



***HEALTH
PROFESSIONS
DISCIPLINE AND
REGULATORY
ACTIVITIES***

2013-15

***Uniform
Disciplinary Act
Biennial Report***



***Health Systems
Quality Assurance
Division***

June 2016



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PROFESSIONS
DISCIPLINE AND
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***For more information or additional
copies of this report contact:***

***Office of Health Professions and Facilities
P.O. Box 47860
Olympia, WA 98504-7860
360-236-4996
FAX 360-753-0657***

***For general assistance call:
Customer Service Center
(360) 236-4700***

***John Wiesman, DrPH, MPH
Secretary of Health***



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Introductory Summary

Health Systems Quality Assurance Division

The Health Systems Quality Assurance Division (HSQA) of the Department of Health regulates approximately 400,000 health care providers in 83 professions.¹

The department directly regulates 46 health professions. The remaining 37 professions are regulated by 17 boards and commissions. The department works closely with most of these boards and commissions to credential health professionals, investigate complaints, and to take disciplinary action.² One board, the Board of Massage, has split authority with the department over its professions.³

**Table 1: Secretary and Board/Commission Authority
2013-15 Biennium**

Regulatory Authority	Licensure	Discipline
Secretary of Health	46	48
Boards/Commissions	37	35
Total	83	83

The department also supports the work of the health profession boards and commissions to develop rules and standards of practice that regulate the professions. In addition, it assists the boards and commissions in monitoring healthcare providers' compliance with sanctions.

This report describes regulatory activities for all professions subject to the Uniform Disciplinary Act, including emergency medical services professions. The four emergency services professions are emergency medical technician, emergency medical responder, intermediate life support technician, and paramedic.

¹ This count of healthcare professions includes dietitians and nutritionists as a single profession.

² Under House Bill 1518 (2013), the Medical Quality Assurance Commission and Nursing Care Quality Assurance Commission were granted greater authority of their credentialing, investigative, and disciplinary functions. The department continues to provide some administrative support to these commissions. HB 1518 also authorized the Chiropractic Quality Assurance Commission to undertake a five-year pilot with similar provisions.

³ While the department has licensing and disciplinary authority for massage practitioners, the Board of Massage has responsibility for evaluating and approving schools and programs of massage, overseeing examinations for massage licensure, establishing continuing education requirements, and determining which other states have substantially equivalent requirements to those of the state of Washington. The board and the department share rulemaking authority for the profession.

About the 2013-15 Uniform Disciplinary Act (UDA) Report

Because the report describes activities conducted under the authority of chapter 18.130 RCW, the Uniform Disciplinary Act, it is often referred to as the "UDA Report."

This report details the number of complaints made, investigated, and adjudicated among health professions for the period from July 1, 2013 to June 30, 2015. It also reports on the final disposition of cases and provides data on the department's background check activities and its effectiveness in identifying unqualified license holders. In addition, the report includes data on the average distribution, by health profession, of cases assigned to investigators and staff attorneys.

In 2008, the Legislature added a provision allowing health professions boards and commissions to submit supplements to this report. Their reports can cover disciplinary activity, budget concerns, and matters of rule and policy.

The Washington Emergency Medical Services and Trauma Care Steering Committee advises the department about EMS and trauma care needs in the state. The committee reviews the regional medical services and trauma care plans and recommends changes. They also review proposed rules and recommend rule modifications for EMS and trauma care.⁴

2013-15 Biennium: Disciplinary Activity and Trends

Complaints and Discipline

Most disciplinary activity starts with a complaint from the public, practitioners, facilities, or insurance companies. The department may also open complaints based on media accounts or information from law enforcement. During the biennium, 19,395 complaints were filed against credentialed healthcare providers and people alleged to be practicing illegally without a license. Included in this total are instances where individual providers received multiple complaints. These new complaints are in addition to 3,124 open complaints carried over from the previous biennium for a total of 22,519 complaints.

These complaints involved around 3.5%, or 15,100, of the 428,116 healthcare providers in Washington. Of these complaints, 2,547, or 11%, resulted in disciplinary sanctions. When considering all healthcare providers, less than 1% of all regulated health practitioners were disciplined.

Case Disposition

Complaints are resolved when closed without disciplinary action, or after informal or formal disciplinary action is taken. Investigative files and disciplinary documents are public records. Since July 1998, all actions against healthcare provider credentials are available on the Internet.⁵ Tables 11, 12, and 13 in the body of the report detail the closure types after adjudication. These are broken down by profession and type of disciplining authority (board, commission, or secretary).

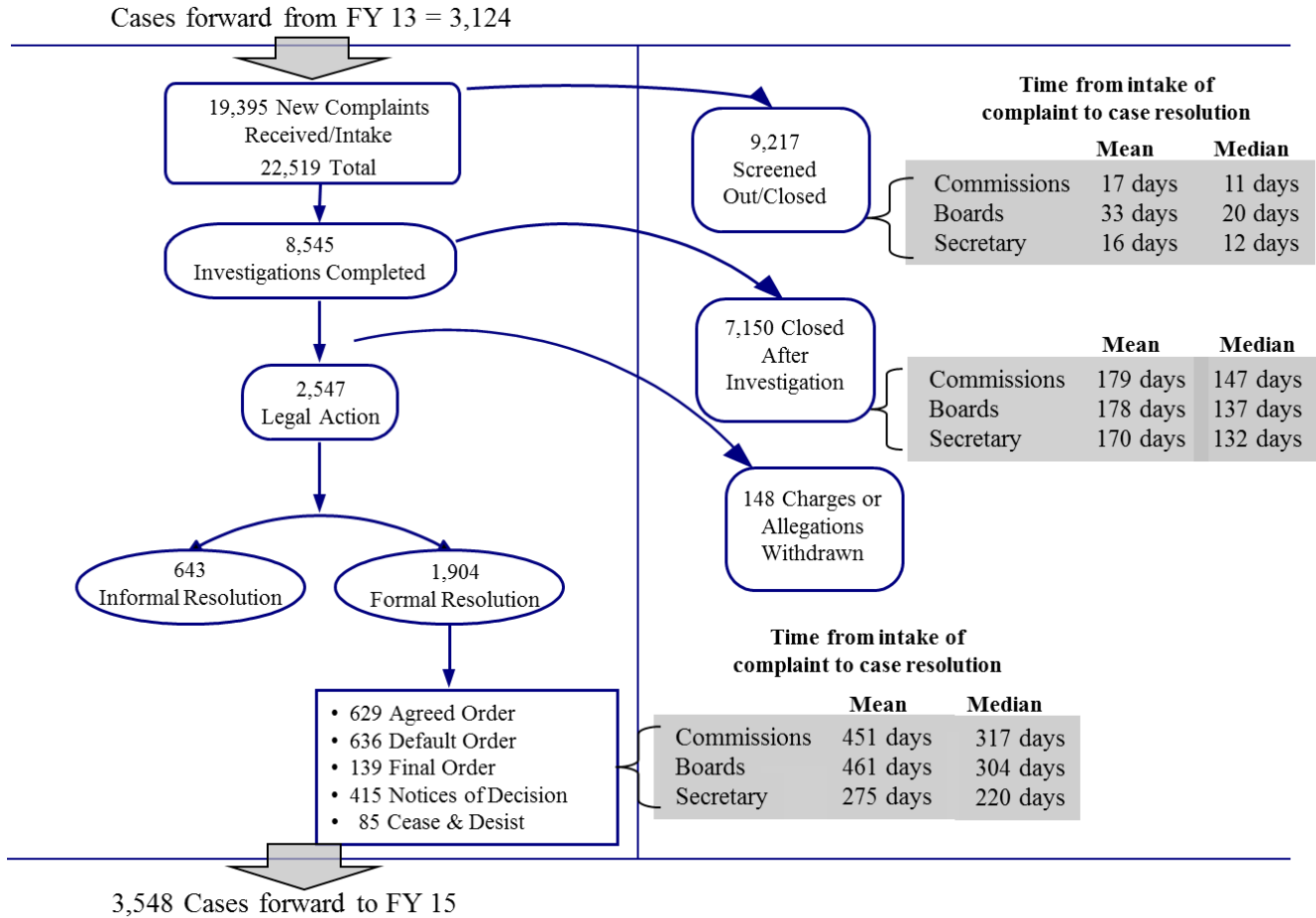
Disciplinary actions totaled 2,547 in 2013-2015. About 25% of the disciplinary actions were resolved with informal dispositions. The remaining actions were made up of formal resolutions. Of these formal resolutions, 33% were agreed orders, 33% were default orders, and 7% were final orders after hearings. Notices of decision on applications made up 22%, and cease and desist orders made up the remaining complaints—roughly 5%. For definitions of these types of disciplinary actions, see Appendix A (pg. 89).

The following flow chart maps the disciplinary process, with average length of time from complaint intake through resolution.

⁴ The secretary of health appoints members to the committee as of July 1, 2011. Until then, the governor appointed members.

⁵ Credential records are available through the department's "Provider Credential Search". The URL is: <https://fortress.wa.gov/doh/providercredentialsearch/>.

**Figure 1: HSQA Disciplinary Process Flow
2013-15 Biennium**



*The small discrepancy between cases carried forward from FY13 and opened within the biennium, and cases closed within the biennium and carried forward at the end of FY15, can be explained by cases which were reopened and closed within the biennium.

** Because this report represents a snapshot of activity within the biennium, it includes cases which were already partway through this process flow when the biennium began. For example, we may have legal action on cases where investigations were completed in the previous biennium.

Common Violations of the Law

The Uniform Disciplinary Act (UDA) regulates healthcare providers. The disciplining authorities decide whether the healthcare professional has committed unprofessional conduct, whether he or she can continue to practice with reasonable skill and safety, and under what conditions, if any. If the department “determines or has cause to believe that a license holder has committed a crime, [they], immediately subsequent to the issuing of findings of fact and a final order, shall notify the attorney general or county prosecuting attorney” as per RCW 18.130.210.

**Table 2: Most Common Disciplinary Violations
2013-15 Biennium**

Type	Percent of Complaints*
Violation of any state statute, federal statute or administrative rule ⁶	36%
Incompetence, negligence, or malpractice ⁷	25%
Conviction of a gross misdemeanor or felony relating to the practice of a healthcare profession ⁸	18%
Suspension, revocation, or restriction in another jurisdiction ⁹	18%
Personal drug or alcohol abuse ¹⁰	16%

* Percentage totals exceed 100% due to complaints recorded with multiple violations

For more information about the frequency of sanctions imposed, by type and by profession, see Table 15: Sanctions Imposed by Profession.

Average Legal and Investigative Caseloads

RCW 18.130.310 requires that this report will “summarize the distribution of the number of cases assigned to each attorney and investigator for each profession.” The law further requires that identities of staff attorneys and investigators be kept anonymous. Appendix D: Distribution of Staff Attorney Workload and Appendix E: Distribution of Investigator Workload detail, by health profession, the average number of cases assigned and worked by the division’s staff attorneys and investigators for the 2013-15 biennium.

Unlicensed Practice

When healthcare that can only be provided by a licensed professional is provided by an unlicensed person, it is called “unlicensed practice.” The secretary is responsible for investigating allegations of unlicensed practice. The Office of Investigation and Inspection manages these complaints. If unlicensed practice is found, the department can issue a Cease and Desist order.

A Cease and Desist order requires the person to stop the unlicensed activity and may impose a fine. Continued unlicensed practice may result in court enforcement of the Cease and Desist order or criminal prosecution. Due to limited resources, the department focuses on those cases alleging the highest potential risk to the public.

There were 1,216 unlicensed practice complaints during the 2013-2015 biennium, an increase of 932 complaints (over 300%) from the 2011-2013 biennium. The complete breakdown is summarized below.

⁶ RCW 18.130.180(7)

⁷ RCW 18.130.180(4)

⁸ RCW 18.130.180(17)

⁹ RCW 18.130.180(5)

¹⁰ RCW 18.130.180(6) and (23)

**Table 3: Unlicensed Practice Disciplinary Activity
2013-15 Biennium**

Total Complaints (including carry-over)	1,216
Closed No Action Taken Before Investigation	523
Closed No Action Taken After Investigation	407
Cease and Desist Order Issued	85
Total Closed	1,015
Total Carry-Over (Not Yet Closed)	201

Table 14: Unlicensed Practice Closures and Resolutions offers a more detailed listing of unlicensed practice disciplinary activity by type of profession.

Criminal Background Checks

RCW 18.130.064 allows the department to conduct a criminal history background check on all new applicants and current license holders. The purpose of the statute is to ensure patient safety by identifying those who may not be qualified to practice.

Types of Criminal Background Checks

The department works with several criminal and background databases to obtain criminal and disciplinary data on applicants:

- 1. Washington Access to Criminal History (WATCH) – this database is operated by the Washington State Patrol (WSP) and provides criminal conviction records for the state of Washington only. It is used for all applicants.*
- 2. National Practitioner Data Bank (NPDB) - this national data bank is administered by the U.S. Department of Health and Human Services. The data bank acts as a central repository for disciplinary information, including adverse actions, about health professionals.*
- 3. FBI Fingerprint-based National Background Check- this process is conducted on all out-of-state applicants through the FBI and state patrol.*

The department performed over 140,000 background checks on applicants during the 2013-2015 biennium. Checks through the Washington State Patrol’s WATCH database returned reports for 3,075 applicants. From those returned reports, the department opened 701 investigations.¹¹ Of these investigations, 73% involved applicants who had disclosed the conviction on the application. Table 18 contains additional details about each profession.

Table 4: HSQA Background Check Activity

Total Applicants	143,435
Applicants with background reports returned	3,075
Cases opened on applicants with reports returned	701
Applicants who disclosed criminal history (% of cases opened)	513 (73%)
Applicants not disclosing criminal history (% of cases opened)	188 (27%)

Also, as part of this background check process, all new applicants are checked against the National Practitioner Data Bank (NPDB).¹² This resource includes information about actions in other states, including some criminal convictions, to help determine the need for further review.

In addition, since 2009, the department now requires federal fingerprint checks for certain applicants and licensees. The checks are processed through the FBI’s Criminal Justice Information Services (CJIS) division. This test is used largely on applicants coming from outside of Washington or certain applicants with a criminal history in Washington.

¹¹ While 3,075 background reports were returned with criminal activity, many of these reports contained information either unrelated to the application or related to previous background checks (e.g. prior applications for concealed weapons permits.)

¹² Effective May 6, 2013, NPDB and HIPDB (Healthcare Integrity Protection Data Bank) merged. The databanks were merged to eliminate duplication of reporting and querying and to streamline databank operations. All data in the HIPDB was transferred to NPDB. Reporting requirements remain the same.

Notices of Decision

Historically, discipline included complaints opened because of an issue found on a license application. Legislation in 2008 changed the process for responding to application issues. For purposes of comparing disciplinary action statistics across biennia, the department has continued to include application cases in our complaint figures.

Common issues with applications include discipline in another state where the applicant is already licensed or problems arising from a background check. Prior to 2008, the disciplinary process would have been to conduct a full investigation, issue a statement of charges, then issue a final or agreed order. Currently, the department issues a notice of decision indicating that the pending application is denied or granted with conditions.

2013-15 Uniform Disciplinary Act Report

Complaint Investigation, Closure, and Case Resolution

The Uniform Disciplinary Act (UDA), chapter 18.130 RCW, provides standardized processes for discipline of practitioners. It serves as the statutory framework for the regulation of healthcare providers in Washington. This section of the report contains quantitative data on investigations, case closures, and case resolutions involving healthcare providers during the 2013-2015 biennium.

Investigation

The vast majority of healthcare providers never have a complaint filed against them. About 3.5% of the 428,116 healthcare providers had a complaint against them in the 2013-15 biennium. Of the 22,519 complaints processed during the biennium, about 11%, or 2,547, resulted in discipline. When considering all healthcare providers, less than 1% of all regulated practitioners were disciplined.

During the biennium, HSQA received a total of 19,395 complaints against credentialed healthcare providers and people alleged to be practicing illegally without a license. Included in this total are instances where individual providers received multiple complaints. These new complaints are in addition to 3,124 open complaints carried over from the previous biennium. These 22,519 complaints led to 8,545 investigations.

**Table 5: Investigation Activity by Profession
2013-15 Biennium**

Profession	Carry Over From FY13	Complaints Received	Total Complaints	Investigations Completed	Unlicensed Practice Investigations Completed	Total Investigations Completed
Advanced Emergency Medical Technician	1	4	5	4	0	4
Advanced Registered Nurse Practitioner	68	332	400	134	0	134
Animal Massage Practitioner	1	4	5	0	2	2
Athletic Trainer	0	13	13	4	3	7
Audiologist	1	10	11	3	0	3
Cardiovascular Invasive Specialist	0	1	1	0	0	0
Chemical Dependency Professional	83	316	399	191	3	194
Chemical Dependency Professional Trainee	60	216	276	96	2	98
Chiropractic X-Ray Technician	1	6	7	0	1	1
Chiropractor	96	331	427	217	0	217
Counselor, Agency Affiliated	57	237	294	120	3	123
Counselor, Certified	25	56	81	23	4	27
Counselor, Certified Advisor	0	4	4	1	0	1
Dental Anesthesia Assistant	0	0	0	0	0	0
Dental Assistant	33	126	159	61	16	77
Dental Hygienist	16	54	70	10	5	15
Dentist	271	995	1,266	508	11	519
Denturist	20	55	75	39	0	39
Dietitian/Nutritionist	2	9	11	2	0	2
Dispensing Optician	6	22	28	5	9	14
Dispensing Optician Apprentice	0	2	2	1	0	1
East Asian Medicine Practitioner	11	197	208	23	10	33
Emergency Medical Responder	1	1	2	1	0	1
Emergency Medical Technician	33	110	143	68	0	68
Expanded Function Dental Auxiliary	1	0	1	0	0	0
Genetic Counselor	0	1	1	0	1	1
Health Care Assistant*	49	28	77	31	4	35
Hearing Instrument Fitter and Dispenser**	8	0	8	0	0	0
Hearing Aid Specialist**	0	6	6	6	1	7
Home Care Aide	25	421	446	103	10	113
Humane Society	0	0	0	1	0	1
Hypnotherapist	4	13	17	8	1	9
Licensed Practical Nurse	97	622	719	190	1	191
Marriage and Family Therapist	13	55	68	30	4	34
Marriage and Family Therapist Associate	8	18	26	17	0	17
Massage Practitioner	95	1,144	1,239	279	232	511
Medical Assistant	0	517	517	136	59	195
Mental Health Counselor	47	281	328	151	3	154
Mental Health Counselor Associate	9	55	64	27	1	28

Profession	Carry Over From FY13	Complaints Received	Total Complaints	Investigations Completed	Unlicensed Practice Investigations Completed	Total Investigations Completed
Midwife	12	37	49	26	4	30
Naturopathic Physician	55	114	169	97	12	109
Nursing Assistant	542	5,043	5,585	1,562	12	1,574
Nursing Home Administrator	26	216	242	64	0	64
Nursing Pool Operator	0	3	3	0	0	0
Nursing Technician	0	0	0	0	0	0
Occupational Therapist	14	42	56	21	1	22
Occupational Therapy Assistant	2	33	35	8	0	8
Ocularist	0	0	0	0	0	0
Optometrist	13	57	70	21	4	25
Orthotist/Prosthetist	0	11	11	6	0	6
Osteopathic Physician	51	245	296	135	0	135
Osteopathic Physician Assistant	1	11	12	5	0	5
Paramedic	16	36	52	36	0	36
Pharmacies and Other Pharmaceutical Firms	27	274	301	108	18	126
Pharmacist	102	432	534	266	4	270
Pharmacist Intern	1	11	12	4	0	4
Pharmacy Assistant	14	124	138	61	0	61
Pharmacy Technician	26	106	132	66	2	68
Physical Therapist	16	131	147	54	3	57
Physical Therapist Assistant	7	50	57	17	4	21
Physician	453	2,886	3,339	1,586	33	1,619
Physician Assistant	36	179	215	107	0	107
Podiatric Physician	17	58	75	31	0	31
Psychologist	55	180	235	92	5	97
Radiological Technologist	10	27	37	17	1	18
Radiologist Assistant	0	0	0	0	0	0
Recreational Therapist	1	1	2	0	0	0
Reflexologist	0	18	18	4	4	8
Registered Nurse	337	2,230	2,567	841	7	848
Respiratory Care Practitioner	3	40	43	16	0	16
Retired Volunteer Medical Worker	0	0	0	0	0	0
Sex Offender Treatment Provider	6	20	26	13	0	13
Sex Offender Treatment Provider Affiliate	0	9	9	7	0	7
Social Worker Advanced	0	21	21	2	1	3
Social Worker Associate Advanced	2	1	3	1	0	1
Social Worker Associate Independent	5	45	50	27	1	28
Social Worker Independent Clinical	33	106	139	60	3	63
Speech Language Pathologist	2	21	23	3	1	4
Speech Language Pathology Assistant	0	0	0	0	0	0
Surgical Technologist	11	29	40	19	3	22

Profession	Carry Over From FY13	Complaints Received	Total Complaints	Investigations Completed	Unlicensed Practice Investigations Completed	Total Investigations Completed
Veterinarian	80	227	307	108	21	129
Veterinary Medication Clerk	0	6	6	2	1	3
Veterinary Technician	6	25	31	9	6	15
X-Ray Technician	0	28	28	16	0	16
Totals	3,124	19,395	22,519	8,008	537	8,545

* The Health Care Assistant credential has been abolished. It is included here due to cases carried over into the 13-15 biennium.

** The Hearing Instrument Fitter/Dispenser credential is now Hearing Aid Specialist. This change occurred during the 13-15 biennium.

Percentage of Investigations Completed

The following tables compare investigations completed to the number of complaints received. The column titled “% of B/C (Secretary) Investigations to Complaints” shows investigations completed as a percentage of complaints received by the same profession. For example, 34% (134) of the 400 total complaints received for Advanced Registered Nurse Practitioners had an investigation completed.

The column titled “% of B/C (Secretary) Investigations Completed” compares the total number of investigations completed for a profession to the total number of investigations completed for all professions with like disciplinary authority. For example, completed chiropractor investigations made up 4% (217) of the 5,528 board and commission investigations completed. In the secretary profession investigations completed, nursing assistant investigations represented 52% (1,574) of the 3,017 completed secretary profession investigations.

While Table 5 includes all professions, including those which have had no complaint activity this biennium, subsequent tables exclude those professions.

