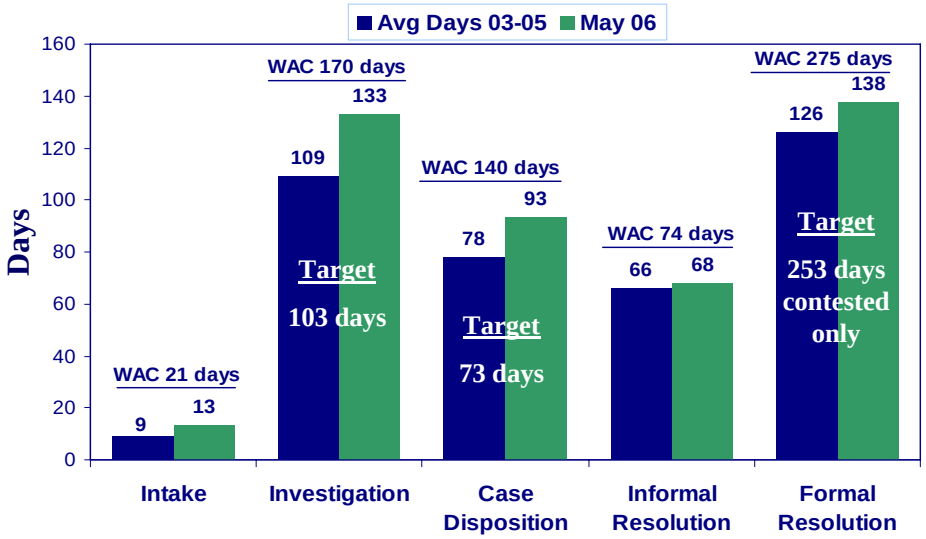
Goal: **Reduce Time**

Interim Target: **Average time would have to be reduced 5-6% to meet targets by 6/30/07**

Note: *Contested cases require hearings. Average is 336 days through May for 29 hearings.

Average Days by Step 2003-2005 v. 2005 – May 2006

(WAC 246-14 sets timeline standards)



Analysis/Challenges: Time increasing

- Appellate court ruling caused return of 1200 investigations to boards, commissions
- Case prioritization directive shifted resources to highest priorities; routine cases age
- Practitioners not timely providing evidence records

Other Challenges:

- Legislated studies ongoing re: Staffing, support resources needed, and review of alternative funding models

Actions	Who	Target Date
Examine where to focus with current resources: case time, quantity, quality	Bonnie King Patti Latsch	On-going
Continue recruitment for investigators, staff attorneys, support staff.	Patti Latsch & DOH HR	On-going
Complete initial staffing study. Complete alternative funding study.	Patti Latsch Don Green, Health Systems Operations Director	07/20/06 11/01/06

Data source: DOH tracking systems.

Follow-up: What were benchmark study results?

	Other states' benchmarks	Washington Standards	Washington Actual 7/1/05 – 5/31/06
Time limits	Investigations (typically): 180 days Complaint to resolution after contested hearing: 365 days to no time limit	170 days 606 days total complaint to resolution after contested hearing	133 days 336 days
Priorities	Summary actions: 30-90 days Priorities: Potential or immediate harm to the public; some states still trying to identify targets	60% completed within 90 days of receipt of conduct complaints; set new target for standard of care cases. Priorities: Physical injury, death, sexual contact or abuse of a patient	58% (both types of complaints)
Workload	Investigations closed/month: Ranged from 2 to 11 per month per investigator Investigator caseload: Ranged from 15 to 89 cases per investigator	6-8 closed per month per investigator 35 cases per investigator	8.5 closed per month 37 per investigator

