# Health Professions Disciplinary Activities Workload Model Review

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# **REPORT SUMMARY**

### **Health Professions Disciplinary Activities**

There are 78 health professions regulated by the Department of Health or by one of 16 separate boards and commissions. The Department's Health Systems Quality Assurance Division and Adjudicative Service Unit provide staff support for the regulation of these professions, as do staff from the Office of the Attorney General. The regulatory activities include both discipline and licensing. As one part of the regulatory role, these staff are responsible for various disciplinary activities. Disciplinary activities include complaint intake, investigations, and administrative proceedings. Complaints of alleged unprofessional conduct can lead to an investigation by disciplining authorities, which may result in a sanction such as suspension of a license, fine, or conditions on practicing the profession.

# Legislative Mandate to Develop a Workload Formula

In 2006, the Legislature passed Substitute House Bill 2974 that required the Department to develop and use a workload formula for health professions disciplinary activities.

Specifically, statute (RCW 18.130.380(1)) requires the Department to develop and use a formula that estimates the workload cost of its health professions disciplinary activities for three biennial budgets, beginning with the 2007-09 budget request. With this formula, the Legislature directed the Department to specify:

- 1) The number of, and cost of supporting, existing full-time employees designated as investigators and attorneys; and
- 2) The number of, and cost of supporting, additional full-time investigators and attorneys required to achieve a staffing level that is able to respond "promptly, competently, and appropriately" to the workload associated with health professions disciplinary activities.

The formula is to be based on the Department's "prior experience with staff levels compared to the number of providers, complaints, investigations, and other criteria that are determined relevant to staffing level decisions."

The Department first responded to this requirement with an interim formula for the 2007-09 budget. The Department then commissioned development of a model to estimate health professions disciplinary activities workload. SHB 2974 also directed the Joint Legislative Audit and Review Committee (JLARC) to look at the Department's workload formulas for health professions disciplinary activities.

## The Department of Health Complies with the Legislative Mandate

JLARC reviewed the development and use of the formulas in the workload model. The workload model is based on reliable and statistically valid data collected from a workload study that used random work sampling, a commonly accepted method for analyzing staff time and resources. The workload model:

- 1) Is in full compliance with the legislative mandate;
- 2) Includes the full range of disciplinary activities reflecting the tasks involved in the disciplinary process as identified by the Department of Health and state statute; and
- 3) Was used by the Department of Health, and was referenced by the two Commissions that are part of the pilot program established in 4SHB 1103 (2008), for the 2009-11 biennial budget requests. The Legislature partially funded one budget request for the Medical Quality Assurance Commission, one of the pilot program's Commissions.

### **Recommendations to Support Future Compliance**

The Department of Health is currently in compliance with the legislative mandate to develop a workload formula for health professions disciplinary activities. However, JLARC's analysis supports two recommendations intended to help the Department and the pilot program's two Commissions remain in compliance in the future.

### **Recommendation 1**

The Department of Health, the Medical Quality Assurance Commission, and the Nursing Care Quality Assurance Commission should develop a formal process to periodically review and update the underlying data and equations in the workload models.

The formal review process should include discussions about impacts from the Health Systems Quality Assurance Division reorganization, current and future work processes and policy changes, training both for staff who manipulate the models and for those who use the output to make management decisions, and the need for updating the underlying data and equations as they become outdated. Based on the results of these discussions, the workload models should be updated as necessary.

### Recommendation 2

The Legislature should clarify whether the Medical Quality Assurance Commission and the Nursing Care Quality Assurance Commission are required to use the workload models when developing their biennial budget requests.

These are the two Commissions that are part of the pilot program established in 4SHB 1103 (2008). The two Commissions receive appropriations from the same account as the Department of Health for its disciplinary activities; however, there is no *explicit* language in statute requiring the Commissions to use a workload formula for estimating their disciplinary activities. By December 15, 2013, the Secretary of Health and the two Commissions are required to report the results of the pilot project to the Governor and the Legislature.