**Table 6: Board and Commission Professions - Percentage of Investigations Completed
2013-15 Biennium**

Profession	Carry Over From FY13	Complaints Received	Total Complaints	Investigations Completed	Unlicensed Practice Investigations	Total Investigations Completed	% of BC Completed Investigations to Complaints	% of BC Investigations Completed
Advanced Registered Nurse Practitioner	68	332	400	134	0	134	34%	2%
Audiologist	1	10	11	3	0	3	27%	0%
Chiropractic X-Ray Technician	1	6	7	0	1	1	14%	0%
Chiropractor	96	331	427	217	0	217	51%	4%
Dental Assistant	33	126	159	61	16	77	48%	1%
Dentist	271	995	1,266	508	11	519	41%	9%
Denturist	20	55	75	39	0	39	52%	1%
Expanded Function Dental Auxiliary	1	0	1	0	0	0	0%	0%
Hearing Aid Specialist	0	6	6	6	1	7	117%	0%
Hearing Instrument Fitter and Dispenser	8	0	8	0	0	0	0%	0%
Humane Society	0	0	0	1	0	1	--	0%
Licensed Practical Nurse	97	622	719	190	1	191	27%	3%
Massage Practitioner	95	1,144	1,239	279	232	511	41%	9%
Naturopathic Physician	55	114	169	97	12	109	64%	2%
Nursing Home Administrator	26	216	242	64	0	64	26%	1%
Occupational Therapist	14	42	56	21	1	22	39%	0%
Occupational Therapy Assistant	2	33	35	8	0	8	23%	0%
Optometrist	13	57	70	21	4	25	36%	0%
Osteopathic Physician	51	245	296	135	0	135	46%	2%
Osteopathic Physician Assistant	1	11	12	5	0	5	42%	0%
Pharmacies and Other Pharmaceutical Firms	27	274	301	108	18	126	42%	2%
Pharmacist	102	432	534	266	4	270	51%	5%
Pharmacist Intern	1	11	12	4	0	4	33%	0%
Pharmacy Assistant	14	124	138	61	0	61	44%	1%
Pharmacy Technician	26	106	132	66	2	68	52%	1%
Physical Therapist	16	131	147	54	3	57	39%	1%
Physical Therapist Assistant	7	50	57	17	4	21	37%	0%
Physician	453	2,886	3,339	1,586	33	1,619	48%	29%
Physician Assistant	36	179	215	107	0	107	50%	2%
Podiatric Physician	17	58	75	31	0	31	41%	1%
Psychologist	55	180	235	92	5	97	41%	2%
Registered Nurse	337	2,230	2,567	841	7	848	33%	15%
Speech Language Pathologist	2	21	23	3	1	4	17%	0%
Speech Language Pathology Assistant	0	0	0	0	0	0	--	0%
Veterinarian	80	227	307	108	21	129	42%	2%

Profession	Carry Over From FY13	Complaints Received	Total Complaints	Investigations Completed	Unlicensed Practice Investigations	Total Investigations Completed	% of BC Completed Investigations to Complaints	% of BC Investigations Completed
Veterinary Medication Clerk	0	6	6	2	1	3	50%	0%
Veterinary Technician	6	25	31	9	6	15	48%	0%
Totals	2,032	11,285	13,317	5,144	384	5,528		

**Table 7: Secretary Professions - Percentage of Investigations Completed
2013-15 Biennium**

Profession	Carry Over From FY13	Complaints Received	Total Complaints	Investigations Completed	Unlicensed Practice Investigations	Total Investigations Completed	% of Secretary Completed Investigations to Complaints	% of Secretary Investigations Completed
Advanced Emergency Medical Technician	1	4	5	4	0	4	80%	0%
Animal Massage Practitioner	1	4	5	0	2	2	40%	0%
Athletic Trainer	0	13	13	4	3	7	54%	0%
Cardiovascular Invasive Specialist	0	1	1	0	0	0	0%	0%
Chemical Dependency Professional	83	316	399	191	3	194	49%	6%
Chemical Dependency Professional Trainee	60	216	276	96	2	98	36%	3%
Counselor, Agency Affiliated	57	237	294	120	3	123	42%	4%
Counselor, Certified	25	56	81	23	4	27	33%	1%
Counselor, Certified Advisor	0	4	4	1	0	1	25%	0%
Dental Hygienist	16	54	70	10	5	15	21%	0%
Dietitian/Nutritionist	2	9	11	2	0	2	18%	0%
Dispensing Optician	6	22	28	5	9	14	50%	0%
Dispensing Optician Apprentice	0	2	2	1	0	1	50%	0%
East Asian Medicine Practitioner	11	197	208	23	10	33	16%	1%
Emergency Medical Responder	1	1	2	1	0	1	50%	0%
Emergency Medical Technician	33	110	143	68	0	68	48%	2%
Genetic Counselor	0	1	1	0	1	1	100%	0%
Health Care Assistant	49	28	77	31	4	35	45%	1%
Home Care Aide	25	421	446	103	10	113	25%	4%
Hypnotherapist	4	13	17	8	1	9	53%	0%
Marriage and Family Therapist	13	55	68	30	4	34	50%	1%
Marriage and Family Therapist Associate	8	18	26	17	0	17	65%	1%
Medical Assistant	0	517	517	136	59	195	38%	6%
Mental Health Counselor	47	281	328	151	3	154	47%	5%
Mental Health Counselor Associate	9	55	64	27	1	28	44%	1%
Midwife	12	37	49	26	4	30	61%	1%
Nursing Assistant	542	5,043	5,585	1,562	12	1,574	28%	52%
Nursing Pool Operator	0	3	3	0	0	0	0%	0%
Orthotist/Prosthetist	0	11	11	6	0	6	55%	0%

Profession	Carry Over From FY13	Complaints Received	Total Complaints	Investigations Completed	Unlicensed Practice Investigations	Total Investigations Completed	% of Secretary Completed Investigations to Complaints	% of Secretary Investigations Completed
Paramedic	16	36	52	36	0	36	69%	1%
Radiological Technologist	10	27	37	17	1	18	49%	1%
Recreational Therapist	1	1	2	0	0	0	0%	0%
Reflexologist	0	18	18	4	4	8	44%	0%
Respiratory Care Practitioner	3	40	43	16	0	16	37%	1%
Sex Offender Treatment Provider	6	20	26	13	0	13	50%	0%
Sex Offender Treatment Provider Affiliate	0	9	9	7	0	7	78%	0%
Social Worker Advanced	0	21	21	2	1	3	14%	0%
Social Worker Associate Advanced	2	1	3	1	0	1	33%	0%
Social Worker Associate Independent	5	45	50	27	1	28	56%	1%
Social Worker Independent Clinical	33	106	139	60	3	63	45%	2%
Surgical Technologist	11	29	40	19	3	22	55%	1%
X-Ray Technician	0	28	28	16	0	16	57%	1%
Totals	1,092	8,110	9,202	2,864	153	3,017		

The 37 board and commission professions accounted for 65% of the 8,545 investigations completed during the biennium; the 46 secretary authority professions completed the remaining 35%. In general, boards and commissions regulate more of the primary care professions whose practitioners can pose a greater risk of harm to patients. This may be reflected in the higher percentage of completed complaint investigations.

Cite and Fine Authority

RCW 18.130.230 gives the secretary, and the boards and commissions, the authority to cite and fine providers for failing to produce requested documents or records. Providers must produce required items within 21 days of a written request from the disciplining authority. The deadline can be extended for good cause. The fine accrues at \$100 per day of non-compliance. The maximum fine is \$5,000.

One important aspect of this law is that it provides a strong incentive to cooperate in investigations, rather than obstruct the process. In the last biennium, six cases were opened under cite and fine authority, and four of these licensees were actually assessed a fine. All were fined the maximum amount, \$5,000. One was a dentist, two were naturopathic physicians, and the fourth was an osteopathic physician.

Sexual Misconduct Cases

RCW 18.130.062 requires the secretary to act as sole disciplinary authority for complaints that allege only sexual misconduct. The intent of the law is to encourage prompt action when a provider has engaged in sexual misconduct without involving issues of clinical expertise or standard of care.

The appropriate board or commission reviews each complaint and retains responsibility for those cases that also involve clinical expertise or standard of care issues. The board and commissions transfer cases that involve only sexual misconduct to the secretary for discipline. During the biennium, 33 cases were referred to the secretary. Of those, six were returned to the referring board or commission when the investigation revealed a clinical or standard of care issue. One additional referral was made for a case that carried over from the previous biennium.

Case Disposition

Complaints are resolved in one of three ways:

- 1) Without any disciplinary action.
- 2) When informal disciplinary action is taken.
- 3) When formal disciplinary action is taken.

Disciplinary actions totaled 2,547 in 2013-2015. About 25% of the disciplinary actions were resolved with informal dispositions. The remaining 75% were resolved by formal resolution, with 33% ending in agreed orders, 33% with default orders, and 7% with final orders after hearings. Notices of decision on applications made up 22%, and Cease and Desist orders made up the remainder—approximately 5%.

Investigative files and disciplinary documents are public records. Since July 1998, all actions against healthcare provider credentials are available on the Internet.¹³

Definitions are available for key disciplinary terms in Appendix A.

Complaints Closed Prior to Disciplinary Action

Many complaints close before issuance of a statement of allegations or a statement of charges. These cases close for a number of reasons, among them:

- The complaint does not rise to a threshold to warrant investigation.
- After the investigation, it's decided to close the complaint due to minimal risk, the evidence is insufficient to support the allegations against a healthcare provider, the evidence disproves the allegations, or the evidence does not support a finding of unprofessional conduct.
- The disciplinary authority does not have jurisdiction.
- The complaint is best resolved with a Notice of Correction notifying the healthcare provider of a minor technical violation. The healthcare provider has a reasonable time period to correct the violation and then to report the corrective action to the disciplinary authority. If the violation is not corrected, disciplinary action may follow.

In addition, occasionally new evidence warrants the withdrawal of a statement of allegations or statement of charges.

The following table provides information by profession for cases closed before disciplinary action. The statistics include closures in unlicensed practice cases.

¹³ Credential records are available through the Department's "Provider Credential Search." The URL is: <https://fortress.wa.gov/doh/providercredentialsearch/>.

**Table 8: Complaints Closed Prior to Disciplinary Action
2013-15 Biennium**

Profession	Total Complaints	Closed Prior To Investigation	Closed After Investigation	Charges or Allegations Withdrawn	Total Closed
Advanced Emergency Medical Technician	5	0	3	1	4
Advanced Registered Nurse Practitioner	400	202	114	4	320
Animal Massage Practitioner	5	1	2	0	3
Athletic Trainer	13	6	7	0	13
Audiologist	11	4	5	0	9
Cardiovascular Invasive Specialist	1	1	0	0	1
Chemical Dependency Professional	399	71	146	2	219
Chemical Dependency Professional Trainee	276	21	94	2	117
Chiropractic X-Ray Technician	7	1	5	0	6
Chiropractor	427	70	176	15	261
Counselor, Agency Affiliated	294	80	114	2	196
Counselor, Certified	81	22	34	1	57
Counselor, Certified Advisor	4	1	0	0	1
Dental Anesthesia Assistant	0	0	0	0	0
Dental Assistant	159	26	71	1	98
Dental Hygienist	70	12	36	0	48
Dentist	1,266	469	444	20	933
Denturist	75	9	34	5	48
Dietitian/Nutritionist	11	6	3	0	9
Dispensing Optician	28	9	14	0	23
Dispensing Optician Apprentice	2	0	2	0	2
East Asian Medicine Practitioner	208	57	128	1	186
Emergency Medical Responder	2	1	1	0	2
Emergency Medical Technician	143	30	65	1	96
Expanded Function Dental Auxiliary	1	0	1	0	1
Genetic Counselor	1	0	1	0	1
Health Care Assistant	77	27	38	1	66
Hearing Instrument Fitter and Dispenser	8	0	0	0	0
Hearing Aid Specialist	6	1	12	0	13
Home Care Aide	446	172	143	4	319
Humane Society	0	0	1	0	1
Hypnotherapist	17	2	6	0	8
Licensed Practical Nurse	719	389	129	4	522
Marriage and Family Therapist	68	19	23	1	43
Marriage and Family Therapist Associate	26	2	15	0	17
Massage Practitioner	1,239	421	462	4	887
Medical Assistant	517	145	193	6	344
Mental Health Counselor	328	81	138	1	220
Mental Health Counselor Associate	64	18	20	1	39
Midwife	49	9	22	1	32
Naturopathic Physician	169	19	56	2	77
Nursing Assistant	5,585	3,216	1,202	7	4,425

Profession	Total Complaints	Closed Prior To Investigation	Closed After Investigation	Charges or Allegations Withdrawn	Total Closed
Nursing Home Administrator	242	136	53	0	189
Nursing Pool Operator	3	2	1	0	3
Nursing Technician	0	0	0	0	0
Occupational Therapist	56	11	17	1	29
Occupational Therapy Assistant	35	14	9	0	23
Ocularist	0	0	0	0	0
Optometrist	70	37	23	0	60
Orthotist/Prosthetist	11	1	8	0	9
Osteopathic Physician	296	101	84	4	189
Osteopathic Physician Assistant	12	1	8	0	9
Paramedic	52	7	18	0	25
Pharmacies and Other Pharmaceutical Firms	301	92	104	1	197
Pharmacist	534	147	218	0	365
Pharmacist Intern	12	2	3	0	5
Pharmacy Assistant	138	31	40	0	71
Pharmacy Technician	132	20	43	0	63
Physical Therapist	147	57	61	2	120
Physical Therapist Assistant	57	15	14	0	29
Physician	3,339	1,226	1,390	27	2,643
Physician Assistant	215	63	90	3	156
Podiatric Physician	75	25	22	1	48
Psychologist	235	73	84	4	161
Radiological Technologist	37	11	17	0	28
Radiologist Assistant	0	0	0	0	0
Recreational Therapist	2	1	0	0	1
Reflexologist	18	4	9	0	13
Registered Nurse	2,567	1,287	595	16	1,898
Respiratory Care Practitioner	43	17	11	0	28
Retired Volunteer Medical Worker	0	0	0	0	0
Sex Offender Treatment Provider	26	4	17	0	21
Sex Offender Treatment Provider Affiliate	9	2	9	0	11
Social Worker Advanced	21	12	7	0	19
Social Worker Associate Advanced	3	2	1	0	3
Social Worker Associate Independent	50	10	20	0	30
Social Worker Independent Clinical	139	42	64	2	108
Speech Language Pathologist	23	9	8	0	17
Speech Language Pathology Assistant	0	0	0	0	0
Surgical Technologist	40	9	19	0	28
Veterinarian	307	105	101	0	206
Veterinary Medication Clerk	6	0	1	0	1
Veterinary Technician	31	8	11	0	19
X-Ray Technician	28	13	10	0	23
Totals	22,519	9,217	7,150	148	16,515

Percentage of Complaints Closed

During the biennium, HSQA closed over 16,000 cases before legal proceedings. About 59% were board and commission cases and 41% were secretary profession cases.

The following tables show the cases closed with no disciplinary action, compared to total cases closed with no action and to the number of complaints received. The column titled “% of B/C (or Secretary) Closures” shows the total number of cases closed with no action for that profession compared to the total number of board or commission cases closed with no action.

For example, the 933 dentist cases were 10% of the 9,674 board and commission cases closed with no action; the 344 medical assistant cases were 5% of the 6,841 secretary profession cases closed with no action.

The column titled “% of B/C (or Secretary) Closures to Complaints” shows the percentage of cases closed with no action compared to the total number of complaints received for that same profession.

**Table 9: Board and Commission Complaints Closed Prior to Adjudicative Proceedings
2013-15 Biennium**

Profession	Carry Over From FY13	Complaints Received	Total Complaints	Total Closed	% of B/C Closures to Complaints	% of B/C Closures
Advanced Registered Nurse Practitioner	68	332	400	320	80%	3%
Audiologist	1	10	11	9	82%	0%
Chiropractic X-Ray Technician	1	6	7	6	86%	0%
Chiropractor	96	331	427	261	61%	3%
Dental Assistant	33	126	159	98	62%	1%
Dentist	271	995	1,266	933	74%	10%
Denturist	20	55	75	48	64%	0%
Expanded Function Dental Auxiliary	1	0	1	1	—	0%
Hearing Aid Specialist	0	6	6	13	217%	0%
Hearing Instrument Fitter and Dispenser	8	0	8	0	0%	0%
Humane Society	0	0	0	1	—	0%
Licensed Practical Nurse	97	622	719	522	73%	5%
Massage Practitioner	95	1,144	1,239	887	72%	9%
Naturopathic Physician	55	114	169	77	46%	1%
Nursing Home Administrator	26	216	242	189	78%	2%
Occupational Therapist	14	42	56	29	52%	0%
Occupational Therapy Assistant	2	33	35	23	66%	0%
Optometrist	13	57	70	60	86%	1%
Osteopathic Physician	51	245	296	189	64%	2%
Osteopathic Physician Assistant	1	11	12	9	75%	0%
Pharmacies and Other Pharmaceutical Firms	27	274	301	197	65%	2%
Pharmacist	102	432	534	365	68%	4%
Pharmacist Intern	1	11	12	5	42%	0%
Pharmacy Assistant	14	124	138	71	51%	1%
Pharmacy Technician	26	106	132	63	48%	1%
Physical Therapist	16	131	147	120	82%	1%
Physical Therapist Assistant	7	50	57	29	51%	0%
Physician	453	2,886	3,339	2,643	79%	27%
Physician Assistant	36	179	215	156	73%	2%
Podiatric Physician	17	58	75	48	64%	0%
Psychologist	55	180	235	161	69%	2%
Registered Nurse	337	2,230	2,567	1,898	74%	20%
Speech Language Pathologist	2	21	23	17	74%	0%
Speech Language Pathology Assistant	0	0	0	0	—	0%
Veterinarian	80	227	307	206	67%	2%
Veterinary Medication Clerk	0	6	6	1	17%	0%
Veterinary Technician	6	25	31	19	61%	0%
Totals	2,032	11,285	13,317	9,674		

**Table 10: Secretary Professions Complaints Closed Prior to Adjudicative Proceedings
2013-15 Biennium**

Profession	Carry Over From FY13	Complaints Received	Total Complaints	Total Closed	% of Secretary Investigation Closures to Complaints	% of Secretary Investigation Closures
Advanced Emergency Medical Technician	1	4	5	4	80%	0%
Animal Massage Practitioner	1	4	5	3	60%	0%
Athletic Trainer	0	13	13	13	100%	0%
Cardiovascular Invasive Specialist	0	1	1	1	100%	0%
Chemical Dependency Professional	83	316	399	219	55%	3%
Chemical Dependency Professional Trainee	60	216	276	117	42%	2%
Counselor, Agency Affiliated	57	237	294	196	67%	3%
Counselor, Certified	25	56	81	57	70%	1%
Counselor, Certified Advisor	0	4	4	1	25%	0%
Dental Hygienist	16	54	70	48	69%	1%
Dietitian/Nutritionist	2	9	11	9	82%	0%
Dispensing Optician	6	22	28	23	82%	0%
Dispensing Optician Apprentice	0	2	2	2	100%	0%
East Asian Medicine Practitioner	11	197	208	186	89%	3%
Emergency Medical Responder	1	1	2	2	100%	0%
Emergency Medical Technician	33	110	143	96	67%	1%
Genetic Counselor	0	1	1	1	100%	0%
Health Care Assistant	49	28	77	66	86%	1%
Home Care Aide	25	421	446	319	72%	5%
Hypnotherapist	4	13	17	8	47%	0%
Marriage and Family Therapist	13	55	68	43	63%	1%
Marriage and Family Therapist Associate	8	18	26	17	65%	0%
Medical Assistant	0	517	517	344	67%	5%
Mental Health Counselor	47	281	328	220	67%	3%
Mental Health Counselor Associate	9	55	64	39	61%	1%
Midwife	12	37	49	32	65%	0%
Nursing Assistant	542	5,043	5,585	4,425	79%	65%
Nursing Pool Operator	0	3	3	3	100%	0%
Orthotist/Prosthetist	0	11	11	9	82%	0%
Paramedic	16	36	52	25	48%	0%
Radiological Technologist	10	27	37	28	76%	0%
Recreational Therapist	1	1	2	1	50%	0%
Reflexologist	0	18	18	13	72%	0%
Respiratory Care Practitioner	3	40	43	28	65%	0%
Sex Offender Treatment Provider	6	20	26	21	81%	0%
Sex Offender Treatment Provider Affiliate	0	9	9	11	122%	0%
Social Worker Advanced	0	21	21	19	90%	0%
Social Worker Associate Advanced	2	1	3	3	100%	0%
Social Worker Associate Independent	5	45	50	30	60%	0%
Social Worker Independent Clinical	33	106	139	108	78%	2%
Surgical Technologist	11	29	40	28	70%	0%
X-Ray Technician	0	28	28	23	82%	0%
Totals	1,092	8,110	9,202	6,841		

Complaint Resolutions after Adjudicative Proceedings

The type of order issued to the healthcare provider indicates the manner in which the case was resolved. All orders are public records. Orders associated with actions against health care providers' credentials since July 1998 are available on the Internet.

The Legislature amended the Uniform Disciplinary Act in 2001 to permit practitioners to surrender their license in lieu of other sanctions. Surrender of license is used when the practitioner agrees to retire and not resume practice.

Surrender is not used if the practitioner intends to practice in another jurisdiction or if the disciplining authority believes return to practice is reasonably possible.

Stipulation to Informal Disposition: A Stipulation to Informal Disposition (STID) is an informal disciplinary resolution. If the healthcare provider agrees to the STID, he or she does not admit to unprofessional conduct, but does agree to corrective action. STIDs are reported to national data banks, but because they are informal they do not result in a press release.

Agreed Order: The document, formally called a Stipulated Findings of Fact, Conclusions of Law and Agreed Order, is a negotiated settlement between the healthcare provider and representatives of the agency. This takes place in a formal disciplinary proceeding. It states the substantiated violations of law and the sanctions being placed on the healthcare provider's credential. The healthcare provider agrees to the conditions in the order. The Agreed Order is presented to the disciplinary authority and, if approved, becomes final. The order is reported to national data banks and the public through a press release.

Default Orders: A Default Order is issued when the credentialed health care provider is given due notice, but either fails to answer the allegations or fails to participate in the adjudicative process as required by law.

Final Order after Hearing: The document is formally called Findings of Fact, Conclusions of Law and Order. This document is issued after a formal hearing has been held. The hearing may be held before a health law judge representing the secretary as the decision-maker or before a panel of board or commission members with a health law judge acting as the presiding officer. The final document identifies the proven facts, violations of law, and the sanctions being placed on the healthcare provider's credential. The healthcare provider has the right to ask for administrative review of an initial order. Final orders are subject to reconsideration of the decision or appeal to a superior court. The order is reported to national data banks and released to the public through a press release.

Notice of Decision (NOD): A NOD is issued pursuant to RCW 18.130.055 when the disciplining authority decides to deny an application for licensure or grant the license with conditions.

**Table 11: Complaints Resolved after Adjudicative Proceedings
2013-15 Biennium**

Profession	Informal Disposition	Agreed Order	Default Order	Final Order	Notice of Decision	Total
Advanced Emergency Medical Technician	0	0	0	0	0	0
Advanced Registered Nurse Practitioner	10	24	8	4	2	48
Animal Massage Practitioner	0	1	0	0	0	1
Athletic Trainer	0	0	0	0	0	0
Audiologist	0	0	0	0	0	0
Cardiovascular Invasive Specialist	0	0	0	0	0	0
Chemical Dependency Professional	7	20	12	11	22	72
Chemical Dependency Professional Trainee	5	14	9	12	73	113
Chiropractic X-Ray Technician	0	0	0	0	0	0
Chiropractor	17	17	6	3	0	43
Counselor, Agency Affiliated	6	14	15	3	16	54
Counselor, Certified	1	2	2	0	6	11
Counselor, Certified Advisor	0	0	0	0	0	0
Dental Anesthesia Assistant	0	0	0	0	0	0
Dental Assistant	6	9	5	0	11	31
Dental Hygienist	3	3	0	1	1	8
Dentist	62	30	3	6	2	103
Denturist	6	3	1	1	1	12
Dietitian/Nutritionist	0	0	0	0	0	0
Dispensing Optician	1	0	0	0	0	1
Dispensing Optician Apprentice	0	0	0	0	0	0
East Asian Medicine Practitioner	3	0	0	0	0	3
Emergency Medical Responder	0	0	0	0	0	0
Emergency Medical Technician	5	5	9	0	4	23
Expanded Function Dental Auxiliary	0	0	0	0	0	0
Genetic Counselor	0	0	0	0	0	0
Health Care Assistant	0	0	1	0	1	2
Hearing Aid Specialist	0	0	0	0	0	0
Home Care Aide	0	3	5	2	32	42
Humane Society	0	0	0	0	0	0
Hypnotherapist	1	1	0	0	0	2
Licensed Practical Nurse	39	26	28	11	9	113
Marriage and Family Therapist	2	2	0	0	0	4
Marriage and Family Therapist Associate	0	4	0	0	0	4
Massage Practitioner	8	30	14	3	45	100
Medical Assistant	18	16	6	1	42	83
Mental Health Counselor	12	11	2	0	1	26
Mental Health Counselor Associate	0	3	1	0	1	5
Midwife	1	6	0	0	0	7
Naturopathic Physician	11	16	2	6	1	36
Nursing Assistant	82	90	306	10	74	562
Nursing Home Administrator	8	0	0	0	0	8
Nursing Pool Operator	0	0	0	0	0	0

Profession	Informal Disposition	Agreed Order	Default Order	Final Order	Notice of Decision	Total
Nursing Technician	0	0	0	0	0	0
Occupational Therapist	10	2	0	2	0	14
Occupational Therapy Assistant	2	0	2	0	2	6
Ocularist	0	0	0	0	0	0
Optometrist	2	0	1	0	0	3
Orthotist/Prosthetist	0	0	0	0	0	0
Osteopathic Physician	9	10	3	7	1	30
Osteopathic Physician Assistant	0	0	0	0	0	0
Paramedic	5	6	3	0	0	14
Pharmacies and Other Pharmaceutical Firms	4	4	0	0	0	8
Pharmacist	39	15	0	0	0	54
Pharmacist Intern	0	1	1	0	1	3
Pharmacy Assistant	9	7	10	1	12	39
Pharmacy Technician	12	10	14	1	3	40
Physical Therapist	0	4	0	0	2	6
Physical Therapist Assistant	2	0	2	1	5	10
Physician	75	51	16	14	8	164
Physician Assistant	14	0	2	0	2	18
Podiatric Physician	4	0	0	4	0	8
Psychologist	5	17	4	0	5	31
Radiological Technologist	1	1	1	0	0	3
Radiologist Assistant	0	0	0	0	0	0
Recreational Therapist	1	0	0	0	0	1
Reflexologist	0	0	0	0	1	1
Registered Nurse	110	116	135	21	22	404
Respiratory Care Practitioner	0	4	2	0	0	6
Retired Volunteer Medical Worker	0	0	0	0	0	0
Sex Offender Treatment Provider	1	1	0	0	0	2
Sex Offender Treatment Provider Affiliate	0	0	0	0	0	0
Social Worker Advanced	0	0	0	0	0	0
Social Worker Associate Advanced	0	0	0	0	0	0
Social Worker Associate Independent	0	0	0	0	1	1
Social Worker Independent Clinical	7	4	0	0	1	12
Speech Language Pathologist	1	1	0	0	1	3
Speech Language Pathology Assistant	0	0	0	0	0	0
Surgical Technologist	0	2	2	1	0	5
Veterinarian	14	20	1	11	0	46
Veterinary Medication Clerk	0	0	0	0	2	2
Veterinary Technician	2	0	0	1	0	3
X-Ray Technician	0	3	2	1	2	8
Totals	643	629	636	139	415	2,462*

*This table (along with Tables 12 and 13) does not list Cease and Desist orders, which are covered under Unlicensed Practice (Table 14).