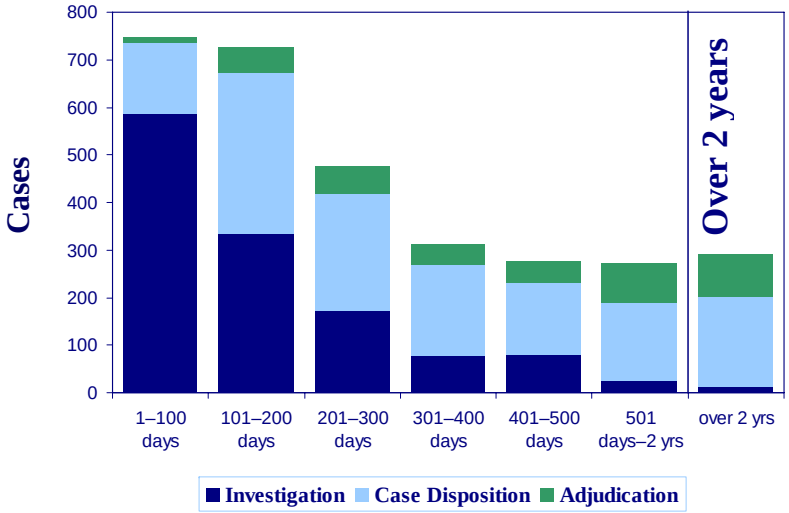
Analysis:
- Sent surveys to 369 entities, 24 responded
- There are few states with similar breadth of responsibility; data is limited
- Washington has tougher standards and better performance measurement tracking than many states

Action Plan:
- Continue using existing timelines, priorities, workload standards, while drilling down into data to determine if new standards warranted. Set new target for summary actions in standard of care cases by 9/1/06.

Data Source: DOH Benchmark Survey (Spring 2006).

Open Cases: How many and how old?

Age of Cases in each Step
Total Cases Open = 3,423



Note: Intake/Assessment cases 251 >=30 days; 72 = 30+ days

Goal: **Analyze & better understand types of open cases; refine action plan**

Interim Target: **Reduce elapsed time from complaint receipt to resolution by 5% by 6/30/07**

Analysis/Challenges:

- 90 practitioners are responsible for 494 of the 3,423 open cases. Remaining 2,929 cases have a one-to-one relationship with practitioners.
- From 7/01/05 open cases increased 13% to 3,423.
- See slide 4 for list of challenges.

Actions	Who	Target Date
• Examine all cases over 2 years • Focus case attention on practitioners with multiple complaints • New investigators in-training focus on routine cases • Paralegal focus on default cases • Implement fast track non-compliance case resolution process	Patti Latsch	Thru 06/07
Continue recruitment for investigators, staff attorneys, support staff	Patti Latsch & DOH HR	On-going

Definitions:

- Case Disposition includes board, commission and contracted expert review time, staff attorney and AAG legal analysis.
- Adjudication includes notice of charges, settlement, prehearing and hearing time.

Data source: DOH tracking systems.

Summary of Action Plan

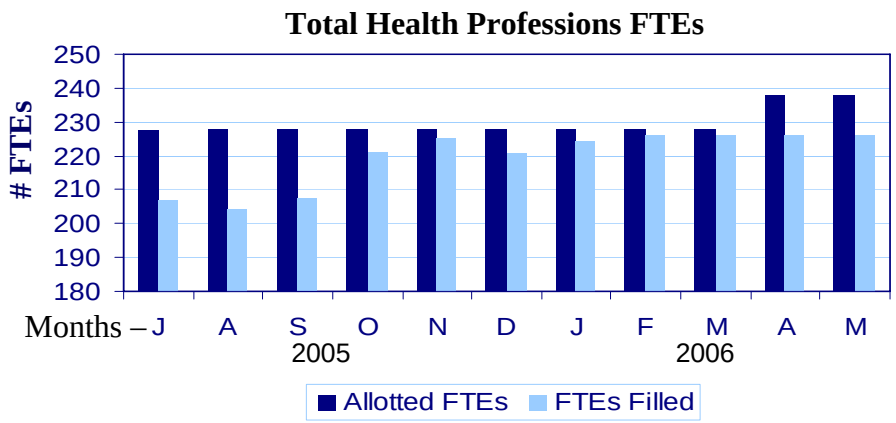
	Due Date
Qualified Applicants	
• Complete initial work with stakeholders on denial of license through simpler process.	• August 15, 2006
• Complete feasibility study on criminal background checks.	• November 1, 2006
Prompt, Well Informed Discipline	
• Secretary distributes guidelines, reviews, revises; determines need for rules.	• Thru October 2006
• Share revised guidelines with boards, commissions; request adoption.	• December 1,2006
• Boards, commissions adopt sanction guidelines.	• March 31, 2007
• Report quarterly on sanction guidelines use.	• September 30, 2006
• Establish separate summary action time targets for conduct vs. standard of care cases.	• September 1, 2006
• Adopt sexual misconduct rules in Secretary professions.	• September 1, 2006
• Complete board, commission sexual misconduct rule-making.	• June 30, 2007
• Report annually to Governor.	• September 1, 2007
• Complete initial alternative staffing study.	• July 20, 2006
• Continue drilling down to determine if new caseload/timeline standards warranted.	• September 30, 2006
• Assess fast track non-compliance case resolution process against baseline. Report quarterly.	• September 30, 2006
• Use new investigators and paralegals to close out routine cases.	• Ongoing
• Continue recruitment for investigators, staff attorneys, support staff.	• Ongoing
• Focus and take action against practitioners with multiple complaints.	• Ongoing
• Complete initial work with stakeholders on permanent revocation of license and fines for non-production of records by practitioner during investigation.	• August 15, 2006
• Complete alternative funding study.	• November 1, 2006