Percentage of Disciplinary Actions

The following tables show the percentage of disciplinary action for each profession compared to all board and commission or secretary disciplinary actions. For example, the 103 dentist actions were 7% of the 1,386 board and commission disciplinary actions; the 72 chemical dependency professional actions were 7% of the 1,076 secretary-profession disciplinary actions. The tables also show the percentage of disciplinary actions for each profession compared to the same profession's total complaints.

**Table 12: Board and Commission Professions Complaints Resolved after
Adjudicative Proceedings
2013-15 Biennium**

Profession	Carry Over from FY13	Complaints Received	Total Complaints	Total Disciplinary Action	% of B/C Disciplinary Action to Complaints	% of All B/C Disciplinary Action
Advanced Registered Nurse Practitioner	68	332	400	48	12%	3%
Audiologist	1	10	11	0	0%	0%
Chiropractic X-Ray Technician	1	6	7	0	0%	0%
Chiropractor	96	331	427	43	10%	3%
Dental Assistant	33	126	159	31	19%	2%
Dentist	271	995	1,266	103	8%	7%
Denturist	20	55	75	12	16%	1%
Expanded Function Dental Auxiliary	1	0	1	0		0%
Hearing Aid Specialist	0	6	6	0	0%	0%
Hearing Instrument Fitter and Dispenser	8	0	8	0	0%	0%
Humane Society	0	0	0	0		0%
Licensed Practical Nurse	97	622	719	113	16%	8%
Massage Practitioner	95	1,144	1,239	100	8%	7%
Naturopathic Physician	55	114	169	36	21%	3%
Nursing Home Administrator	26	216	242	8	3%	1%
Occupational Therapist	14	42	56	14	25%	1%
Occupational Therapy Assistant	2	33	35	6	17%	0%
Optometrist	13	57	70	3	4%	0%
Osteopathic Physician	51	245	296	30	10%	2%
Osteopathic Physician Assistant	1	11	12	0	0%	0%
Pharmacies and Other Pharmaceutical Firms	27	274	301	8	3%	1%
Pharmacist	102	432	534	54	10%	4%
Pharmacist Intern	1	11	12	3	25%	0%
Pharmacy Assistant	14	124	138	39	28%	3%
Pharmacy Technician	26	106	132	40	30%	3%
Physical Therapist	16	131	147	6	4%	0%
Physical Therapist Assistant	7	50	57	10	18%	1%
Physician	453	2,886	3,339	164	5%	12%
Physician Assistant	36	179	215	18	8%	1%
Podiatric Physician	17	58	75	8	11%	1%
Psychologist	55	180	235	31	13%	2%
Registered Nurse	337	2,230	2,567	404	16%	29%
Speech Language Pathologist	2	21	23	3	13%	0%
Speech Language Pathology Assistant	0	0	0	0		0%
Veterinarian	80	227	307	46	15%	3%
Veterinary Medication Clerk	0	6	6	2	33%	0%
Veterinary Technician	6	25	31	3	10%	0%
Totals	2,032	11,285	13,317	1,386		

**Table 13: Secretary Professions Complaints Resolved after Adjudicative Proceedings
2013-15 Biennium**

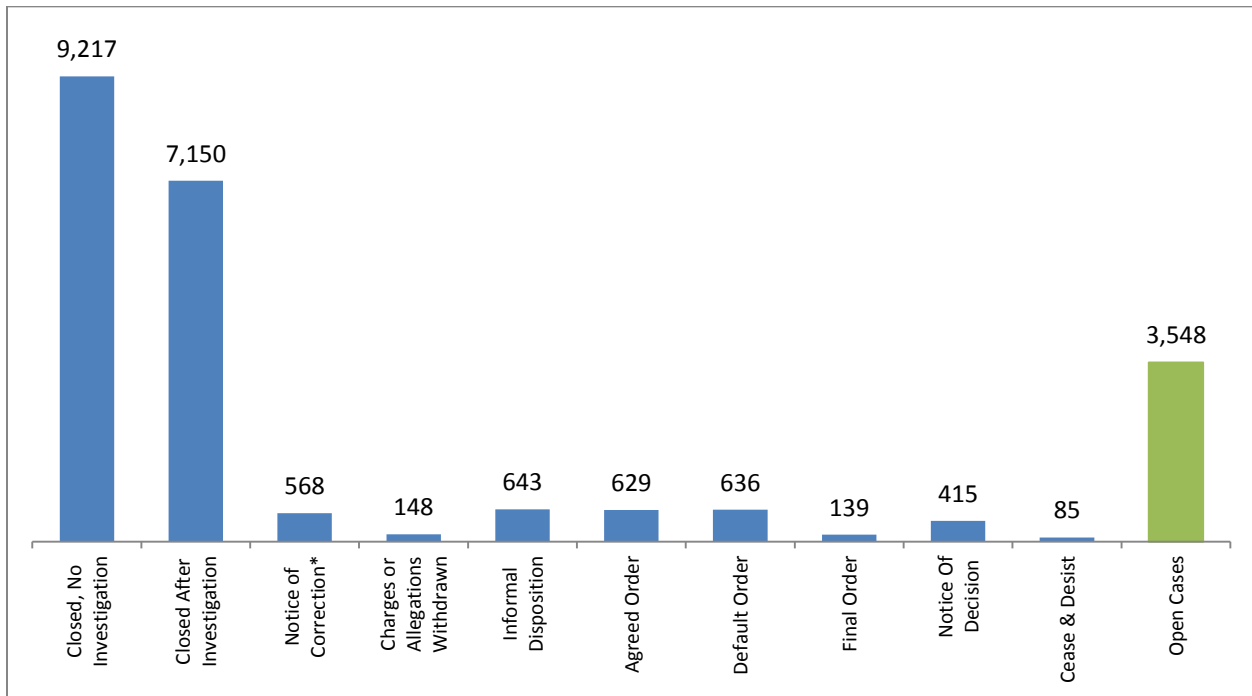
Profession	Carry Over from FY13	Complaints Received	Total Complaints	Total Disciplinary Action	% of Secretary Disciplinary Action to Complaints	% of All Secretary Disciplinary Actions
Advanced Emergency Medical Technician	1	4	5	0	0%	0%
Animal Massage Practitioner	1	4	5	1	20%	0%
Athletic Trainer	0	13	13	0	0%	0%
Cardiovascular Invasive Specialist	0	1	1	0	0%	0%
Chemical Dependency Professional	83	316	399	72	18%	7%
Chemical Dependency Professional Trainee	60	216	276	113	41%	11%
Counselor, Agency Affiliated	57	237	294	54	18%	5%
Counselor, Certified	25	56	81	11	14%	1%
Counselor, Certified Advisor	0	4	4	0	0%	0%
Dental Hygienist	16	54	70	8	11%	1%
Dietitian/Nutritionist	2	9	11	0	0%	0%
Dispensing Optician	6	22	28	1	4%	0%
Dispensing Optician Apprentice	0	2	2	0	0%	0%
East Asian Medicine Practitioner	11	197	208	3	1%	0%
Emergency Medical Responder	1	1	2	0	0%	0%
Emergency Medical Technician	33	110	143	23	16%	2%
Genetic Counselor	0	1	1	0	0%	0%
Health Care Assistant	49	28	77	2	3%	0%
Home Care Aide	25	421	446	42	9%	4%
Hypnotherapist	4	13	17	2	12%	0%
Marriage and Family Therapist	13	55	68	4	6%	0%
Marriage and Family Therapist Associate	8	18	26	4	15%	0%
Medical Assistant	0	517	517	83	16%	8%
Mental Health Counselor	47	281	328	26	8%	2%
Mental Health Counselor Associate	9	55	64	5	8%	0%
Midwife	12	37	49	7	14%	1%
Nursing Assistant	542	5,043	5,585	562	10%	52%
Nursing Pool Operator	0	3	3	0	0%	0%
Orthotist/Prosthetist	0	11	11	0	0%	0%
Paramedic	16	36	52	14	27%	1%
Radiological Technologist	10	27	37	3	8%	0%
Recreational Therapist	1	1	2	1	50%	0%
Reflexologist	0	18	18	1	6%	0%
Respiratory Care Practitioner	3	40	43	6	14%	1%
Sex Offender Treatment Provider	6	20	26	2	8%	0%
Sex Offender Treatment Provider Affiliate	0	9	9	0	0%	0%
Social Worker Advanced	0	21	21	0	0%	0%
Social Worker Associate Advanced	2	1	3	0	0%	0%
Social Worker Associate Independent	5	45	50	1	2%	0%
Social Worker Independent Clinical	33	106	139	12	9%	1%
Surgical Technologist	11	29	40	5	13%	0%
X-Ray Technician	0	28	28	8	29%	1%
Totals	1,092	8,110	9,202	1,076		

Of the 2,462 disciplinary actions during the 2013-15 biennium, boards and commissions handled 56% and the secretary professions 44%.¹⁴

Professions with high rates of disciplinary actions compared to total complaints include: chemical dependency professional trainees with 41%, pharmacy technicians with 30%, and pharmacy assistants with 28%.

Figure 2 displays the distribution of the various complaint outcomes.

Figure 2: Summary of Case Dispositions and End of Biennium Open Cases



*Notice of Correction is a subset of “Closed After Investigation”

Unlicensed Practice Closures and Resolutions

The secretary is responsible for taking action against unlicensed practice. The HSQA Office of Investigation and Inspection manages intake, assessment, and investigation. Unlicensed practice complaints may be closed before or after investigation, or resolved with a Notice of Correction or a Cease and Desist order.

A Notice of Correction notifies the person there will be further action if they continue to infringe on the scope of practice of credentialed healthcare providers. A Cease and Desist order requires the recipient to stop practice and may impose a fine. Continued unlicensed practice may result in court enforcement of the Cease and Desist order or criminal prosecution. HSQA focuses its resources on those cases posing the greatest risk to the public. Table 14 provides a breakdown of actions by profession.

¹⁴ This total of disciplinary actions does not include Cease and Desist orders, which are covered under Unlicensed Practice (Table 14).

**Table 14: Unlicensed Practice Closures and Resolutions
2013-15 Biennium**

Profession	Carry Over from 2013	Cases Received	Total Cases	Closed Prior to Investigation	Closed after Investigation	Cease & Desist Order Issued	Total Closed
Advanced Emergency Medical Technician	0	0	0	0	0	0	0
Advanced Registered Nurse Practitioner	0	0	0	0	0	0	0
Animal Massage Practitioner	1	4	5	1	2	0	3
Athletic Trainer	0	4	4	1	2	0	3
Audiologist	1	0	1	0	1	0	1
Cardiovascular Invasive Specialist	0	0	0	0	0	0	0
Chemical Dependency Professional	0	6	6	0	3	0	3
Chemical Dependency Professional Trainee	0	2	2	0	2	0	2
Chiropractic X-Ray Technician	1	0	1	0	1	0	1
Chiropractor	1	3	4	3	0	0	3
Counselor, Agency Affiliated	1	4	5	1	2	0	3
Counselor, Certified	7	8	15	7	7	0	14
Counselor, Certified Advisor	0	1	1	0	0	0	0
Dental Anesthesia Assistant	0	0	0	0	0	0	0
Dental Assistant	5	13	18	1	11	3	15
Dental Hygienist	0	5	5	0	2	3	5
Dentist	3	17	20	5	8	1	14
Denturist	1	0	1	0	0	0	0
Dietitian/Nutritionist	1	3	4	2	1	0	3
Dispensing Optician	1	10	11	1	7	1	9
Dispensing Optician Apprentice	0	0	0	0	0	0	0
East Asian Medicine Practitioner	6	7	13	2	10	0	12
Emergency Medical Responder	0	0	0	0	0	0	0
Emergency Medical Technician	5	0	5	0	4	0	4
Expanded Function Dental Auxiliary	0	0	0	0	0	0	0
Genetic Counselor	0	1	1	0	1	0	1
Health Care Assistant	2	3	5	0	3	0	3
Hearing Instrument Fitter and Dispenser	1	0	1	0	0	0	0
Hearing Aid Specialist	0	0	0	0	1	0	1
Home Care Aide	2	44	46	34	10	0	44
Humane Society	0	0	0	0	0	0	0
Hypnotherapist	0	2	2	1	1	0	2
Licensed Practical Nurse	0	2	2	0	1	0	1
Marriage and Family Therapist	2	5	7	3	4	0	7
Marriage and Family Therapist Associate	0	0	0	0	0	0	0
Massage Practitioner	32	603	635	337	142	61	540
Medical Assistant	0	82	82	16	56	1	73
Mental Health Counselor	0	14	14	7	2	0	9
Mental Health Counselor Associate	0	2	2	1	1	0	2
Midwife	1	6	7	3	4	0	7
Naturopathic Physician	2	13	15	1	4	0	5
Nursing Assistant	7	54	61	42	12	1	55
Nursing Home Administrator	0	0	0	0	0	0	0

Profession	Carry Over from 2013	Cases Received	Total Cases	Closed Prior to Investigation	Closed after Investigation	Cease & Desist Order Issued	Total Closed
Nursing Pool Operator	0	0	0	0	0	0	0
Nursing Technician	0	0	0	0	0	0	0
Occupational Therapist	1	0	1	0	1	0	1
Occupational Therapy Assistant	0	0	0	0	0	0	0
Ocularist	0	0	0	0	0	0	0
Optometrist	1	5	6	2	4	0	6
Orthotist/Prosthetist	0	0	0	0	0	0	0
Osteopathic Physician	0	0	0	0	0	0	0
Osteopathic Physician Assistant	0	0	0	0	0	0	0
Paramedic	0	0	0	0	0	0	0
Pharmacies and Other Pharmaceutical Firms	5	29	34	6	17	2	25
Pharmacist	4	2	6	2	2	3	7
Pharmacist Intern	0	0	0	0	0	0	0
Pharmacy Assistant	0	1	1	1	0	0	1
Pharmacy Technician	1	3	4	1	2	0	3
Physical Therapist	1	3	4	1	3	0	4
Physical Therapist Assistant	1	3	4	0	4	0	4
Physician	14	44	58	11	31	4	46
Physician Assistant	0	0	0	0	0	0	0
Podiatric Physician	0	0	0	0	0	0	0
Psychologist	1	13	14	8	5	0	13
Radiological Technologist	1	0	1	0	1	0	1
Radiologist Assistant	0	0	0	0	0	0	0
Recreational Therapist	0	0	0	0	0	0	0
Reflexologist	0	9	9	2	3	0	5
Registered Nurse	1	13	14	7	3	3	13
Respiratory Care Practitioner	0	1	1	1	0	0	1
Retired Volunteer Medical Worker	0	0	0	0	0	0	0
Sex Offender Treatment Provider	0	0	0	0	0	0	0
Sex Offender Treatment Provider Affiliate	0	0	0	0	0	0	0
Social Worker Advanced	0	6	6	5	1	0	6
Social Worker Associate Advanced	0	0	0	0	0	0	0
Social Worker Associate Independent	0	2	2	0	1	0	1
Social Worker Independent Clinical	0	7	7	2	3	0	5
Speech Language Pathologist	0	1	1	0	0	0	0
Speech Language Pathology Assistant	0	0	0	0	0	0	0
Surgical Technologist	1	2	3	0	2	0	2
Veterinarian	3	27	30	4	15	1	20
Veterinary Medication Clerk	0	1	1	0	0	0	0
Veterinary Technician	2	6	8	1	4	1	6
X-Ray Technician	0	0	0	0	0	0	0
Totals	120	1,096	1,216	523	407	85	1,015

Violations and Sanctions

Uniform Disciplinary Act Violations

Section 180 of the Uniform Disciplinary Act (UDA) lists 25 violations considered unprofessional conduct. Healthcare providers cannot be criminally charged by boards, commissions, or the secretary because the UDA is administrative law. However, the ability of credential holders to make a living in the healthcare field may be adversely affected.

The department, or a board or commission, may refer complaints of criminal nature to law enforcement, which may result in criminal action. Conversely, criminal convictions can result in UDA actions against practitioners' credentials.

Frequent Violations

Of the 25 possible UDA violations, five accounted for 81% of the 2,183 violations across all professions. The number of violations exceeds the number of disciplinary actions because violators are often cited for more than one violation.

Violations related to moral turpitude, dishonesty, or corruption, RCW 18.130.180(1), were cited 873 times in sanctions reported to the National Practitioner Data Bank (NPDB), making these violations the most frequently reported violation.

However, violations of RCW 18.130.180(1) frequently are not the only reported issue. In fact, 96% were cited in conjunction with other violations.

The most frequently reported issues in these violations, other than moral turpitude, dishonesty, or corruption, during the 2013-15 biennium were:

1. RCW 18.130.180(7): Violation of any state or federal statute or administrative rule, 778 (36%).
2. RCW 18.130.180(4): Incompetence, negligence, or malpractice, 556 (25%).
3. RCW 18.130.180(17): Conviction of a gross misdemeanor or felony relating to the practice of a healthcare profession, 401 (18%).
4. RCW 18.130.180(5): Suspension, revocation, or restriction in another jurisdiction, 386 (18%).
5. RCW 18.130.180(6) and (23): Personal drug or alcohol abuse, 352 (16%).

Sanctions Imposed

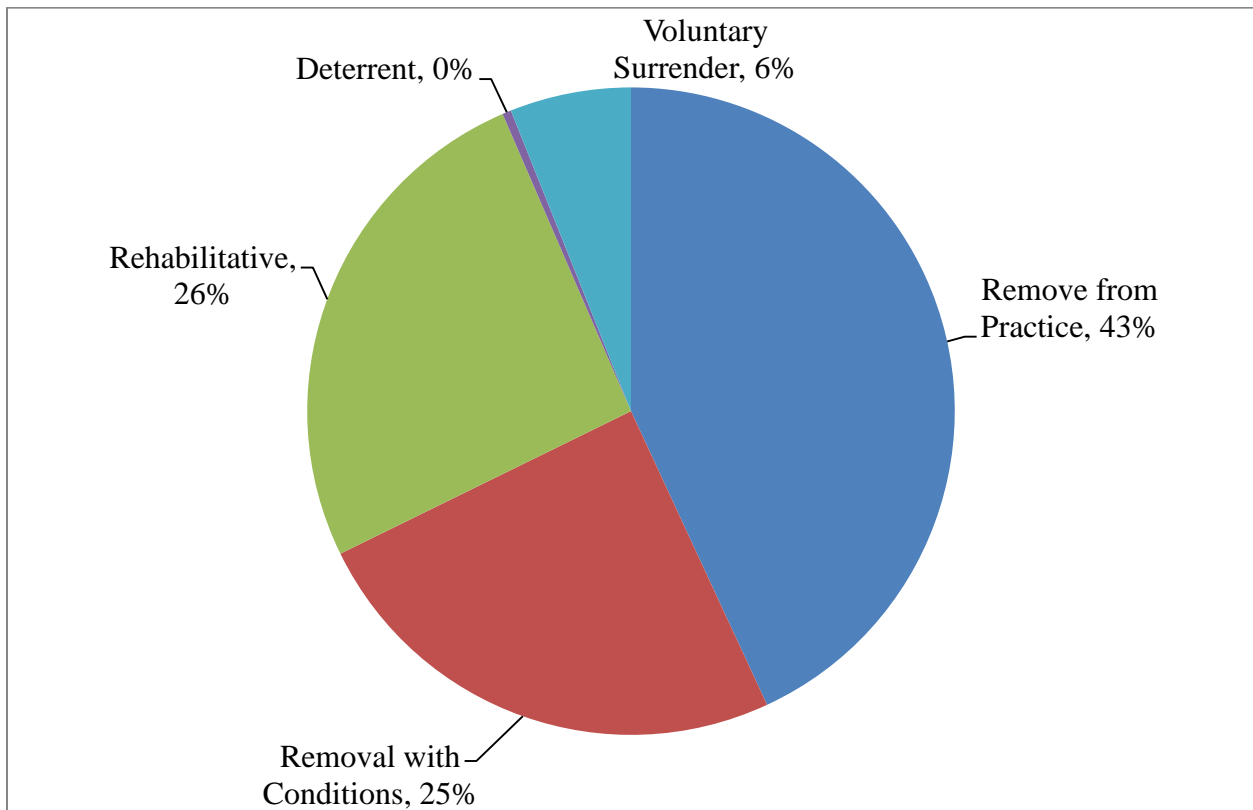
When adverse actions are reported to NPDB, the sanction imposed on the practitioner is also reported. For purposes of this report, sanctions were divided into five categories:

- Removal from practice
- Removal from practice with conditions
- Rehabilitative
- Deterrent
- Surrender of the credential

For definitions of these and other terms, please consult Appendix A.

The disciplinary actions represent cases closed after adjudication. There can be multiple cases against a single practitioner. Reports to the data bank represent reports on individual practitioners, not individual cases.

**Figure 3: Fiscal Years 2013-15 Sanctions Breakdown
2013-15 Biennium**



Sanctions Schedule

In 2006, the department adopted sanctions guidelines for professions where the secretary is the disciplinary authority. The purpose of these guidelines was to promote consistent disciplinary sanctions for similar unprofessional conduct. Each of the 14 boards and commissions with disciplinary authority adopted the guidelines later.¹⁵ In 2009, the guidelines were adopted in rule.

Cases sometimes arise that cannot be addressed by the guidelines. To account for these cases, compliance goals were set at 95% for secretary professions and 80% for board and commission professions. These goals have been consistently met or exceeded on an aggregate basis.

Notes on Table 15

Numbers from Table 15 may not match exactly with the count of disciplinary actions in Tables 11-13. Table 15 is drawn from a different data source than preceding tables, where professions are grouped slightly differently. Additionally, notices of decision are not included in Table 15. Further divergence may occur because Tables 11-13 count cases closed in the last biennium, while Table 15 uses the sanction's effective date.

¹⁵At this time, there were 14 boards and commissions with disciplinary authority. By the end of FY 2015, there were 17.

**Table 15: Sanctions Imposed by Profession
2013-15 Biennium**

Profession	Remove from Practice (Revocation, Indefinite, Inspection)	Removal with Conditions (Suspension for Specific Period)	Rehabilitative (Probation, Limitation, or Restriction)	Deterrent (Reprimand, Fine)	Voluntary Surrender	Total
Advanced Emergency Medical Technician	0	0	0	0	0	0
Advanced Registered Nurse Practitioner	16	10	9	0	1	36
Animal Massage Practitioner	0	0	0	0	0	0
Athletic Trainer	0	0	0	0	0	0
Audiologist	0	0	0	0	0	0
Cardiovascular Invasive Specialist	0	0	0	0	0	0
Chemical Dependency Professional and Trainee	52	11	102	0	1	166
Chiropractic X-Ray Technician	0	0	0	0	0	0
Chiropractor	7	14	6	0	2	29
Counselor, All	26	6	18	0	2	52
Dental Anesthesia Assistant	0	0	0	0	0	0
Dental Assistant	12	5	11	0	1	29
Dental Hygienist	0	3	4	0	0	7
Dentist	11	59	23	0	4	97
Denturist	1	5	3	0	0	9
Dietitian/Nutritionist	0	0	0	0	0	0
Dispensing Optician	0	0	0	0	0	0
Dispensing Optician Apprentice	0	0	0	0	0	0
East Asian Medicine Practitioner	0	3	0	0	0	3
Emergency Medical Responder	0	0	0	0	0	0
Emergency Medical Technician	10	3	3	0	1	17
Expanded Function Dental Auxiliary	0	0	0	0	0	0
Genetic Counselor	0	0	0	0	0	0
Health Care Assistant	0	0	0	0	0	0
Hearing Aid Specialist	0	0	1	0	0	1
Home Care Aide	14	0	15	0	0	29
Humane Society	0	0	0	0	0	0
Hypnotherapist	0	0	0	0	0	0
Licensed Practical Nurse	42	36	23	1	4	106
Marriage and Family Therapist	0	1	6	0	1	8
Marriage and Family Therapist Associate	0	0	0	0	0	0
Massage Practitioner	23	6	11	1	7	48
Medical Assistant	16	16	39	0	1	72
Mental Health Counselor	8	7	4	0	7	26
Mental Health Counselor Associate	0	0	0	0	0	0
Midwife	2	2	0	0	0	4
Naturopathic Physician	10	9	6	0	2	27
Nursing Assistant	347	69	77	2	11	506
Nursing Home Administrator	0	0	0	0	0	0
Nursing Pool Operator	0	0	0	0	0	0

Profession	Remove from Practice (Revocation, Indefinite, Inspection)	Removal with Conditions (Suspension for Specific Period)	Rehabilitative (Probation, Limitation, or Restriction)	Deterrent (Reprimand, Fine)	Voluntary Surrender	Total
Nursing Technician	0	0	0	0	0	0
Occupational Therapist	1	6	3	0	1	11
Occupational Therapy Assistant	1	1	1	0	1	4
Ocularist	0	0	0	0	0	0
Optometrist	1	2	0	0	0	3
Orthotist/Prosthetist	0	0	0	0	0	0
Osteopathic Physician	5	8	4	1	1	19
Osteopathic Physician Assistant	0	0	0	0	0	0
Paramedic	5	3	4	0	1	13
Pharmacist	7	40	6	0	2	55
Pharmacist Intern	2	0	1	0	0	3
Pharmacy Assistant	15	7	5	0	4	31
Pharmacy Technician	21	9	5	0	4	39
Physical Therapist	1	0	3	0	0	4
Physical Therapist Assistant	2	2	4	0	0	8
Physician	17	55	38	2	17	129
Physician Assistant	1	11	1	0	2	15
Podiatric Physician	1	2	0	0	2	5
Psychologist	4	5	9	0	2	20
Radiological Technologist	4	1	1	0	0	6
Radiologist Assistant	0	0	0	0	0	0
Recreational Therapist	0	0	0	0	1	1
Reflexologist	0	0	0	0	0	0
Registered Nurse	185	82	75	1	36	379
Respiratory Care Practitioner	4	0	1	0	1	6
Retired Volunteer Medical Worker	0	0	0	0	0	0
Sex Offender Treatment Provider	0	0	0	0	1	1
Social Worker, All	2	5	2	1	3	13
Speech Language Pathologist	0	1	2	0	0	3
Surgical Technologist	5	0	0	0	0	5
Veterinarian	0	0	0	0	0	0
Veterinary Medication Clerk	0	0	0	0	0	0
Veterinary Technician	0	0	0	0	0	0
X-Ray Technician	2	0	2	0	0	4
Totals	883	505	528	9	124	2,049

Case Appeals Activity

A healthcare professional has the right to appeal a final decision of a disciplinary authority to a court of law. The process involves filing a petition with a county superior court. Depending on the outcome, the healthcare professional can appeal to an appellate court. An appellate court's decision sets precedence for future decisions of the same nature. A healthcare professional may appeal an appellate court's decision to the Washington State Supreme Court, which decides the cases it will accept or decline. The following table lists all case appeals activity in the last biennium. Below are definitions for the outcomes listed.

**Table 16: Summary of Case Appeals Activity
2013-15 Biennium**

Docket Number	Profession	County	Outcome
M2009-347	Physician	King	Denied
M2012-512	Veterinarian	King	Stayed
M2012-1019	Registered Nurse	King	Dismissed
M2012-1072	Registered Nurse	Benton	Denied
M2013-70	Licensed Practical Nurse	Thurston	Affirmed
M2012-519 M2012-520	Registered Nurse/Advanced Registered Nurse Practitioner	Thurston	Pending
M2010-319	Marriage and Family Counselor	Thurston	Dismissed
M2011-711	Physician	Thurston	Pending
M2012-980 M2012-981	Registered Nurse/Advanced Registered Nurse Practitioner	Thurston	Affirmed
M2013-358	Unlicensed Practice	Spokane	Affirmed
M2012-1134	Dentist	King	Reversed
M2012-1261	Physician	Thurston	Pending
M2013-514	Osteopath Physician	Thurston	Denied
M2014-191	Physician	Pierce	Pending
M2010-1451	Podiatrist	Thurston	Pending
M2013-944	Chemical Dependency Provider	Pierce	Remanded
M2013-293	Dentist	King	Pending
M2015-16	Dentist	King	Dismissed
M2014-826	Osteopath Physician	Thurston	Pending

Affirmed – Superior court concluded department's decision was correct.

Reversed – Superior court reversed department's decision.

Remand – Superior court returned the case to the department to revisit previous decision.

Denied – Petition for judicial review not accepted by the superior court.

Dismissed – Petition for judicial review dismissed at superior court.

Pending – Superior court has not made a decision on the case

Stayed – Superior court stayed department's decision until the superior court rules on the matter.

Alternatives to Discipline

The department may refer practitioners to one of four different substance abuse monitoring programs. Two programs work under contracts monitored by department staff. The department operates the other two programs.

- Washington Physicians Health Program (WPHP) is a contracted program that works with chemically impaired allopathic physicians and physician assistants, dentists, osteopathic physicians and physician assistants, veterinarians, and podiatrists.
- Washington Recovery Assistance Program for Pharmacy (WRAPP) is a contracted program that works with chemically impaired pharmacists and other credentialed pharmacy staff.
- Washington Health Professional Services (WHPS) is a department-run program that works with chemically impaired practitioners in nursing professions.
- Washington Recovery and Monitoring Program (WRAMP) is a department-run program that works with chemically impaired health professionals not served by WPHP, WHPS, or WRAPP.

Disciplining authorities can refer practitioners to a program. They may also require providers to enter the program as a condition of practice or return to practice. Practitioners may also voluntarily participate in one of the programs if they have an active healthcare credential in Washington. The substance abuse monitoring programs must report practitioners to the department if they don't comply with the conditions of a monitoring contract. The disciplining authority may then take disciplinary action. See Appendix C, Alternative Programs – Chemically Impaired Practitioners for more information.

Case Distribution to Investigators and Staff Attorneys

RCW 18.130.310 requires, as part of the UDA Report, a report that will “summarize the distribution of the number of cases assigned to each attorney and investigator for each profession.” The law further requires that identities of staff attorneys and investigators be kept anonymous. Appendices D and E detail, by health professions, the average number of cases assigned and worked by the division's staff attorneys and investigators for the 2013-2015 biennium.

These data may invite comparisons of workload and efficiency between professions. However, the resources needed to pursue individual disciplinary cases cannot be typified across professions or even within a profession. Many factors can influence the amount of investigative and legal resources needed for any individual case, including but not limited to the complexity of the profession, whether there are companion cases with other professions, the nature of the complaint, the availability of investigative records and other information and the involvement of other entities such as law enforcement.

This data also may suggest links to other data within this report, such as the rates of closure of complaints or the rates of discipline. Again, it is important to be cautious; some disciplinary cases may require significant investigative and legal work, only to determine there is no basis for

pursuing discipline. By contrast, in certain instances, serious disciplinary action may occur as a result of information (e.g., criminal convictions or actions by other licensing authorities) that requires relatively little new investigative or legal work.

The table in Appendix D shows cases worked by investigators and staff attorneys during the biennium. The information is shown by staff and profession. As you review, please note:

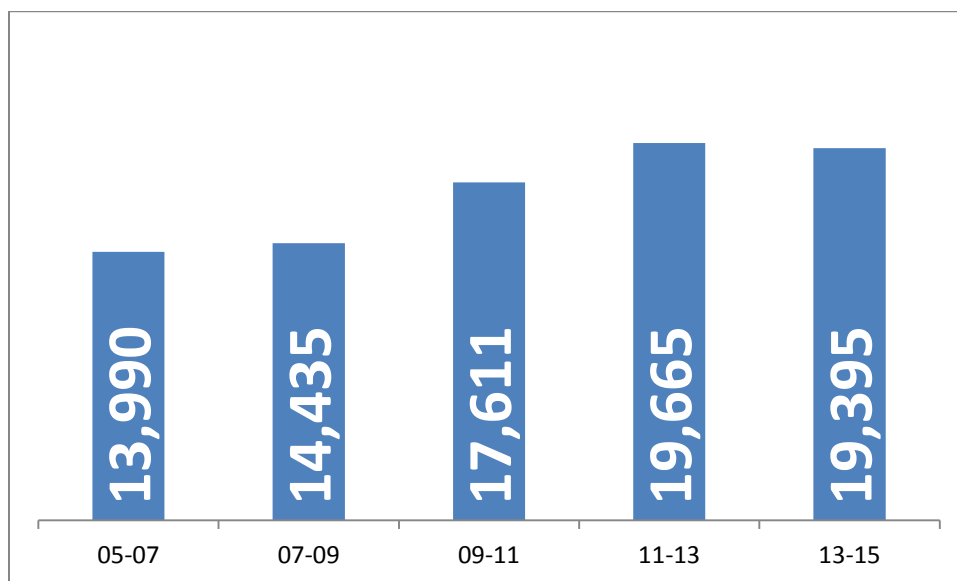
- To preserve anonymity individual staff members are indicated by a number.
- The number of cases shown includes any case worked during the biennium.
- This number of cases shown will be different than the numbers of cases received or closed as it can include cases at any point in the investigative or legal process.
- Not all staff worked for the department through the entire biennium which resulted in varying numbers of cases worked.
- The number of months each staff member worked for the department during the 2013-2015 biennium is indicated in the bottom row of each chart.
- Certain investigators conduct both investigations and inspections for the pharmacy program.
- In some cases, multiple staff may have provided support to the primary investigator or staff attorney.
- Certain staff attorneys work only for the Medical Quality Assurance Commission.

Biennial Comparison

Complaints Received

The number of new complaints received declined 1% from the 2011-13 biennium. This does not include carry-forward complaints from the previous biennium.

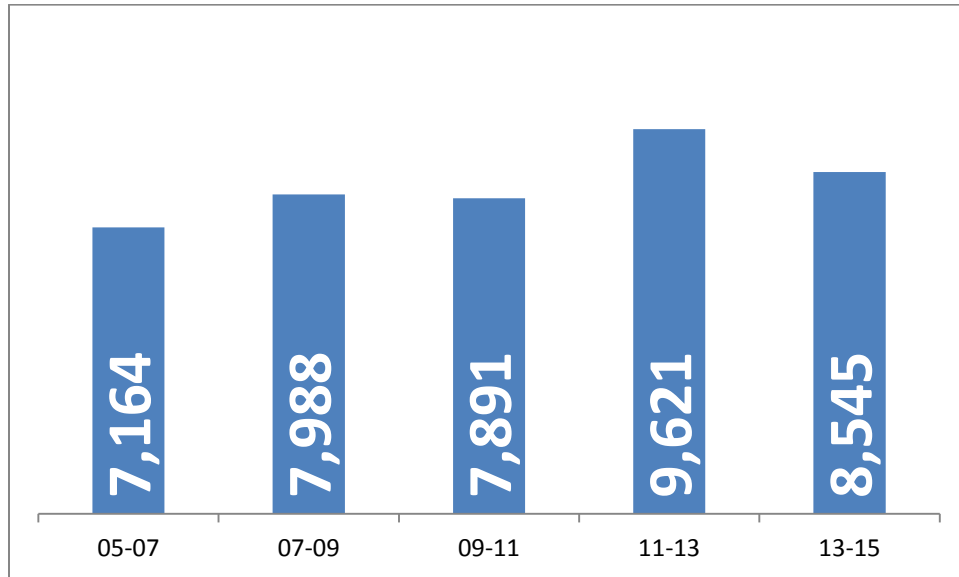
Figure 4: New Complaints Received, 2005-07 to 2013-15 Biennia



Investigations

The number of completed investigations (including unlicensed practice) decreased 11% compared to last biennium.

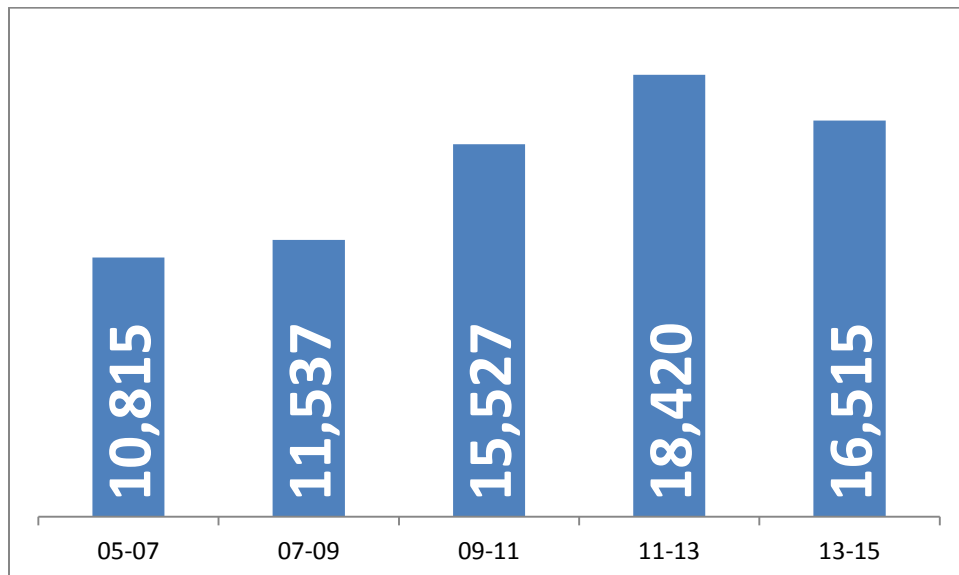
Figure 5: Investigations Completed, 2005-07 to 2013-15 Biennia



Complaint Closures before Adjudicative Proceedings

The following chart shows the change in closures before adjudicative proceedings. These are cases closed with no action. In these cases, evidence disproved the allegations, the complaint was below the threshold for investigation, the disciplinary authority did not have jurisdiction, the allegations were withdrawn, or a Notice of Correction (NOC) was issued. This represents 10% decrease in closures prior to adjudicative proceedings over the last biennium.

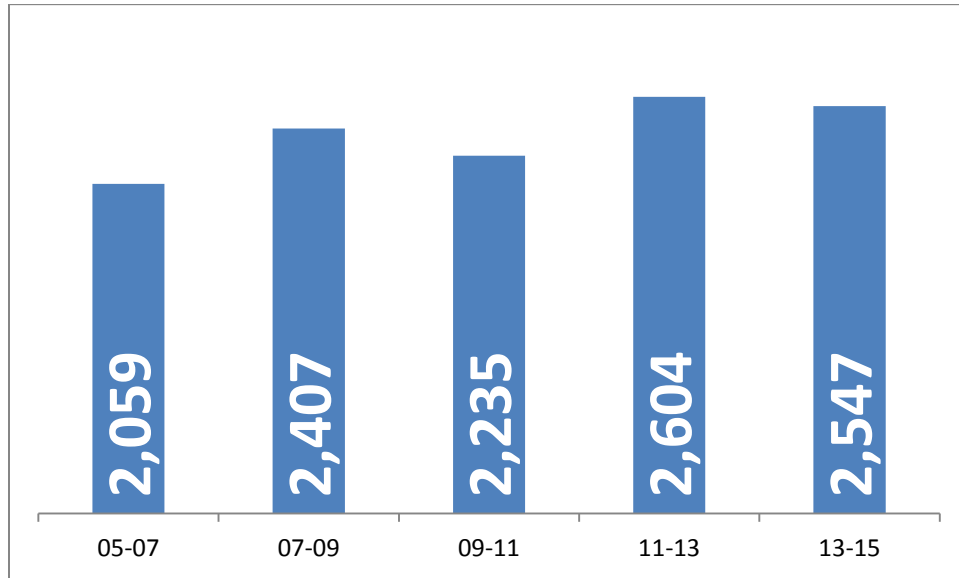
Figure 6: Complaint Closures before Adjudicative Proceedings, 2005-07 to 2013-15 Biennia



Complaint Closures after Adjudicative Proceedings

The following chart shows the 2% decrease in cases resolved with corrective or disciplinary action over the 2011-13 biennium. They include cases closed by default orders, informal dispositions, agreed orders, final orders after hearing, unlicensed practice Cease and Desist orders, and notices of decision.

Figure 7: Complaint Closures after Adjudicative Proceedings, 2005-07 to 2013-15 Biennia



Criminal Background Checks

RCW 18.130.064 allows the department to conduct a criminal history background check on all new applicants and current license holders. The purpose of the statute is to ensure patient safety by identifying those who may not be qualified to practice.

The department has checked criminal history background on new applicants for credentials since 2000. The department performed over 140,000 background checks on applications during the 2013-2015 biennium. Checks through the Washington State Patrol's WATCH database returned reports for 3,075 applicants.

Of the 3,075 reports (which may include unrelated items such as applications for concealed weapons permits), the department opened 701 cases on applicants based on state background check information. Of these investigations, 73% involved applicants who had disclosed a conviction on the application, as required by law. The full report (Table 18) contains additional details about applicants for each profession.

**Table 17: HSQA Background Check Activity Summary
2013-15 Biennium**

Total Applicants	143,435
Applicants with returned background reports	3,075
Cases opened on applicants with returned background reports	701
Applicants who disclosed criminal history (% of cases)	513 (73%)
Applicants not disclosing criminal history (% of cases)	188 (27%)

Also as part of this background check process, all new applicants are checked against a national disciplinary data bank, the National Practitioner Data Bank (NPDB). The NPDB includes information about actions in other states, including some criminal convictions, to help determine the need for further review.

Beginning January 1, 2009, the department requires federal fingerprint checks for certain applicants and licensees. The 2008 legislature authorized the department to perform these checks when a state background check is inadequate. The checks are processed through the FBI's Criminal Justice Information Services (CJIS) Division. The department focuses on applicants coming from outside of Washington and certain applicants with a criminal history in Washington.

Background reports using fingerprint data can reveal convictions as well as non-conviction information. Due to length of the fingerprint process, especially when unreadable fingerprints must be repeated, the department may grant temporary practice permits to applicants who satisfy all licensing requirements but are waiting on FBI results. This helps improve access to care by avoiding delays. The temporary practice permit expires if criminal history is identified and a Notice of Decision is issued.

**Table 18: Criminal Background Reports
2013-15 Biennium**

Profession	Total Applicant Checks Made	WATCH Reports Produced	Cases Opened on Applicants	Self-Disclosed		% Disclosed	Actions Taken
				Yes	No		
Advanced Emergency Medical Technician	50	1	0	0	0		0
Advanced Registered Nurse Practitioner	1,385	8	0	0	0		0
Animal Massage Practitioner	32	1	0	0	0		0
Athletic Trainer	176	0	0	0	0		0
Audiologist	63	0	0	0	0		0
Cardiovascular Invasive Specialist	80	4	0	0	0		0
Chemical Dependency Professional	437	111	25	24	1	96%	22
Chemical Dependency Professional Trainee	1,213	264	101	96	5	95%	69
Chiropractic X-Ray Technician	101	9	1	1	0	100%	0
Chiropractor	318	10	0	0	0		0
Counselor, Agency Affiliated	4,258	215	28	26	2	93%	16
Counselor, Certified	144	9	0	0	0		0
Counselor, Certified Advisor	1	0	0	0	0		0
Dental Assistant	4,602	4	28	13	15	46%	8
Dental Hygienist	671	2	1	0	1	0%	1
Dentist	832	1	5	2	3	40%	1
Denturist	29	1	1	1	0	100%	1
Dietitian/Nutritionist	377	4	0	0	0		0
Dispensing Optician	110	10	1	1	0	100%	0
Dispensing Optician Apprentice	337	18	0	0	0		0
East Asian Medicine Practitioner	180	3	0	0	0		0
Emergency Medical Responder	120	3	0	0	0		0
Emergency Medical Technician	2,292	83	6	6	0	100%	3
Expanded Function Dental Auxiliary	35	1	0	0	0		0
Genetic Counselor	65	0	0	0	0		0
Health Care Assistant	3	0	0	0	0		0
Hearing Aid Specialist	46	3	0	0	0		0
Home Care Aide	11,482	564	74	33	41	45%	24
Hypnotherapist	237	8	0	0	0		0
Licensed Practical Nurse	2409	63	9	7	2	78%	4
Marriage and Family Therapist	249	3	0	0	0		0
Marriage and Family Therapist Associate	314	2	1	1	0	100%	0
Massage Practitioner	2,254	114	55	38	17	69%	9
Medical Assistant	34,561	307	99	90	9	91%	33
Mental Health Counselor	959	21	1	0	1	0%	0

Profession	Total Applicant Checks Made	WATCH Reports Produced	Cases Opened on Applicants	Self-Disclosed		% Disclosed	Actions Taken
				Yes	No		
Mental Health Counselor Associate	1,100	22	2	2	0	100%	0
Midwife	47	0	0	0	0		0
Naturopathic Physician	176	1	1	0	1	0%	0
Nursing Assistant	29,180	553	165	106	59	64%	69
Nursing Home Administrator	108	0	0	0	0		0
Nursing Technician	527	5	0	0	0		0
Occupational Therapist	599	2	0	0	0		0
Occupational Therapy Assistant	347	8	2	2	0	100%	1
Ocularist	1	0	0	0	0		0
Optometrist	174	1	0	0	0		0
Orthotist/Prosthetist	46	0	0	0	0		0
Osteopathic Physician	500	1	0	0	0		0
Osteopathic Physician Assistant	30	0	0	0	0		0
Paramedic	336	6	0	0	0		0
Pharmacist	1,652	5	2	0	2	0%	1
Pharmacist Intern	865	3	4	3	1	75%	1
Pharmacy Assistant	5,679	160	40	27	13	68%	9
Pharmacy Technician	1,424	69	4	3	1	75%	1
Physical Therapist	1,013	4	2	2	0	100%	2
Physical Therapist Assistant	537	12	6	5	1	83%	5
Physician	4,055	7	0	0	0		0
Physician Assistant	632	0	0	0	0		0
Podiatric Physician	46	0	0	0	0		0
Psychologist	422	3	0	0	0		0
Radiological Technologist	887	47	2	2	0	100%	0
Radiologist Assistant	1	0	0	0	0		0
Recreational Therapist	37	0	0	0	0		0
Registered Nurse	17,636	178	21	14	7	67%	4
Respiratory Care Practitioner	588	16	4	2	2	50%	2
Sex Offender Treatment Provider	13	0	0	0	0		0
Social Worker Advanced	43	0	0	0	0		0
Social Worker Associate Advanced	85	1	0	0	0		0
Social Worker Independent Clinical	566	11	0	0	0		0
Speech Language Pathologist	583	1	0	0	0		0
Speech Language Pathology Assistant	52	0	0	0	0		0
Surgical Technologist	782	37	6	3	3	50%	0
Veterinarian	435	4	1	0	1	0%	0
Veterinary Medication Clerk	536	15	1	1	0	100%	1

Profession	Total Applicant Checks Made	WATCH Reports Produced	Cases Opened on Applicants	Self-Disclosed		% Disclosed	Actions Taken
				Yes	No		
Veterinary Technician	477	11	0	0	0		0
X-Ray Technician	796	45	2	2	0	100%	1
Totals	143,435	3,075	701	513	188	73%	288

Board and Commission Supplemental Reports

RCW 18.130.310(2) allows health professions boards and commissions to prepare a biennial report to complement the UDA report. The reports may provide additional information about disciplinary activities, rule-making and policy activities, and receipts and expenditures.

The following reports were prepared by the 17 boards and commissions with regulatory authority for health professions. Note that the Board of Massage is a dual authority board, where certain licensing and/or examination functions are the authority of the board, while disciplinary authority resides with the department.

Reviewing the Disciplinary Graphs

The report for each full authority board or commission includes three graphs:

- 1) The first summarizes, by fiscal year, the number of complaints received, and investigations authorized and completed over the last four years. It also includes the average number of days for investigative activities each year.
- 2) The second depicts the types of disciplinary case outcomes for each board or commission over the past four years, by fiscal year.
- 3) The third illustrates the number of summary actions that have been taken by the board or commission over the last four years, by fiscal year. Summary actions immediately suspend or restrict the practitioner's credential pending the outcome of a final hearing and are only used only when there is imminent risk of harm to the public. There are three categories of summary actions: 1) actions based on conduct, such as criminal conviction; 2) actions based on practice below the standard of care; and 3) suspensions mandated by law based on a prohibition to practice in another state.

For a complete list of definitions, please see Appendix A.

Chiropractic Quality Assurance Commission

The Chiropractic Quality Assurance Commission protects the public by credentialing and disciplining chiropractors and chiropractic x-ray technicians. The commission regulates the professions by developing rules, policies, and guidelines. CQAC is made up of 11 chiropractors, and 3 public members, appointed by the governor. Chiropractic commission members must have been licensed to practice chiropractic in Washington for a period of five years before appointment.