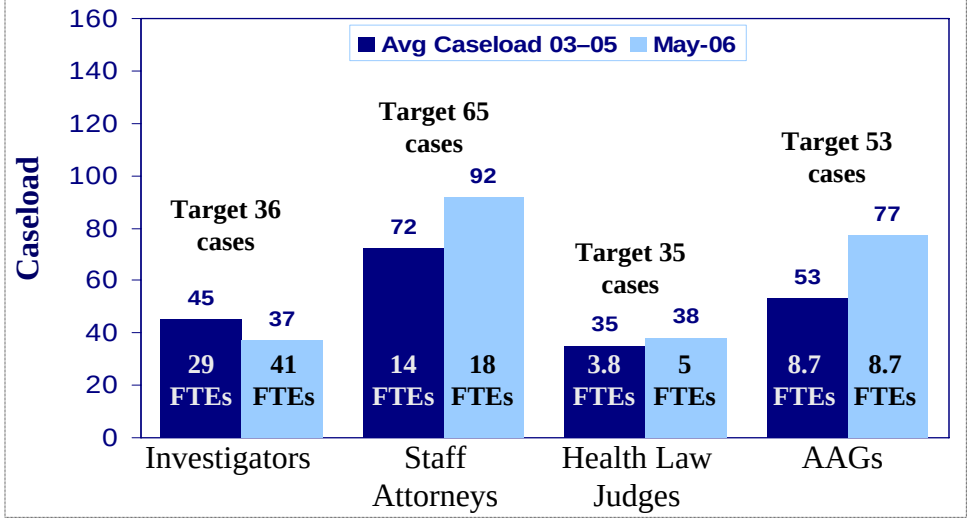
Supplemental Slide

Prompt, Well Informed Discipline

Goal: Reduce Caseloads

What were 03-05 caseloads? May 06?





Measure: - FTEs allotted vs. filled
- Caseload per person.

Target: **Fill allotted FTE positions**

Interim Targets:
- **Reduce investigators caseload from 45 to 36**
- **Reduce staff attorney caseload from 72 to 65**
- **Maintain caseload for health law judges and assistant attorneys general at 35 and 53.**

Analysis/Challenges:

- Investigator, staff attorney, and health law judge FTEs increased for 2005-2007 biennium. Assistant attorneys general FTEs did not increase.
- Quicker case closures by investigators increase work for legal staff
- Ten more FTEs allotted 4/1/06 because of 2006 Legislation.

Action Plan:

- Determine need for disciplinary personnel for 2007 Legislative consideration.
- Continue recruitment and hiring to fill disciplinary staff vacancies

Data source: Personnel records. DOH tracking systems.