Four Year Disciplinary Summary

<table border="1" style="margin-top: 10px; width: 100%; border-collapse: collapse;"> <caption>Complaints and Investigative Data</caption> <thead> <tr> <th>Fiscal Year</th> <th>Complaints Received</th> <th>Investigations Authorized</th> <th>Investigations Completed</th> <th>Average Investigative Days</th> </tr> </thead> <tbody> <tr> <td>FY12</td> <td>150</td> <td>120</td> <td>115</td> <td>185</td> </tr> <tr> <td>FY13</td> <td>120</td> <td>70</td> <td>95</td> <td>175</td> </tr> <tr> <td>FY14</td> <td>175</td> <td>105</td> <td>80</td> <td>180</td> </tr> <tr> <td>FY15</td> <td>155</td> <td>120</td> <td>135</td> <td>145</td> </tr> </tbody> </table>	Fiscal Year	Complaints Received	Investigations Authorized	Investigations Completed	Average Investigative Days	FY12	150	120	115	185	FY13	120	70	95	175	FY14	175	105	80	180	FY15	155	120	135	145	<p>Complaints received and investigated increased significantly during FY14 and FY15.</p> <p>Average number of days to complete investigation decreased during FY15.</p>
Fiscal Year	Complaints Received	Investigations Authorized	Investigations Completed	Average Investigative Days																						
FY12	150	120	115	185																						
FY13	120	70	95	175																						
FY14	175	105	80	180																						
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<table border="1" style="margin-top: 10px; width: 100%; border-collapse: collapse;"> <caption>Cases Resolved by Method</caption> <thead> <tr> <th>Fiscal Year</th> <th>Informal</th> <th>Agreed</th> <th>Default</th> <th>Final</th> </tr> </thead> <tbody> <tr> <td>FY12</td> <td>22</td> <td>8</td> <td>7</td> <td>0</td> </tr> <tr> <td>FY13</td> <td>13</td> <td>7</td> <td>5</td> <td>2</td> </tr> <tr> <td>FY14</td> <td>4</td> <td>6</td> <td>4</td> <td>2</td> </tr> <tr> <td>FY15</td> <td>13</td> <td>11</td> <td>2</td> <td>1</td> </tr> </tbody> </table>	Fiscal Year	Informal	Agreed	Default	Final	FY12	22	8	7	0	FY13	13	7	5	2	FY14	4	6	4	2	FY15	13	11	2	1	<p>Cases resolved with informal agreements and agreed orders increased significantly in FY15 compared to FY14.</p>
Fiscal Year	Informal	Agreed	Default	Final																						
FY12	22	8	7	0																						
FY13	13	7	5	2																						
FY14	4	6	4	2																						
FY15	13	11	2	1																						
<table border="1" style="margin-top: 10px; width: 100%; border-collapse: collapse;"> <caption>Summary Actions</caption> <thead> <tr> <th>Fiscal Year</th> <th>Conduct</th> <th>Standard</th> <th>Mandatory</th> </tr> </thead> <tbody> <tr> <td>FY12</td> <td>1</td> <td>0</td> <td>1</td> </tr> <tr> <td>FY13</td> <td>1</td> <td>0</td> <td>0</td> </tr> <tr> <td>FY14</td> <td>1</td> <td>0</td> <td>0</td> </tr> <tr> <td>FY15</td> <td>1</td> <td>0</td> <td>0</td> </tr> </tbody> </table>	Fiscal Year	Conduct	Standard	Mandatory	FY12	1	0	1	FY13	1	0	0	FY14	1	0	0	FY15	1	0	0	<p>Summary actions remained low during FY14 and FY15</p>					
Fiscal Year	Conduct	Standard	Mandatory																							
FY12	1	0	1																							
FY13	1	0	0																							
FY14	1	0	0																							
FY15	1	0	0																							

Rulemaking and Policy Activity

Rules and Policies

- The commission is required by RCW 18.25.005 to maintain a list of diagnostic and analytical devices and procedures under the designation of approved, non-approved, and research/investigational. The commission created a new approval process that promotes transparency for items being added to the Classification of Chiropractic Procedures and Instrumentation List.

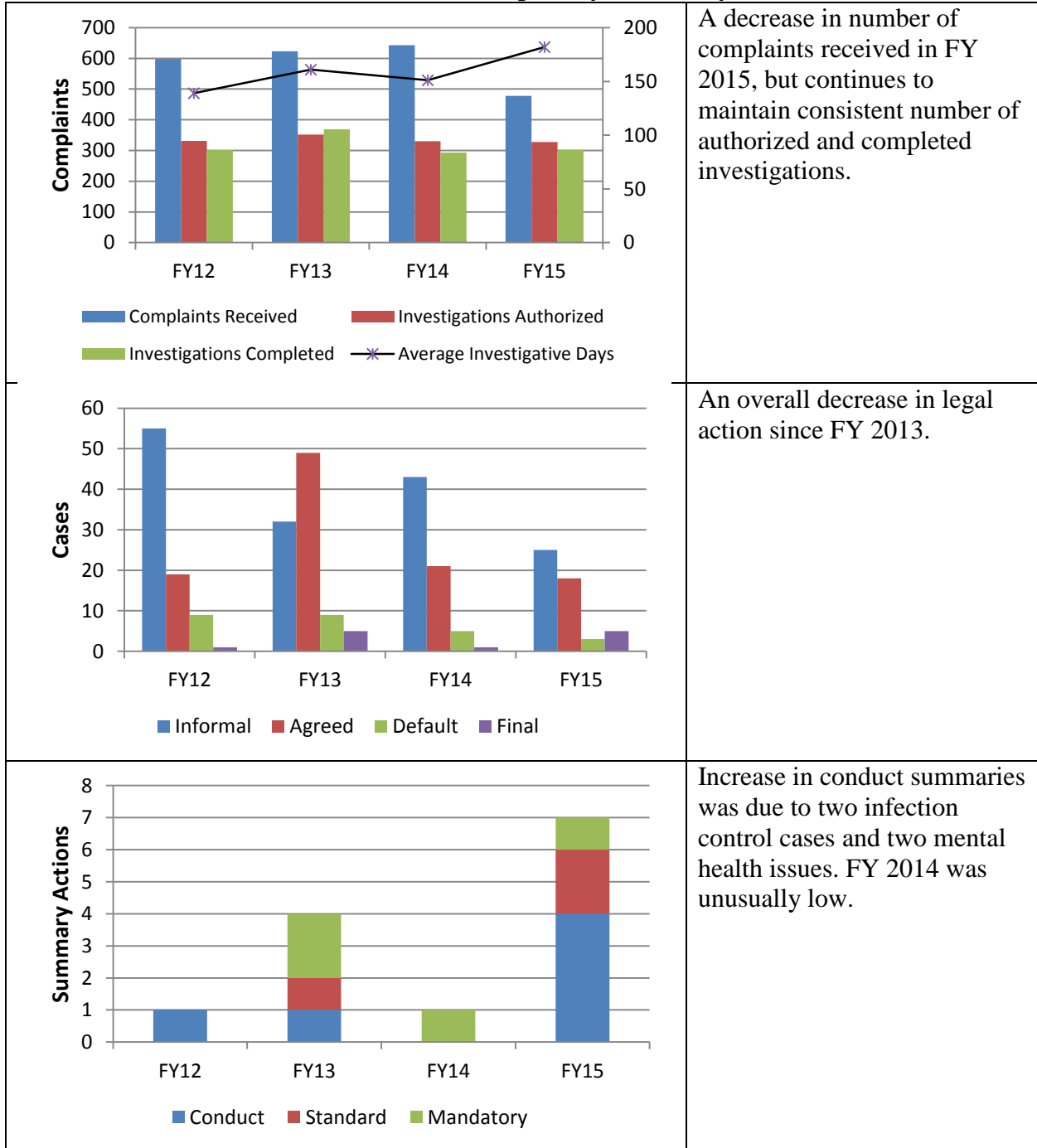
Budget

On January 1, 2014, the Department of Health decreased the chiropractic application and renewal fees by \$100 after conducting a six-year budget analysis focusing on spending trends.

Dental Quality Assurance Commission

The Dental Quality Assurance Commission protects the public by credentialing and disciplining dentists, expanded function dental auxiliaries, dental assistants, and dental anesthesia assistants. The commission regulates the professions by developing rules, policies, and guidelines. The governor appoints 16 commission members — 12 dentists, 2 expanded-function dental auxiliaries, and 2 public members. All serve four-year terms.

Four Year Disciplinary Summary



Rulemaking and Policy Activity

Legislation

Second Substitute Senate Bill 5620, passed in 2012, created certification of dental anesthesia assistants. Dental anesthesia assistants work under close and direct visual supervision of an oral and maxillofacial surgeon or a dental anesthesiologist. The Dental Quality Assurance Commission (commission) adopted rules to implement the new credential July 23, 2013.

House Bill 1534 passed in 2013, increasing the licensed dentist surcharge from \$25 to \$50. The increased fee is paid to the Washington Physicians Health Program (WPHP) to continue to provide services to impaired dentists.

House Bill 1330 passed in 2013, allowing dental hygienists, dental assistants, and expanded function dental auxiliaries to apply topical anesthetics under appropriate dentist supervision. The bill also creates a new practice setting/location for dental hygienists to provide services to homebound patients under general supervision of a dentist. The commission modified WAC 246-817-550 to include allowing dental hygienists to apply topical anesthetic under general supervision of a licensed dentist.

Senate Bill 5606, passed in 2015, allows:

- a dental hygienist to take a tooth impression for any purpose that is allowed for a dental assistant registered under chapter 18.260 RCW, or as a delegated duty for a dental hygienist under rules adopted by the commission;
- the use of a dental hygiene initial limited license for a dental hygienist who is actively practicing or licensed in a Canadian province; and
- a dental assistant to take impressions as a delegated duty under rules adopted by the dental commission.

The bill provides clear statutory authority for the taking of impressions for dental assistants, resolving a current conflict between statute and rule. The commission is considering rule modification in the dental assistant delegation rules.

Senate Bill 5810, passed in 2015, removes the barrier of making dentists notarize applications. The commission is modifying WAC 246-817-110 and 246-817-150 to remove the notarization requirement in the 2015-2016 fiscal year.

Rules and Policies

The commission is amending WAC 246-817-310, Maintenance and Retention of Records, which provides licensed dentists with requirements for maintaining and retaining dental records. The commission identified the need to provide clarity in what should be contained in dental records. The commission has held two rules hearings to consider adoption of modified rules; both times they determined to continue rule modification due to stakeholder concerns regarding electronic records, retention period, and business records accessibility. The commission continues to work with stakeholders on rule modification.

The commission is amending WACs 246-817-740, 745, 755, 760, and 772 to update the monitoring and equipment requirements to align with the American Dental Association (ADA) and the American Society of Anesthesiology (ASA) national standards currently being used by

dentists. The commission continues to work with stakeholders to address concerns with monitoring requirements when administering moderate sedation.

The commission is amending WACs 246-817-510, 520, 525, 540, and 545, all which relate to the delegation of dental duties for dental assistants and expanded function dental auxiliaries. Current rules need to be modified to clarify and amend practice standards to address concerns and confusion. The commission continues to work with stakeholders.

The commission is amending WAC 246-817-160 to clarify required clinical education and the examination eligibility process. The rule amendment is needed to ensure clinical education is obtained and to specifically identify when examination eligibility can be met.

The commission is amending WAC 246-817-120 to update the name of one of the examination organizations, clarify that complete practical examinations are required, and determine the acceptability of examinations from other states and nations.

The commission completed and implemented the following rule modifications:

- WAC 246-817-770 – Added end-tidal CO₂ monitoring requirements when administering general anesthesia.
- WAC 246-817-160 – Modified education requirements for graduates of non-accredited dental schools.
- WAC 246-817-187 – Added a new section to establish process and criteria for temporary practice permits to be issued to military spouses or state-registered domestic partner credential applicants.
- WAC 246-817-360 – Repealed this rule. The rule is unnecessary as statute provides clear authority for dentists to prescribe any controlled substance or legend drug necessary in the practice of dentistry in RCW 18.32.685.
- WAC 246-817-230 - Added a new section to Chapter 246-817 WAC to establish a retired active status dentist license, which allows a dentist to provide dental services in emergent or intermittent circumstances with no compensation.
- WAC 246-817-460 - Clarified what forcible or nonconsensual acts are within the definition of sexual misconduct by a dental provider.
- WAC 246-817-550 – Added allowing dental hygienists to apply topical anesthetic under general supervision of a licensed dentist.
- WAC 246-817-205, 445, and 771 – Added new sections to implement certification of dental anesthesia assistants.

The Dental Quality Assurance Commission established:

- The Dental Corporate Practice Committee to evaluate laws and practices of corporate/group dental clinics.
- The Educational Outreach Committee to educate and communicate with practitioners and other stakeholders dental related topics. The committee publishes a newsletter with three publications per year.
- The Dental Collaboration Committee to work with dental hygienists and denturists on dental related topics affecting dentistry, dental hygiene, and denturism.

The Dental Quality Assurance Commission finalized an interpretive statement on the use of botulinum toxin injections and dermal fillers by dentists on July 26, 2013.

The use of botulinum toxin injections or dermal fillers in the soft tissues throughout the face can be within the scope of practice of a dentist licensed under chapter 18.32 RCW when:

- Used to treat functional or aesthetic dental conditions and their direct aesthetic consequences, and
- The treating dentist has appropriate, verifiable training and experience.

The use of botulinum toxin injections or dermal fillers outside the treatment of dental related conditions for purely cosmetic purposes is not within the scope of practice of dentists not specialty trained as an oral and maxillofacial surgeon.

Budget

The Department of Health reduced application and renewal fees on January 1, 2014. A preliminary positive fund balance for May 31, 2015 of \$4,196,212 grew from a beginning balance of \$3,721,826 on July 1, 2013.

Board of Denturists

The Board of Denturists protects the public by examining, credentialing and disciplining denturists. The board regulates the profession by developing rules, policies, and guidelines. The secretary appoints 7 board members – 4 denturists, 1 dentist and 2 public members. Neither public member may be affiliated with a health care profession or facility. At least one of the public members must be over the age of 65 representing the senior population.

Four Year Disciplinary Summary

<table border="1" style="margin-top: 10px; width: 100%; border-collapse: collapse;"> <caption>Complaints and Investigative Days Data</caption> <thead> <tr> <th>Fiscal Year</th> <th>Complaints Received</th> <th>Investigations Authorized</th> <th>Investigations Completed</th> <th>Average Investigative Days</th> </tr> </thead> <tbody> <tr> <td>FY12</td> <td>22</td> <td>16</td> <td>26</td> <td>175</td> </tr> <tr> <td>FY13</td> <td>22</td> <td>14</td> <td>6</td> <td>140</td> </tr> <tr> <td>FY14</td> <td>29</td> <td>18</td> <td>21</td> <td>180</td> </tr> <tr> <td>FY15</td> <td>26</td> <td>16</td> <td>18</td> <td>200</td> </tr> </tbody> </table>	Fiscal Year	Complaints Received	Investigations Authorized	Investigations Completed	Average Investigative Days	FY12	22	16	26	175	FY13	22	14	6	140	FY14	29	18	21	180	FY15	26	16	18	200	<p>Complaints received rose in the 13-15 biennium, as did average investigative days.</p>
Fiscal Year	Complaints Received	Investigations Authorized	Investigations Completed	Average Investigative Days																						
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Fiscal Year	Informal	Agreed	Default	Final																						
FY12	1	4	3	0																						
FY13	0	1	1	0																						
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Fiscal Year	Conduct	Standard	Mandatory																							
FY12	0	0	0																							
FY13	0	0	0																							
FY14	0	0	0																							
FY15	0	0	0																							

Rulemaking and Policy Activity

Legislation

Substitute House Bill (SHB) 1270, making the Board of Denturists (board), passed during the 2013 legislative session. The bill made the Board of Denturists the profession’s disciplinary authority instead of the secretary of the Department of Health. The board adopted rules to implement the new law September 26, 2014.

Substitute House Bill (SHB) 1271, relating to the practice of denturism, passed during the 2013 legislative session. The bill allows denturists to provide non-orthodontic removable oral devices and teeth whitening services. The Board of Denturists was required to specify the education and training that was required for a licensed denturist to provide these services. The board adopted rules to implement the new law on April 25, 2014.

Rules and Policies

In response to SHB 1270 and SHB 1271, the board chose to open up and review all of rules in Chapter 246-812 WAC. The rulemaking process included:

- Changing the disciplinary authority from the secretary of the Department of Health to the Board of Denturists;
- Housekeeping changes;
- Amending the continuing competency requirements;
- Clarifying the inactive status license requirements;
- Adopting sexual misconduct rules;
- Changing the name of the chapter from Board of Denture Technology to Board of Denturists;
- Defining the term “bruxism device;”
- Specifying the education and training required for a licensed denturist to provide non-orthodontic removable devices and teeth whitening services; and
- Other rule changes.

The board schedules two practical (clinical) exams a year however they require a minimum of five applicants in order to administer the practical exams. From July 1, 2013 through June 30, 2015, the board administered four practical exams and staff administered 12 written (computerized) exams.

The graph below depicts a five-year exam summary.

Fiscal Year	# of applicants for written exam	# passing written exam	# of applicants for practical exam	# passing practical exam
2011	10	8	11	10
2012	15	8	9	7
2013	4	4	0	0
2014	18	16	17	14
2015	9	9	11	9

Board of Hearing and Speech

The Board of Hearing and Speech protects the public by credentialing and disciplining hearing and speech professions, and by developing rules, policies, and guidelines regulating the practice of audiologists, hearing aid specialists, speech-language pathologists, and speech-language pathology assistants. The governor appoints 11 board members to serve three-year terms. The board consists of 2 audiologists, 2 hearing aid specialists, 2 speech-language pathologists, 3 public members, 1 advisory medical physician, and 1 non-voting speech-language pathology assistant.

Four Year Disciplinary Summary

<table border="1"> <caption>Complaints and Investigative Data</caption> <thead> <tr> <th>Fiscal Year</th> <th>Complaints Received</th> <th>Investigations Authorized</th> <th>Investigations Completed</th> <th>Average Investigative Days</th> </tr> </thead> <tbody> <tr> <td>FY12</td> <td>35</td> <td>18</td> <td>15</td> <td>220</td> </tr> <tr> <td>FY13</td> <td>13</td> <td>10</td> <td>13</td> <td>130</td> </tr> <tr> <td>FY14</td> <td>14</td> <td>2</td> <td>7</td> <td>150</td> </tr> <tr> <td>FY15</td> <td>20</td> <td>7</td> <td>6</td> <td>150</td> </tr> </tbody> </table>	Fiscal Year	Complaints Received	Investigations Authorized	Investigations Completed	Average Investigative Days	FY12	35	18	15	220	FY13	13	10	13	130	FY14	14	2	7	150	FY15	20	7	6	150	<p>The number of complaints has generally decreased this biennium. The number of investigations authorized has also decreased.</p>
Fiscal Year	Complaints Received	Investigations Authorized	Investigations Completed	Average Investigative Days																						
FY12	35	18	15	220																						
FY13	13	10	13	130																						
FY14	14	2	7	150																						
FY15	20	7	6	150																						
<table border="1"> <caption>Cases Resolved by Method</caption> <thead> <tr> <th>Fiscal Year</th> <th>Informal</th> <th>Agreed</th> <th>Default</th> <th>Final</th> </tr> </thead> <tbody> <tr> <td>FY12</td> <td>0</td> <td>0</td> <td>9</td> <td>0</td> </tr> <tr> <td>FY13</td> <td>0</td> <td>0</td> <td>4</td> <td>1</td> </tr> <tr> <td>FY14</td> <td>0</td> <td>1</td> <td>0</td> <td>0</td> </tr> <tr> <td>FY15</td> <td>1</td> <td>0</td> <td>0</td> <td>0</td> </tr> </tbody> </table>	Fiscal Year	Informal	Agreed	Default	Final	FY12	0	0	9	0	FY13	0	0	4	1	FY14	0	1	0	0	FY15	1	0	0	0	<p>Most cases are settled through a Stipulation to Informal Disposition (STID), an informal resolution, or an agreed order. When the board issues a Statement of Charges (SOC) against a licensee, the licensee has 20 days in which to respond. If the licensee doesn't respond, it is considered a default.</p>
Fiscal Year	Informal	Agreed	Default	Final																						
FY12	0	0	9	0																						
FY13	0	0	4	1																						
FY14	0	1	0	0																						
FY15	1	0	0	0																						
<table border="1"> <caption>Summary Actions</caption> <thead> <tr> <th>Fiscal Year</th> <th>Conduct</th> <th>Standard</th> <th>Mandatory</th> </tr> </thead> <tbody> <tr> <td>FY12</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>FY13</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>FY14</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>FY15</td> <td>0</td> <td>0</td> <td>0</td> </tr> </tbody> </table>	Fiscal Year	Conduct	Standard	Mandatory	FY12	0	0	0	FY13	0	0	0	FY14	0	0	0	FY15	0	0	0	<p>There were no summary actions during the 13-15 biennium. This is normal for the profession.</p>					
Fiscal Year	Conduct	Standard	Mandatory																							
FY12	0	0	0																							
FY13	0	0	0																							
FY14	0	0	0																							
FY15	0	0	0																							

Rulemaking and Policy Activity

Legislation

Engrossed House Bill (EHB) 2108 passed during the 2014 legislative session. EHB 2108 changed the name of the hearing instrument fitter/dispenser credential to a hearing aid specialist credential and added a nine-month certificate program and a practical exam as a route to licensure for hearing aid specialists.

Rules and Policies

The Board of Hearing and Speech (board) developed and revised rules that were filed with the code reviser's office on June 29, 2015. The rules were effective July 1, 2015 and revisions were made to all sections of chapter 246-828 WAC. Rule revisions included:

- Implementing EHB 2108 to change the hearing instrument fitter/dispenser credential to a hearing aid specialist credential. The rules also set standards for board approval of nine-month programs, outlined curriculum requirements, and added a practical exam for graduates of nine-month programs.
- Adding continuing education requirements for speech-language pathology assistants and multicultural education as an acceptable CE category.
- Adding a temporary practice permit for military spouses per RCW 18.340.020.
- Updating sexual misconduct standards.
- Updating exam standards.
- Making general housekeeping updates to clarify rule language.

Board of Massage

The Board of Massage protects the public’s health and safety by regulating the competency and quality of licensed massage practitioners. The governor appoints 4 massage practitioners and 1 public member to four-year terms. The professional members must have at least three years of experience as a massage practitioner immediately preceding appointment. The public member cannot be an employee of the state or a present or former member of another licensing board.

Four Year Disciplinary Summary

<table border="1" style="margin-top: 10px; width: 100%; border-collapse: collapse;"> <caption>Complaints and Investigative Days Data</caption> <thead> <tr> <th>Fiscal Year</th> <th>Complaints Received</th> <th>Investigations Authorized</th> <th>Investigations Completed</th> <th>Average Investigative Days</th> </tr> </thead> <tbody> <tr> <td>FY12</td> <td>220</td> <td>200</td> <td>150</td> <td>150</td> </tr> <tr> <td>FY13</td> <td>210</td> <td>200</td> <td>220</td> <td>160</td> </tr> <tr> <td>FY14</td> <td>410</td> <td>230</td> <td>170</td> <td>165</td> </tr> <tr> <td>FY15</td> <td>730</td> <td>280</td> <td>330</td> <td>100</td> </tr> </tbody> </table>	Fiscal Year	Complaints Received	Investigations Authorized	Investigations Completed	Average Investigative Days	FY12	220	200	150	150	FY13	210	200	220	160	FY14	410	230	170	165	FY15	730	280	330	100	<p>There has been a significant increase in complaints, likely due to RCW 18.108.195 which authorizes the secretary to inspect the premises of any massage or reflexology business establishment. For a significant number of the random inspections, the department has had to open 2-5 cases for unlicensed practice per inspection.</p>
Fiscal Year	Complaints Received	Investigations Authorized	Investigations Completed	Average Investigative Days																						
FY12	220	200	150	150																						
FY13	210	200	220	160																						
FY14	410	230	170	165																						
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<table border="1" style="margin-top: 10px; width: 100%; border-collapse: collapse;"> <caption>Cases by Resolution Type</caption> <thead> <tr> <th>Fiscal Year</th> <th>Informal</th> <th>Agreed</th> <th>Default</th> <th>Final</th> </tr> </thead> <tbody> <tr> <td>FY12</td> <td>6</td> <td>8</td> <td>8</td> <td>5</td> </tr> <tr> <td>FY13</td> <td>8</td> <td>14</td> <td>28</td> <td>5</td> </tr> <tr> <td>FY14</td> <td>4</td> <td>11</td> <td>8</td> <td>0</td> </tr> <tr> <td>FY15</td> <td>4</td> <td>19</td> <td>6</td> <td>3</td> </tr> </tbody> </table>	Fiscal Year	Informal	Agreed	Default	Final	FY12	6	8	8	5	FY13	8	14	28	5	FY14	4	11	8	0	FY15	4	19	6	3	<p>The disciplining authority of the massage profession falls under the Secretary of the Department of Health.</p> <p>There has been a decrease in respondents not responding to charges and an increase of them signing an agreed order.</p>
Fiscal Year	Informal	Agreed	Default	Final																						
FY12	6	8	8	5																						
FY13	8	14	28	5																						
FY14	4	11	8	0																						
FY15	4	19	6	3																						
<table border="1" style="margin-top: 10px; width: 100%; border-collapse: collapse;"> <caption>Summary Actions by Type</caption> <thead> <tr> <th>Fiscal Year</th> <th>Conduct</th> <th>Standard</th> <th>Mandatory</th> </tr> </thead> <tbody> <tr> <td>FY12</td> <td>0</td> <td>0</td> <td>1</td> </tr> <tr> <td>FY13</td> <td>5</td> <td>0</td> <td>0</td> </tr> <tr> <td>FY14</td> <td>2</td> <td>0</td> <td>1</td> </tr> <tr> <td>FY15</td> <td>6</td> <td>0</td> <td>2</td> </tr> </tbody> </table>	Fiscal Year	Conduct	Standard	Mandatory	FY12	0	0	1	FY13	5	0	0	FY14	2	0	1	FY15	6	0	2	<p>Due to the nature of the profession, the majority of summary actions are based on cases of sexual misconduct.</p>					
Fiscal Year	Conduct	Standard	Mandatory																							
FY12	0	0	1																							
FY13	5	0	0																							
FY14	2	0	1																							
FY15	6	0	2																							

Rulemaking and Policy Activity

Legislation

Substitute House Bill 1252 – Prescribing penalties for allowing or permitting unlicensed practice of massage therapy or reflexology passed in the 2015 legislative session. The bill added a new section to chapter 18.108 RCW. Any person allowing the unlicensed practice of massage or reflexology is guilty of a misdemeanor and, for subsequent violations, guilty of a gross misdemeanor, punishable under chapter 9A.20 RCW

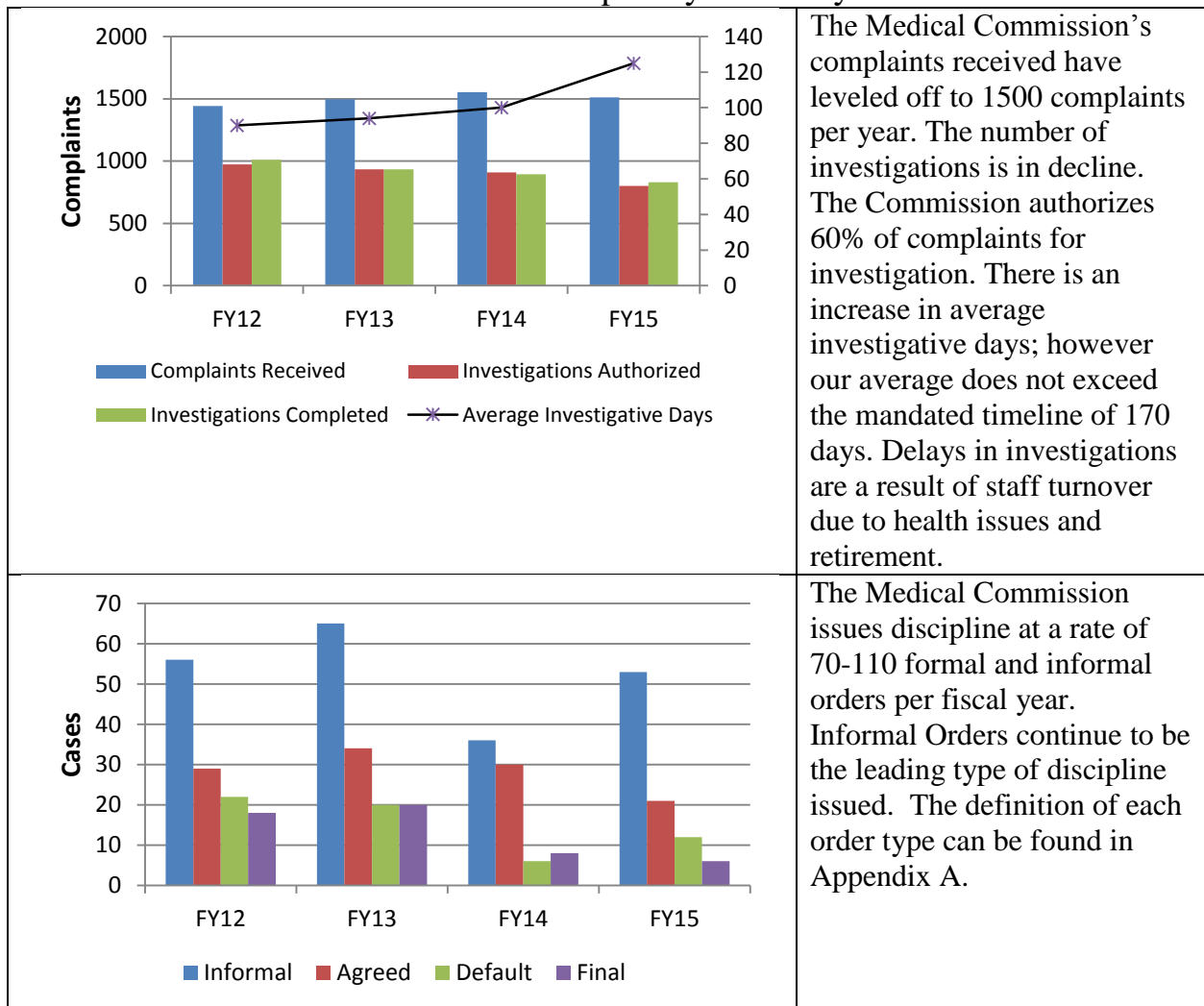
Rules and Policies

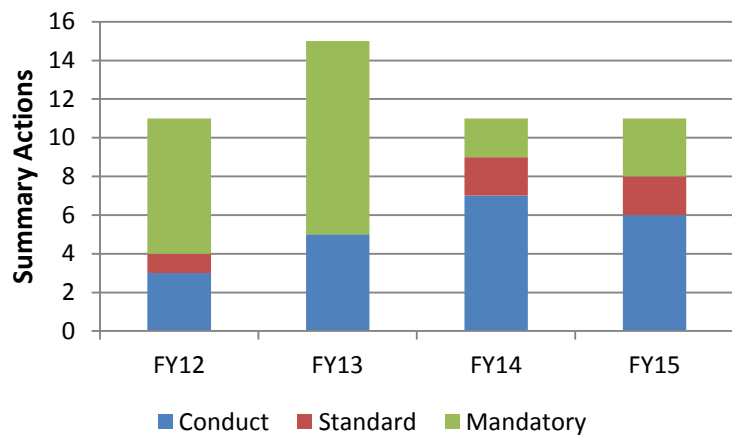
- Chapter 246-830 WAC, Massage Practitioners, was opened to consider clarifying, streamlining, and modernizing regulations. The Department of Health has not conducted a comprehensive review of chapter 246-830 WAC since its adoption in the early 1990s.
- The Department and Board intend to adopt new rules regarding draping, recordkeeping, and transfer of training hours to board-approved programs. The training of transfer hours rule is in response to a health-law judge's order that denied an applicant a massage license. The new rule will clarify language in RCW 18.108.010, Qualifications for licensure or certification.

Medical Quality Assurance Commission

The Medical Quality Assurance Commission (MQAC) promotes patient safety and enhances the integrity of the profession through licensing, discipline, rule making, and education. The Governor appoints 21 commission members to four-year terms: 13 physicians, 2 physician assistants and 6 public members. SHB 1518, passed in 2013, which made permanent the additional authority granted to the Commission, began the process of organizational analysis to better address the medical regulatory needs of Washington and how the Commission will meet them. The Commission continues to pursue work furthering the Governor’s goal of healthy and safe communities.

Four Year Disciplinary Summary





The Medical Commission takes summary action at a rate of 10-15 orders per fiscal year.

Rulemaking and Policy Activity

Legislation

SB 5772 MD, DO, PA Demographics.

This bill was passed in the Health Care Committee, but while on the Senate floor, it missed cutoff. The bill language was later attached to HB 1485 funding physician residencies, which was passed and concurred with by the opposite house. The Governor signed the bill into law on May 14th, 2015 and was effective July 24th, 2015. We are implementing steps to add demographic information to all initial applications, force completion in online renewal, and changing all communications in paper renewal.

SSB 5448 Lyme Disease Treatment

Passed and signed into law. The Commission must conduct a study/literature review and report by the end of the year to the Governor. The report was approved by the Commission.

Budget Decision Package: MQAC Discipline Enhancement: The Medical Commission was granted additional spending authority for the purpose of adding professional level discipline staff and addressing growing discipline costs related to expert witness and prosecution functions. The decision package also includes funding for anticipated increased research and investigative tasks related to medical marijuana authorization and complaints.

Rules and Policies

The Medical Commission has issued or revised the following policies, procedures and guidelines.

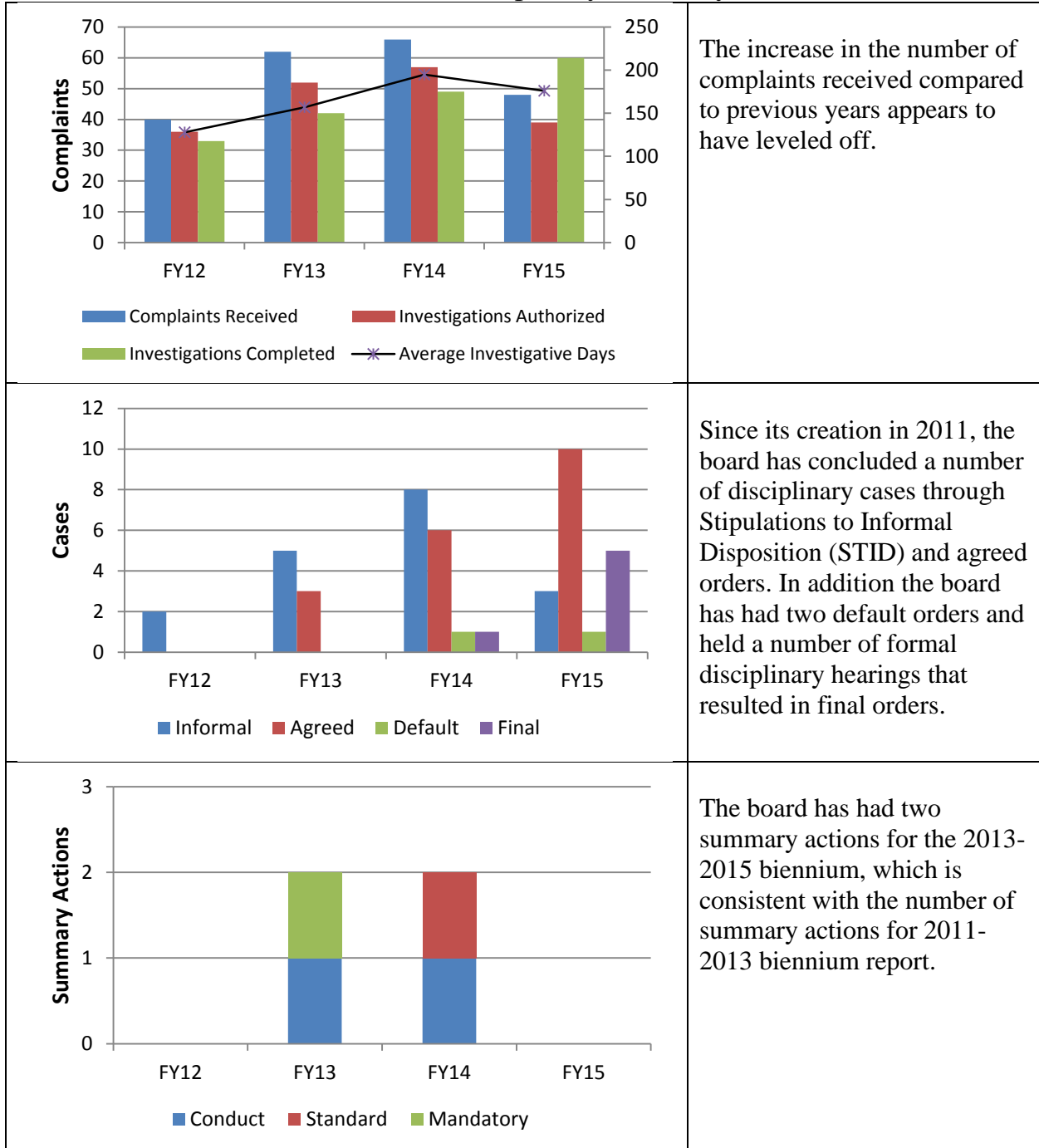
MD2015-08	Revised	A Collaborative Approach to Reducing Medical Error and Enhancing Patient Safety
MD2015-07	Revised	Delegation of Signature of Authority for Credentialing, Discipline, and Rulemaking
MD2015-06	New	Ownership of Clinics by Physician Assistants
MD2015-05	Revised	Stipulations to Informal Disposition
MD2015-04	New	Possession and Administration of Naloxone
MD2015-02	Revised	Transmission of Time Critical Medical Information
MD2015-01	Revised	Consent Agenda Procedure
MD2014-07	New	Medical Marijuana Authorization Guidelines
MD2014-03	New	Appropriate Use of Telemedicine
MD2014-02	New	Professionalism and Electronic Media (Social media)

The Medical Commission revised physician assistant rules to comply with SHB 1737. WAC 246-918 was adopted 12/05/2014.

Board of Naturopathy

The Board of Naturopathy (board) protects public health, and enhances patient safety and the integrity of the naturopathic physician profession through licensing, disciplinary action, rulemaking, and education. The governor appoints 7 board members – 5 naturopathic physicians and 2 public members. Neither public member may be affiliated with a health care profession or facility.

Four Year Disciplinary Summary



Rulemaking and Policy Activity

Rules and Policies

- The board amended WAC 246-836-020, 030, 040, 110, and 120, and repealed WAC 246-836-050. These changes make Washington State naturopathic physician examination rules consistent with national standards. In addition, the amendments helped to clarify the board's jurisprudence examination requirement.
- The board is amending WAC 246-836-080 to address the one-time, six-hour requirement for naturopathic physicians to obtain training in suicide assessment, treatment, and management as determined by Engrossed Substitute House Bill 2315 (Laws of 2014) and updated by Substitute House Bill 1424 (Laws of 2015).
- The board is considering modification to WACs 246-836-010 and 210 to clarify the types of nonsurgical cosmetic procedures that may or may not be performed by naturopathic physicians.
- The board participated in a workgroup with the Medical Quality Assurance Commission, Nursing Care Quality Assurance Commission, and the Board of Osteopathic Medicine and Surgery to create and adopt shared professional standards expected of health care professionals who authorize medical marijuana under Washington State law. The resulting guidelines are expected to improve patient safety and maintain the dignity of the health professions in the state of Washington.

Nursing Care Quality Assurance Commission

The Nursing Care Quality Assurance Commission (NCQAC) protects the public’s health and safety by regulating the competency and quality of licensed practical nurses, registered nurses, advanced registered nurse practitioners, and nursing technicians. The purpose of the NCQAC includes establishing, monitoring, and enforcing licensing, consistent standards of practice, continuing competency mechanisms, and discipline. The Governor appoints 15 commission members to four-year terms: 3 licensed practical nurses, 7 registered nurses, 2 advanced registered nurse practitioners, and 3 public members.

Four Year Disciplinary Summary

<table border="1"> <caption>Complaints and Investigative Data</caption> <thead> <tr> <th>Fiscal Year</th> <th>Complaints Received</th> <th>Investigations Authorized</th> <th>Investigations Completed</th> <th>Average Investigative Days</th> </tr> </thead> <tbody> <tr> <td>FY12</td> <td>1850</td> <td>650</td> <td>700</td> <td>210</td> </tr> <tr> <td>FY13</td> <td>1650</td> <td>550</td> <td>800</td> <td>180</td> </tr> <tr> <td>FY14</td> <td>1600</td> <td>650</td> <td>650</td> <td>80</td> </tr> <tr> <td>FY15</td> <td>1600</td> <td>550</td> <td>500</td> <td>90</td> </tr> </tbody> </table>	Fiscal Year	Complaints Received	Investigations Authorized	Investigations Completed	Average Investigative Days	FY12	1850	650	700	210	FY13	1650	550	800	180	FY14	1600	650	650	80	FY15	1600	550	500	90	<p>Complaints received in FY14 and FY15 are slightly less than the previous biennium. Investigations authorized decreased from FY14 to FY15. Investigations completed are down as a result of the elimination of the backlog of cases in investigation.</p>
Fiscal Year	Complaints Received	Investigations Authorized	Investigations Completed	Average Investigative Days																						
FY12	1850	650	700	210																						
FY13	1650	550	800	180																						
FY14	1600	650	650	80																						
FY15	1600	550	500	90																						
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Fiscal Year	Informal	Agreed	Default	Final																						
FY12	65	65	85	10																						
FY13	80	75	75	15																						
FY14	85	75	90	25																						
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<table border="1"> <caption>Summary Actions</caption> <thead> <tr> <th>Fiscal Year</th> <th>Conduct</th> <th>Standard</th> <th>Mandatory</th> </tr> </thead> <tbody> <tr> <td>FY12</td> <td>1</td> <td>0</td> <td>32</td> </tr> <tr> <td>FY13</td> <td>2</td> <td>0</td> <td>30</td> </tr> <tr> <td>FY14</td> <td>1</td> <td>4</td> <td>27</td> </tr> <tr> <td>FY15</td> <td>7</td> <td>2</td> <td>21</td> </tr> </tbody> </table>	Fiscal Year	Conduct	Standard	Mandatory	FY12	1	0	32	FY13	2	0	30	FY14	1	4	27	FY15	7	2	21	<p>Most nursing summary suspensions in Washington are issued based on action in another state. FY15 shows an increase in cases based on conduct.</p>					
Fiscal Year	Conduct	Standard	Mandatory																							
FY12	1	0	32																							
FY13	2	0	30																							
FY14	1	4	27																							
FY15	7	2	21																							

Rulemaking and Policy Activity

Legislation

House Bill 2080 Next Generation Identification “RapBack”

This legislation authorizes the Nursing Commission (and other health professions who choose to participate) to conduct federal background checks on all applicants and licensees *and* allow the Washington State Patrol and FBI to retain non-criminal fingerprints of those applicants and licensees for the purpose of participating in RapBack. RapBack is an FBI service offered to subscribers that notifies subscribing agencies of existing criminal history or any changes in criminal history of licensees soon after it occurs anywhere in the country.

Substitute House Bill 1727 Nursing Assistant Scope of Practice

Legislation, enacted in 2015, that permits individuals to work under their nursing assistant credential in licensed mental health care facilities, requires alignment of the rules with the new law. The Nursing Commission has the authority to define scope of practice for nursing assistants. The Nursing Commission will begin the rules process in 2016.

Rules and Policies

WAC 246-840-740	Sexual Misconduct Prohibited	Adopted 9/12/14
WAC 246-840-125, 202-207	Continuing Competency/Suicide Prevention - In Process	In Process
WAC 246-840-010, 020, 300-455	Clinical Nurse Specialist	In Process
WAC 246-840-045, 090, 130, 455, 500-575	Education - In Process	In Process
WAC 246-841-535	Alternative Programs	In Process

Board of Nursing Home Administrators

The mission and purpose of the Board of Nursing Home Administrators is to protect the health of the people of Washington through the proper licensing of nursing home administrators, and through the objective enforcement of the nursing home administrators practice act or other laws governing the professional behavior of its licensees. The board consists of 4 licensed nursing home administrators, 4 health care professionals and 1 public member, all of which serve five-year terms.

Four Year Disciplinary Summary

<table border="1" style="margin-top: 10px; width: 100%; border-collapse: collapse;"> <caption>Complaints Data</caption> <thead> <tr> <th>Fiscal Year</th> <th>Complaints Received</th> <th>Investigations Authorized</th> <th>Investigations Completed</th> <th>Average Investigative Days</th> </tr> </thead> <tbody> <tr> <td>FY12</td> <td>50</td> <td>35</td> <td>40</td> <td>155</td> </tr> <tr> <td>FY13</td> <td>85</td> <td>35</td> <td>30</td> <td>145</td> </tr> <tr> <td>FY14</td> <td>90</td> <td>25</td> <td>30</td> <td>180</td> </tr> <tr> <td>FY15</td> <td>130</td> <td>45</td> <td>30</td> <td>150</td> </tr> </tbody> </table>	Fiscal Year	Complaints Received	Investigations Authorized	Investigations Completed	Average Investigative Days	FY12	50	35	40	155	FY13	85	35	30	145	FY14	90	25	30	180	FY15	130	45	30	150	<p>The number of complaints received has been increasing steadily since FY 12. There have been many more complaints received directly from individuals (rather than from other state agencies) during that time-frame. This corresponds to a change in the Department of Health website which made the complaint form more visible.</p>
Fiscal Year	Complaints Received	Investigations Authorized	Investigations Completed	Average Investigative Days																						
FY12	50	35	40	155																						
FY13	85	35	30	145																						
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<table border="1" style="margin-top: 10px; width: 100%; border-collapse: collapse;"> <caption>Cases Data</caption> <thead> <tr> <th>Fiscal Year</th> <th>Informal</th> <th>Agreed</th> <th>Default</th> <th>Final</th> </tr> </thead> <tbody> <tr> <td>FY12</td> <td>1</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>FY13</td> <td>2</td> <td>0</td> <td>1</td> <td>0</td> </tr> <tr> <td>FY14</td> <td>4</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>FY15</td> <td>4</td> <td>0</td> <td>0</td> <td>0</td> </tr> </tbody> </table>	Fiscal Year	Informal	Agreed	Default	Final	FY12	1	0	0	0	FY13	2	0	1	0	FY14	4	0	0	0	FY15	4	0	0	0	<p>The small number of actions for nursing home administrators corresponds to a small number of individuals licensed.</p>
Fiscal Year	Informal	Agreed	Default	Final																						
FY12	1	0	0	0																						
FY13	2	0	1	0																						
FY14	4	0	0	0																						
FY15	4	0	0	0																						
<table border="1" style="margin-top: 10px; width: 100%; border-collapse: collapse;"> <caption>Summary Actions Data</caption> <thead> <tr> <th>Fiscal Year</th> <th>Conduct</th> <th>Standard</th> <th>Mandatory</th> </tr> </thead> <tbody> <tr> <td>FY12</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>FY13</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>FY14</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>FY15</td> <td>0</td> <td>0</td> <td>0</td> </tr> </tbody> </table>	Fiscal Year	Conduct	Standard	Mandatory	FY12	0	0	0	FY13	0	0	0	FY14	0	0	0	FY15	0	0	0	<p>There were no summary actions during the 13-15 biennium. This is normal for the nursing home administrator profession.</p>					
Fiscal Year	Conduct	Standard	Mandatory																							
FY12	0	0	0																							
FY13	0	0	0																							
FY14	0	0	0																							
FY15	0	0	0																							

Rulemaking and Policy Activity

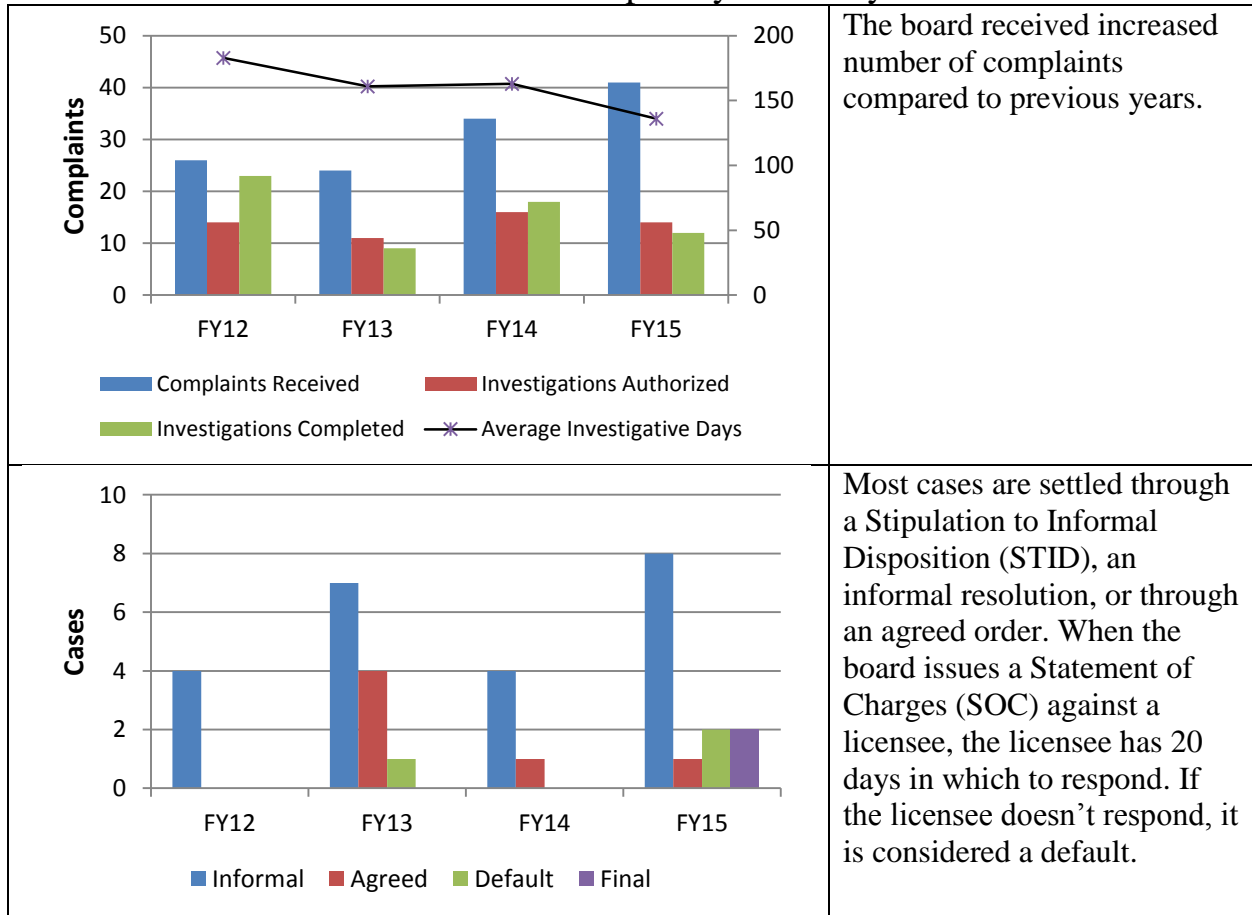
Rules and Policies

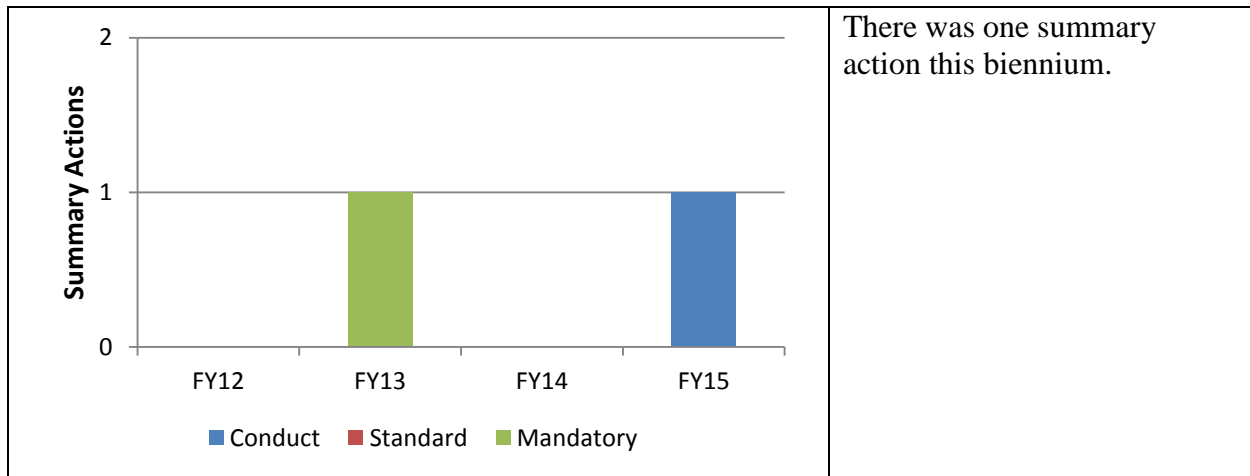
The Board of Nursing Home Administrators filed a CR101 to open all of their rules on March 31, 2015. Two workshops were held in May, 2015. The board will continue to work on these changes in the up-coming biennium.

Board of Occupational Therapy Practice

The mandate of the Occupational Therapy Practice Board is to protect the public’s health and safety and to promote the welfare of the state by regulating the competency and quality of professional healthcare providers under its jurisdiction. The board accomplishes this mandate through a variety of activities working with the Department of Health, Health Systems Quality Assurance division. The board is made up of 3 occupational therapists, 1 occupational therapist assistant and 1 public member appointed by the governor. The professional members must have been in active practice in occupational therapy for at least five years immediately preceding appointment. All members must be residents of Washington State.

Four Year Disciplinary Summary





Rulemaking and Policy Activity

Legislation

SHB 1376

Clarifying continuing education requirements for suicide assessment, treatment, and management established in ESHB 2366 (2012). The legislature stated in SHB 1376 (chapter 78, laws of 2013) its intent to educate certain health care practitioners in suicide assessment training in order to help lower the suicide rate in Washington.

Rules and Policies

- The Board of Occupational Therapy (board) created rules to implement ESHB 2366 (Chapter 181, Laws of 2012) and SHB 1376 (Chapter 78, Laws of 2013), which clarify continuing education requirements for suicide assessment training. SHB 1376 authorized the board to determine the necessary hours of suicide training that would be required based on the occupational therapy practitioner scope of practice. It also authorized the board to exempt certain practitioners who have brief or limited patient contact. The board determined that three hours of training in suicide assessment, screening, and referral was appropriate for all occupational therapists and occupational therapy assistants. The board chose not to exempt any practitioners from the training requirement. The amended rules also specify the standards a program must meet to qualify as a suicide prevention training program pursuant to SHB 1376.

In 2014, the board began working on various parts of the chapter that were opened in 2008, prior to the rules moratorium of 2010. Once the board started reviewing the opened rule sections and proposed draft language, the board decided to withdraw the 2008 CR 101 form and start a new form to reflect current board members.

Board of Optometry

The Board of Optometry protects the public by credentialing and disciplining optometrists. The board regulates the profession by developing rules, policies, and guidelines. The governor appoints 6 members – 5 licensed optometrists and 1 public member – to serve three-year terms.

Four Year Disciplinary Summary

<table border="1"> <caption>Complaints and Investigations Data</caption> <thead> <tr> <th>Fiscal Year</th> <th>Complaints Received</th> <th>Investigations Authorized</th> <th>Investigations Completed</th> <th>Average Investigative Days</th> </tr> </thead> <tbody> <tr> <td>FY12</td> <td>33</td> <td>17</td> <td>14</td> <td>100</td> </tr> <tr> <td>FY13</td> <td>33</td> <td>13</td> <td>12</td> <td>150</td> </tr> <tr> <td>FY14</td> <td>29</td> <td>10</td> <td>17</td> <td>200</td> </tr> <tr> <td>FY15</td> <td>28</td> <td>9</td> <td>12</td> <td>150</td> </tr> </tbody> </table>	Fiscal Year	Complaints Received	Investigations Authorized	Investigations Completed	Average Investigative Days	FY12	33	17	14	100	FY13	33	13	12	150	FY14	29	10	17	200	FY15	28	9	12	150	<p>The number of complaints has dropped since 2012. The number of investigations has also decreased over the same period of time. While the average investigative days increased from 2012-14, that number has decreased in 2015.</p>
Fiscal Year	Complaints Received	Investigations Authorized	Investigations Completed	Average Investigative Days																						
FY12	33	17	14	100																						
FY13	33	13	12	150																						
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<table border="1"> <caption>Cases by Resolution Type</caption> <thead> <tr> <th>Fiscal Year</th> <th>Informal</th> <th>Agreed</th> <th>Default</th> <th>Final</th> </tr> </thead> <tbody> <tr> <td>FY12</td> <td>1</td> <td>1</td> <td>0</td> <td>0</td> </tr> <tr> <td>FY13</td> <td>0</td> <td>0</td> <td>0</td> <td>1</td> </tr> <tr> <td>FY14</td> <td>2</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>FY15</td> <td>0</td> <td>0</td> <td>1</td> <td>0</td> </tr> </tbody> </table>	Fiscal Year	Informal	Agreed	Default	Final	FY12	1	1	0	0	FY13	0	0	0	1	FY14	2	0	0	0	FY15	0	0	1	0	<p>The board has few formal hearings. Cases are generally settled through a Stipulation to Informal Disposition (STID), an informal resolution, or through an agreed order. Both the STID and agreed order are subject to national data bank reporting.</p>
Fiscal Year	Informal	Agreed	Default	Final																						
FY12	1	1	0	0																						
FY13	0	0	0	1																						
FY14	2	0	0	0																						
FY15	0	0	1	0																						
<table border="1"> <caption>Summary Actions by Type</caption> <thead> <tr> <th>Fiscal Year</th> <th>Conduct</th> <th>Standard</th> <th>Mandatory</th> </tr> </thead> <tbody> <tr> <td>FY12</td> <td>0</td> <td>1</td> <td>0</td> </tr> <tr> <td>FY13</td> <td>0</td> <td>1</td> <td>1</td> </tr> <tr> <td>FY14</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>FY15</td> <td>1</td> <td>0</td> <td>0</td> </tr> </tbody> </table>	Fiscal Year	Conduct	Standard	Mandatory	FY12	0	1	0	FY13	0	1	1	FY14	0	0	0	FY15	1	0	0	<p>The board can issue summary (immediate) actions and summary restrictions. A restriction allows the licensee to continue to practice with certain conditions until the outcome of a formal hearing. A mandatory summary action based on orders from other states is required. All of these actions are rare. Over four years, the board has ordered four summary actions.</p>					
Fiscal Year	Conduct	Standard	Mandatory																							
FY12	0	1	0																							
FY13	0	1	1																							
FY14	0	0	0																							
FY15	1	0	0																							

Rulemaking and Policy Activity

Legislation

Substitute Senate Bill 5293

In the 2015 Legislative session, Substitute Senate Bill 5293 was passed to preserve the ability of licensed optometrists to use hydrocodone products to treat pain, regardless of potential action by agencies of the federal government to reclassify these products as schedule II narcotics.

Rules and Policies

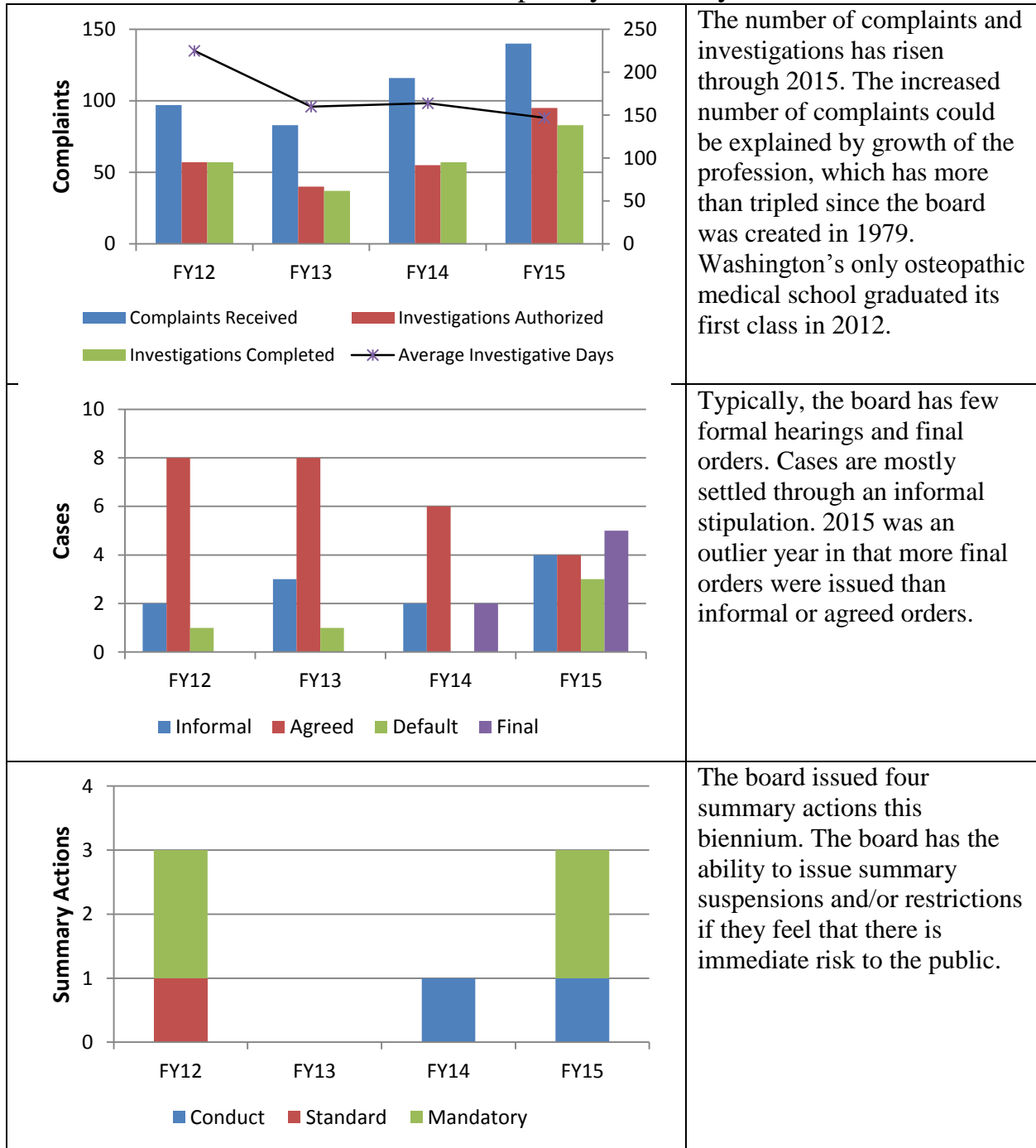
The following rules were adopted by the Board of Optometry between July 1, 2013 and June 30, 2015:

- **WAC 246-851-610 Approval or removal of medications.** House Bill 1609 (CH. 19, L. 2013), effective July 28, 2013, changed title and reference of the Board of Pharmacy to the Pharmacy Quality Assurance Commission. This rule updates references to the Board of Pharmacy accordingly. The rule was proposed using the expedited rule making process.
- **WAC 246-851-420 Optometrist with prescriptive authorization.** This law removed the requirement in WAC 246-851-420(1) for optometrists to include the letters "TX" on a prescription for legend drugs with therapeutic purposes signifying that the optometrists had completed required training. Statutory changes in 2006 required that all licensed optometrists complete required training and be certified to prescribe legend drugs for therapeutic purposes making it no longer necessary to include the letters "TX".
- **WAC 246-851-235 Credits for cultural competency in clinical care.** This rule provides licensed optometrists optional credit for educational courses which increase cultural competency in health care. The rule addresses the increasing demand for health care practitioners to provide effective care for patients of diverse cultural and social origins. The rule did not change the continuing education credit requirements for optometrists.

Board of Osteopathic Medicine and Surgery

The mission and purpose of the Washington State Board of Osteopathic Medicine and Surgery is to protect the health of the people of Washington through the proper licensing of osteopathic physicians and osteopathic physician assistants, and through the objective enforcement of the Osteopathic Medical Practice Act or other laws governing the professional behavior of its licensees. The board consists of 6 practicing osteopathic physicians and 1 public member, all of which serve five-year terms.

Four Year Disciplinary Summary



Rulemaking and Policy Activity

Legislation

House Bill 1737 Physician assistant rulemaking

The 2013 legislature enacted House Bill (HB) 1737 into law. Among other things, the bill directed the board to work with the Medical Quality Assurance Commission and a statewide organization representing the interest to modernize the PA rules. A committee was formed that brought interested parties throughout the state together to collaborate on changes to the allopathic and osteopathic PA chapters of rules resulting in:

- Alignment of the allopathic and osteopathic PA chapters;
- Creation of a retired active credential with a reduced fee for PAs who work on an emergent or limited basis;
- Modernization and alignment of rule sections related to CME requirements;
- A streamlined application process for currently licensed PAs who would like an osteopathic PA license, and vice-versa;
- Updated rules to reflect HB 1737's statutory changes; and
- General housekeeping and technical edits to align medical commission and osteopathic PA chapters for consistency with national standards.

These modernized rules became effective February 2015.

Legislation introduced to increase the size of the board

The Washington Osteopathic Medical Association (WOMA) introduced a bill during the 2015 legislative session that, if passed, would have increased the size of the board from seven members to eleven members. The bill would have added two osteopathic physicians, one osteopathic physician assistant, and one public member to the board. The number of osteopathic physicians licensed in Washington State has more than tripled since the current seven member board was created in 1979. The bill did not get voted out of the house rules committee. The board supported this bill, has encouraged WOMA to run the bill again in the 2016 session, and will support those efforts.

House Bill 1485 concerning family medicine residencies in health professional shortage areas

A bill, passed during the 2015 session to promote residency placement in health professional shortage areas, contained a provision that forces the board to require licensees (physicians and PAs) to submit information about their current professional practice at the time of license renewal. This information may include practice setting, medical specialty, board certification, or other relevant data determined by the board. Department staff has developed an implementation plan for collecting this data and the board anticipates that they will begin collecting this data in 2016.

Rules and Policies

- The board recently adopted rules regarding re-entry to practice. These rules will help assure safety of the public by requiring that these physicians demonstrate certain competencies before providing care. Requirements include passage of an examination or a physician-sponsored program approved by the board.
- The board recently adopted rules creating a retired-active status credential for osteopathic physicians. There is no retired active status credential for an osteopathic physician. An osteopathic physician who meets the requirements for this credential may be authorized to practice on a limited or emergent basis.
- These recently adopted rules will allow osteopathic physicians and osteopathic physician assistants (PA) to delegate use of laser, light, radiofrequency, and plasma devices applied to the skin to "properly trained and licensed professionals." This is the current language

in the Medical Quality Assurance Commission's rules. Prior to adoption of this rule, osteopathic physician and osteopathic PAs could only delegate the use of these devices to professionals credentialed by the Department of Health. This revision will allow broader delegation of this equipment to professionals such as master estheticians who are licensed by the Department of Licensing.

- The board holds a meeting at the Pacific Northwest University of Health Sciences in Yakima each year. After their business meeting, the board meets with students to discuss licensing and disciplinary issues that face osteopathic physicians.

Budget

Reduction of licensing fees for osteopathic physicians

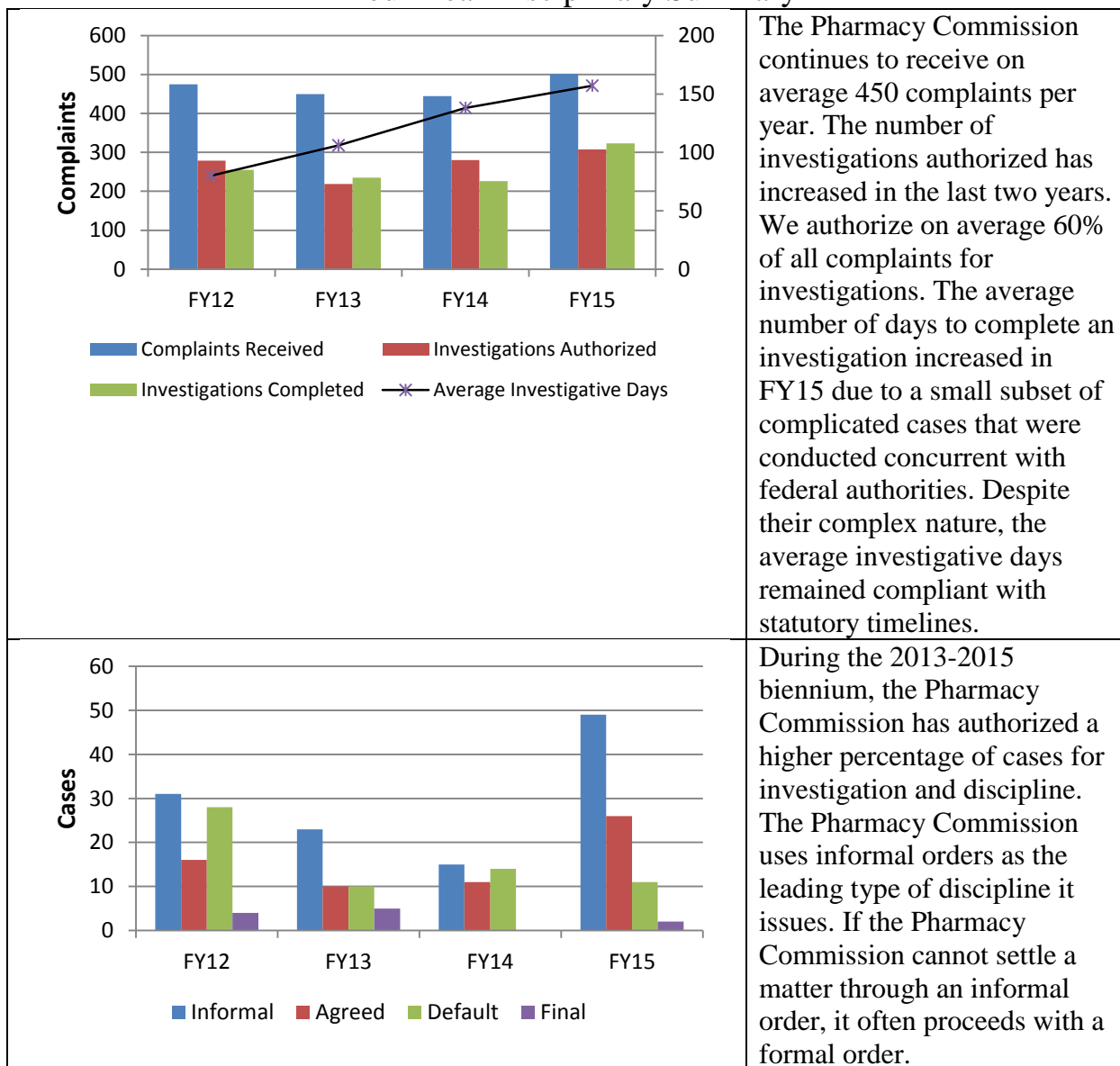
The initial licensure and renewal fees for osteopathic physicians were lowered from \$600 to \$425 effective January 1, 2014. This reduction was based on a fee study conducted by the department. The board has a consistently healthy operating reserve in its budget.

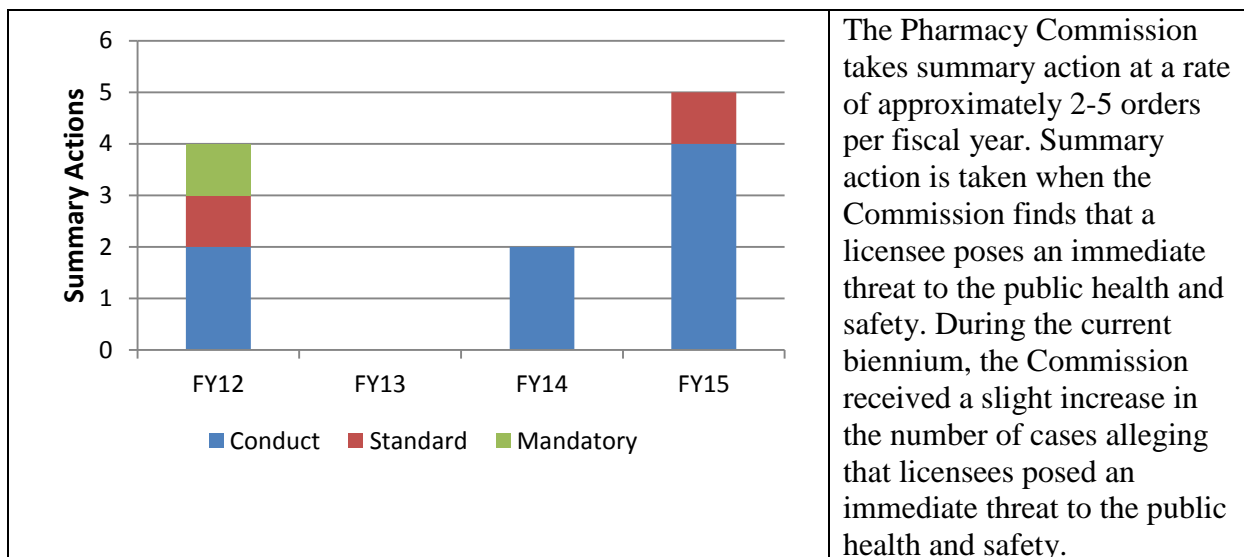
Pharmacy Quality Assurance Commission

The Pharmacy Quality Assurance Commission (commission) protects the public health, safety, and welfare through licensing and discipline of pharmacists, interns, technicians, and pharmacy assistants as well as a variety of pharmaceutical firms. The commission regulates the profession by adopting rules to establish qualifications, competencies, and standard for of practice for dispensing, distribution, wholesaling, and manufacturing of drugs and devices.

In 2013, the Board of Pharmacy was renamed the Pharmacy Quality Assurance Commission and increased the number of members from 7 to 15. The governor appoints members of the commission with and by consent of the senate. Commission members include 10 pharmacists, 1 pharmacy technician, and 4 public members.

Four Year Disciplinary Summary





Rulemaking and Policy Activity

Legislation

House Bill 1609, passed in 2013, renamed the Board of Pharmacy to the Pharmacy Quality Assurance Commission (commission), doubled the number of pharmacists and public members serving on the board, and added a pharmacy technician.

House Bill 1800, passed in 2013, establishes the minimum standards of the United States Pharmacopeia Convention for sterile and non-sterile pharmaceutical compounding products. Substitute Senate Bill 5416, passed in 2013, permits the electronic communication of controlled substance prescription information from a practitioner to a pharmacy. The systems must meet specific standards and must be approved by the commission. The law also made Schedule III through V controlled substance prescription valid for six months after the date the prescription was issued, which is consistent with Schedule II controlled substance prescriptions.

Substitute Senate Bill 5459, passed in 2013, allows a pharmacist to dispense up to a 90-day supply of drugs, excluding controlled substances, when the valid prescription authorizes refills and meets other qualifications in the law.

Engrossed Senate Bill 5524, passed in 2013, allows a pharmacist to dispense legend and controlled medications based on a valid prescription written by physician assistants and osteopathic physician assistants licensed in another state that meet the same qualification for prescribing as in-state physician assistants.

Substitute Senate Bill 5148, passed in 2013, allows for the redistribution of donated medications to the indigent, uninsured, or under insured. It establishes the conditions for when prescription drugs or supplies may be donated, accepted, or dispensed. Prescription drugs and supplies dispensed under this law are not eligible for reimbursement or the collection of any related dispensing fees, and cannot be resold. The redistribution of donated prescription drugs does not include controlled substances. Pharmacies' participation is voluntary.

Engrossed House Bill 1808, passed in 2013, requires a manager or employee of a retail store holding a pharmacy license to notify local law enforcement or the Washington State Patrol if one ounce or less of marijuana is inadvertently left within the premises of the business.

Engrossed Substitute House Bill 1625, passed in 2014, restricts retailers from selling over-the-counter (OTC) products that contain dextromethorphan (DXM) to persons under eighteen. The law creates civil penalties for selling or purchasing OTC DMX products in violation of the restrictions in the law and preempts local ordinances regulating the sale, distribution, receipt, or possession of DXM. The law does not apply to DXM containing products sold by prescription.

Substitute House Bill 1625, passed in 2015, allows pharmacies operated by a hospital to provide medication to ambulance and aid services for uses associated with provided emergency medical services. The commission is working with the department of health to develop a model protocol related to the transfer of medications from the hospital pharmacy to the ambulance or aid service. **Engrossed Substitute House Bill 1671**, passed in 2015, increases access to opioid overdose medications to persons at risk or persons in a position to assist a person at risk of experiencing an opioid-related overdose.

Substitute Senate Bill 5293, passed in 2015 authorizes pharmacies to dispense hydrocodone combination products prescribed by Washington licensed optometrists.

Engrossed Senate Bill 5268, passed in 2015, allows a pharmacist to dispense one early refill for topical ophthalmic products under conditions defined in law.

Engrossed Senate Bill 5935, passed in 2015, defines interchangeable biological products and establishes conditions and process for when a pharmacist can substitute. The commission has posted a link to the federal drug enforcement agency's list of interchangeable biological products (purple book).

Engrossed Substitute Senate Bill 5460, passed in 2015, establishes standards for dispensing outpatient medications from a hospital emergency department. The law adds residential treatment facilities under the definition of health care entities for licensure to acquire or possess legend drugs. The law also allows a hospital to include, under the hospital pharmacy license, any individual practitioner's office or multi-practitioner clinic owned and operated by the hospital. However, implementation of this section is still pending.

Engrossed Substitute Senate Bill 6052 - (budget proviso- effective June 30, 2015) mandates that the commission engage interested parties and stakeholders in a process for developing statutory standards and protocols for long-term care pharmacies. The commission must draft a letter report with proposed language and submit it to the legislature by November 15, 2015.

Rules and Policies

- The commission adopted rules to amend WAC 246-887-020 and repeal WAC 246-887-030 to clarify the electronic prescription and dispensing requirements for Schedule II through Schedule V controlled substances. These changes make the rules consistent with state and federal law.
- The commission is amending chapter 246-872 WAC, WAC 246-869-120, and will be adding a new chapter related to the use of technology in pharmacy practice. Technological advances in pharmacy practice have occurred rapidly. Currently, very few rules address contemporary technology in pharmacy practice such as: robotics, remote prescription dispensing, centralized pharmacy services, shared hospital services, remote medication order processing, and workload balancing. Stakeholder work is ongoing.
- The commission is amending chapter 246-869 WAC, WAC 246-863-060, WAC 246-901-100, -120, and -130. Current rules need to be amended to establish standards for pharmacy business practices as it relates to shared accountability of the pharmacist in charge and the business license holder, quality controls or improvements in error reduction, and quotas and performance metrics on clinical and prescription services. The commission continues to work with stakeholders through the Pharmacy Business Practice Committee.
- In response to a rulemaking petition, the commission is considering amending WAC 246-887-040 and -045 to add Lisdexamfetamine, a Schedule II nonnarcotic stimulant for the treatment of binge eating disorder (BED). Lisdexamfetamine is currently approved by the federal Food and Drug Administration for use in the treatment of BED
- The commission is amending chapters 246-878 WAC, 246-871 WAC, 246-903 WAC, and 246-873 WAC to update sterile pharmaceutical compounding standards. Commission is evaluating nationally recognized compounding standards to update and set practice and quality standards for the compounding of sterile and non-sterile preparation in all practice settings. The commission continues to work with stakeholder on draft revisions.
- The commission has begun the rulemaking process to amend WAC 246-869-190 related to pharmacy inspections. The commission plans to consider evaluating the rules on how pharmacy facility inspections are current conducted using a points-based system.
- The commission is considering updating WAC 246-860-100 related sexual misconduct rules to include sexual contact that involves force, intimidation, lack of consent, or conviction of a sex offense listed in RCW 9.94A.030. The change in rule will provide clear standards of conduct and assist the commission in complying fully with an Executive Order from former Governor Gregoire.
- The commission has adopted WAC 246-869-105 under the provision for emergency rulemaking to allow pharmacists to provide a temporary prescription refill for patients when the patient's pharmacy access is disrupted. The intent of the rule is to provide continuity of care during a proclaimed emergency. The emergency rule will remain in effect for 120 days. The commission will begin rulemaking to consider permanent rules in this matter.

Board of Physical Therapy

The mandate of the Board of Physical Therapy is to protect the public’s health and safety and to promote the welfare of the state by regulating the competency and quality of professional healthcare providers under its jurisdiction. The board accomplishes this through a variety of activities working with the Department of Health, Health Systems Quality Assurance division. The Board of Physical Therapy is made up of 4 physical therapists, 2 physical therapist assistant, and 1 public member appointed by the governor. The board typically meets every 8 weeks.

Four Year Disciplinary Summary

<p>Complaints</p> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th>Fiscal Year</th> <th>Complaints Received</th> <th>Investigations Authorized</th> <th>Investigations Completed</th> <th>Average Investigative Days</th> </tr> </thead> <tbody> <tr> <td>FY12</td> <td>72</td> <td>28</td> <td>28</td> <td>200</td> </tr> <tr> <td>FY13</td> <td>56</td> <td>22</td> <td>25</td> <td>140</td> </tr> <tr> <td>FY14</td> <td>95</td> <td>48</td> <td>35</td> <td>110</td> </tr> <tr> <td>FY15</td> <td>85</td> <td>30</td> <td>42</td> <td>145</td> </tr> </tbody> </table>	Fiscal Year	Complaints Received	Investigations Authorized	Investigations Completed	Average Investigative Days	FY12	72	28	28	200	FY13	56	22	25	140	FY14	95	48	35	110	FY15	85	30	42	145	<p>For the last three fiscal years, the average duration of an investigation has been less than the Department’s target of 170 days for the investigative stage of the disciplinary process.</p>
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Fiscal Year	Informal	Agreed	Default	Final																						
FY12	6	1	0	1																						
FY13	4	5	6	2																						
FY14	2	1	2	0																						
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Fiscal Year	Conduct	Standard	Mandatory																							
FY12	1	0	0																							
FY13	0	0	1																							
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Rulemaking and Policy Activity

Legislation

House Bill 2160 expands the scope of practice for physical therapists to perform spinal manipulation and manipulative mobilization of the spine and its immediate articulations. The new law is effective July 1, 2015. The rules were adopted in response to Engrossed Substitute House Bill (ESHB) 2160 and ESHB 2315 from the 2014 legislative session.

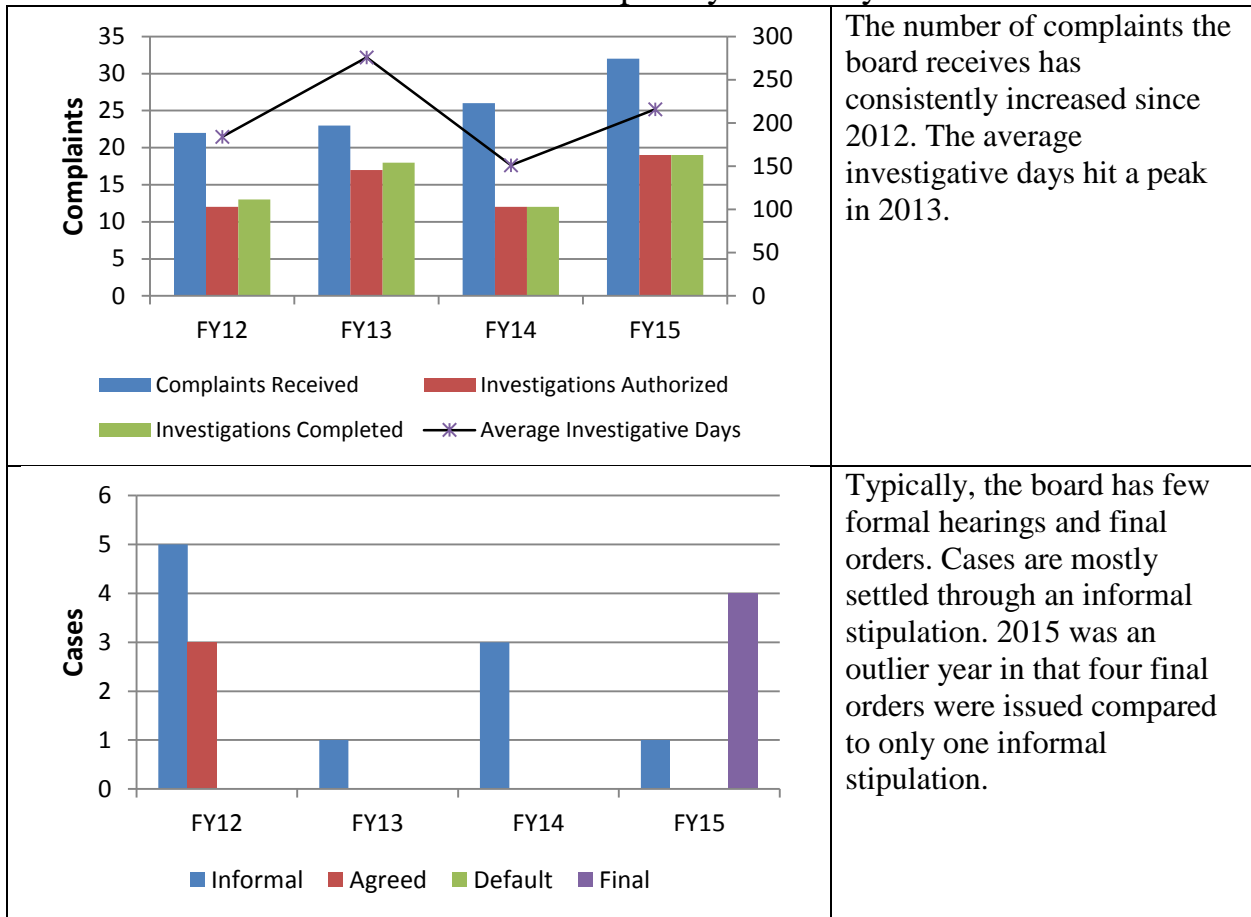
Rules and Policies

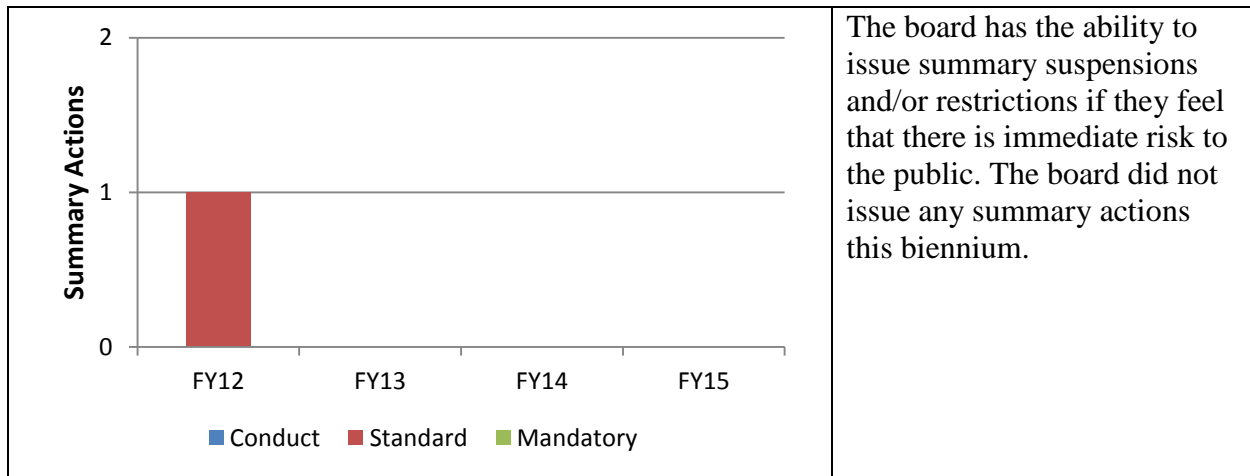
- The Board of Physical Therapy (board) created rules to implement ESHB 2160 (chapter 116, laws of 2014), which expands the scope of practice of physical therapists (PT) to perform spinal manipulation. The rules adopt the requirements established in ESHB 2160 that set the education and training requirements needed, including supervision to receive an initial endorsement to perform spinal manipulation and manipulative mobilization of the spine. The amended rules also adopt the requirements in ESHB 2160 that identify continuing education and standards of care requirements for those providers who receive this endorsement. The amended rules also define the qualifications required for a licensed PT to be a clinical supervisor.
- The legislature stated in ESHB 2315 (chapter 7, laws of 2014) its intent to educate PTs, Physical Therapist Assistants (PTA), and other health care practitioners in suicide assessment, treatment, and management in order to help lower the suicide rate in Washington. The board amended rules to meet this intent by establishing criteria for acceptable training programs for PTs and PTAs, which includes a required one-time, three hour training for suicide screening and referral. The amended rules also specify the standards a program must meet to qualify as a suicide prevention training program pursuant to ESHB 2315.

Podiatric Medical Board

The mission and purpose of the Podiatric Medical Board is to protect the public’s health and safety and to promote the welfare of the state by regulating the competency and quality of professional health care providers under its jurisdiction. This is accomplished by establishing and enforcing qualifications for licensure and standards of practice, and where appropriate, by disciplining and monitoring practitioners. Only individuals who meet and maintain prescribed standards of competence and conduct shall be allowed to engage in the practice of podiatry as defined and authorized by Chapter 18.22 RCW. The board consists of 4 practicing podiatric physicians and 1 public member, all of which serve five year terms and may not serve more than two consecutive terms.

Four Year Disciplinary Summary





Rulemaking and Policy Activity

Rules and Policies

- The board is repealing WAC 246-922-100 in light of the new medical assistant law. This section of WAC allowed assistive podiatric personnel to perform certain tasks without a credential. The new medical assistant law sets a scope of practice in statute for medical assistants. The board determined that this section of their WAC is no longer necessary and they will credential their current unlicensed assistive personnel as medical assistants. Development and stakeholder work for these rules will occur from summer of 2013 through spring of 2014.
- The board agreed to amend other sections of their chapter that are out-of-date or contain incorrect information. This includes updating the approved schools of podiatric medicine and the exam requirements for podiatric physicians.

Budget

Reduction of licensing fees for podiatric physicians

The initial licensure and renewal fees for podiatric physicians were lowered from \$975 to \$650 effective January 1, 2014. This reduction was based on a fee study conducted by the department. The board has a consistently healthy operating reserve in their budget.

Examining Board of Psychology

The mission of the board is to protect the public. This mission is accomplished through licensing and disciplining psychologists. The board also develops rules, policies, and guidelines regulating the practice of psychology. The Governor appoints 9 board members to serve five year terms. The board consists of 7 psychologists and 2 public members.

Four Year Disciplinary Summary

<table border="1" style="margin-top: 10px; width: 100%; border-collapse: collapse;"> <caption>Complaints Data</caption> <thead> <tr> <th>Fiscal Year</th> <th>Complaints Received</th> <th>Investigations Authorized</th> <th>Investigations Completed</th> <th>Average Investigative Days</th> </tr> </thead> <tbody> <tr> <td>FY12</td> <td>75</td> <td>40</td> <td>35</td> <td>150</td> </tr> <tr> <td>FY13</td> <td>85</td> <td>42</td> <td>45</td> <td>160</td> </tr> <tr> <td>FY14</td> <td>82</td> <td>45</td> <td>50</td> <td>170</td> </tr> <tr> <td>FY15</td> <td>95</td> <td>48</td> <td>50</td> <td>160</td> </tr> </tbody> </table>	Fiscal Year	Complaints Received	Investigations Authorized	Investigations Completed	Average Investigative Days	FY12	75	40	35	150	FY13	85	42	45	160	FY14	82	45	50	170	FY15	95	48	50	160	<p>The board received increased number of complaints compared to previous years.</p>
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<table border="1" style="margin-top: 10px; width: 100%; border-collapse: collapse;"> <caption>Cases Data</caption> <thead> <tr> <th>Fiscal Year</th> <th>Informal</th> <th>Agreed</th> <th>Default</th> <th>Final</th> </tr> </thead> <tbody> <tr> <td>FY12</td> <td>5</td> <td>1</td> <td>0</td> <td>0</td> </tr> <tr> <td>FY13</td> <td>6</td> <td>2</td> <td>0</td> <td>0</td> </tr> <tr> <td>FY14</td> <td>4</td> <td>8</td> <td>0</td> <td>0</td> </tr> <tr> <td>FY15</td> <td>1</td> <td>9</td> <td>4</td> <td>0</td> </tr> </tbody> </table>	Fiscal Year	Informal	Agreed	Default	Final	FY12	5	1	0	0	FY13	6	2	0	0	FY14	4	8	0	0	FY15	1	9	4	0	<p>This biennium the board opened more cases than in the previous biennium. The number of cases resulting in action taken by the board varies slightly depending on the nature of the complaints received. Psychology cases tend to require expert witnesses.</p>
Fiscal Year	Informal	Agreed	Default	Final																						
FY12	5	1	0	0																						
FY13	6	2	0	0																						
FY14	4	8	0	0																						
FY15	1	9	4	0																						
<table border="1" style="margin-top: 10px; width: 100%; border-collapse: collapse;"> <caption>Summary Actions Data</caption> <thead> <tr> <th>Fiscal Year</th> <th>Conduct</th> <th>Standard</th> <th>Mandatory</th> </tr> </thead> <tbody> <tr> <td>FY12</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>FY13</td> <td>0</td> <td>1</td> <td>0</td> </tr> <tr> <td>FY14</td> <td>0</td> <td>1</td> <td>0</td> </tr> <tr> <td>FY15</td> <td>0</td> <td>0</td> <td>1</td> </tr> </tbody> </table>	Fiscal Year	Conduct	Standard	Mandatory	FY12	0	0	0	FY13	0	1	0	FY14	0	1	0	FY15	0	0	1	<p>The board has had at least one summary action each year.</p>					
Fiscal Year	Conduct	Standard	Mandatory																							
FY12	0	0	0																							
FY13	0	1	0																							
FY14	0	1	0																							
FY15	0	0	1																							

Rulemaking and Policy Activity

Rules and Policies

- RCW 18.130.050 and RCW 18.83.050(5) authorize the Examining Board of Psychology (board) to establish a comprehensive definition of sexual misconduct. The proposed rule clarifies and expands the definition of sexual misconduct for psychologists.
- Under a plain reading of WAC 246-924-046, only courses taken as part of the degree granting program count towards meeting the educational components for licensure. In some circumstances, specific courses may have been unavailable during an applicant's doctoral program. This results in an applicant receiving a doctoral degree, but the specific course requirements under WAC 246-924-046 (3) may not have been met. Applicants may have taken pre or post-doctoral courses to fulfill the course requirements and these applicants are qualified for licensure in Washington State.

The board's proposed rules establish the circumstances when additional coursework could be applied to fulfill the educational requirements. Some of these circumstances were initially identified in the interpretive policy statement filed with the Code Reviser as WSR 12-08-020.

The board believes that the proposed rules will allow qualified applicants to obtain licensure while fulfilling the board's duty to grant licensure to qualified applicants and to deny licensure to unqualified applicants to "safeguard the people of the state of Washington from the unqualified and improper practice of psychology." [RCW 18.83.020(1)]

Veterinary Board of Governors

The Veterinary Board of Governors protects the public by credentialing and disciplining veterinarians, veterinary technicians, and veterinary medication clerks. The board regulates the professions by developing rules, policies, and guidelines. The governor appoints 7 members – 5 licensed veterinarians, 1 licensed veterinary technician, and 1 public member – to serve five-year terms.

Four Year Disciplinary Summary

<p>Complainants</p> <table border="1" style="width: 100%; text-align: center;"> <thead> <tr> <th>Fiscal Year</th> <th>Complaints Received</th> <th>Investigations Authorized</th> <th>Investigations Completed</th> <th>Average Investigative Days</th> </tr> </thead> <tbody> <tr> <td>FY12</td> <td>150</td> <td>100</td> <td>85</td> <td>120</td> </tr> <tr> <td>FY13</td> <td>140</td> <td>85</td> <td>100</td> <td>140</td> </tr> <tr> <td>FY14</td> <td>140</td> <td>70</td> <td>70</td> <td>155</td> </tr> <tr> <td>FY15</td> <td>120</td> <td>70</td> <td>75</td> <td>190</td> </tr> </tbody> </table>	Fiscal Year	Complaints Received	Investigations Authorized	Investigations Completed	Average Investigative Days	FY12	150	100	85	120	FY13	140	85	100	140	FY14	140	70	70	155	FY15	120	70	75	190	<p>The number of complaints received and investigated has modestly declined over the past four years. Average investigative days, however, have steadily increased.</p>
Fiscal Year	Complaints Received	Investigations Authorized	Investigations Completed	Average Investigative Days																						
FY12	150	100	85	120																						
FY13	140	85	100	140																						
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<p>Cases</p> <table border="1" style="width: 100%; text-align: center;"> <thead> <tr> <th>Fiscal Year</th> <th>Informal</th> <th>Agreed</th> <th>Default</th> <th>Final</th> </tr> </thead> <tbody> <tr> <td>FY12</td> <td>19</td> <td>2</td> <td>0</td> <td>0</td> </tr> <tr> <td>FY13</td> <td>10</td> <td>5</td> <td>6</td> <td>1</td> </tr> <tr> <td>FY14</td> <td>11</td> <td>17</td> <td>1</td> <td>12</td> </tr> <tr> <td>FY15</td> <td>5</td> <td>3</td> <td>0</td> <td>0</td> </tr> </tbody> </table>	Fiscal Year	Informal	Agreed	Default	Final	FY12	19	2	0	0	FY13	10	5	6	1	FY14	11	17	1	12	FY15	5	3	0	0	<p>The board has few formal hearings. Most cases are settled through a Stipulation to Informal Disposition (STID), an informal resolution, or through an agreed order.</p>
Fiscal Year	Informal	Agreed	Default	Final																						
FY12	19	2	0	0																						
FY13	10	5	6	1																						
FY14	11	17	1	12																						
FY15	5	3	0	0																						
<p>Summary Actions</p> <table border="1" style="width: 100%; text-align: center;"> <thead> <tr> <th>Fiscal Year</th> <th>Conduct</th> <th>Standard</th> <th>Mandatory</th> </tr> </thead> <tbody> <tr> <td>FY12</td> <td>1</td> <td>0</td> <td>0</td> </tr> <tr> <td>FY13</td> <td>0</td> <td>0</td> <td>0</td> </tr> <tr> <td>FY14</td> <td>1</td> <td>0</td> <td>0</td> </tr> <tr> <td>FY15</td> <td>0</td> <td>0</td> <td>0</td> </tr> </tbody> </table>	Fiscal Year	Conduct	Standard	Mandatory	FY12	1	0	0	FY13	0	0	0	FY14	1	0	0	FY15	0	0	0	<p>The board has the ability to issue summary (immediate) suspensions and/or summary restrictions. A restriction allows the licensee to continue to practice but only under certain practice conditions until the outcome of a formal hearing. A mandatory summary action based on orders from other states is required. Two licensees have been summarily suspended in the past four years.</p>					
Fiscal Year	Conduct	Standard	Mandatory																							
FY12	1	0	0																							
FY13	0	0	0																							
FY14	1	0	0																							
FY15	0	0	0																							

Rulemaking and Policy Activity

Rules and Policies

The following rules were adopted by the Veterinary Board of Governors between July 1, 2013 and June 30, 2015:

- **WAC 246-933-460 Courses approved by the veterinary board.** This rule amended WAC 246-933-460 so that licensed veterinarians can potentially receive “pre-approved” Continuing Veterinary Medicine Education (CVME) credits for attending courses offered by a number of qualified providers. Adding these providers helps licensees access more CVME that meets the board’s requirements and saves board and staff time previously used to pre-approve courses on a case-by-case basis.
- **WAC 246-933-275 Reactivation of expired veterinary license.** This rule sets requirements to re-instate a veterinary license that has expired for more than three years. Veterinarians who haven’t been actively engaged in the practice of veterinary medicine now must successfully complete the current North American Veterinary Licensing Examination (NAVLE). The purpose of the rule is to ensure patient safety by re-testing veterinarians who have not been in active practice in more than three years.
- **WAC 246-933-530 Purchase and use of legend drugs and controlled substances; WAC 246-933-550 Investigation.** House Bill 1609 (CH. 19, L. 2013), effective July 28, 2013, changed title and reference of the Board of Pharmacy to the Pharmacy Quality Assurance Commission. This rule updates references to the Board of Pharmacy accordingly.

Appendices

Appendix A: Definitions is a glossary of terms used throughout this report, including clarifications and abbreviated versions of longer terms.

Appendix B: Licensee Counts by Professions details the number of licensees for each profession over the last seven fiscal years, as well as a compounded annual growth rate over four years whenever possible.

Appendix C: Alternative Programs – Chemically Impaired Practitioners depicts enrollment, both voluntary and mandatory, of health practitioners into substance abuse monitoring programs.

Appendix D: Distribution of Staff Attorney Workload provides an anonymized breakdown of the number of cases per staff attorney and by profession. It also includes the number of months each attorney worked within the biennium.

Appendix E: Distribution of Investigator Workload provides an anonymized breakdown of the number of cases per investigator and by profession. It also includes the number of months each investigator worked within the biennium.

Appendix A: Definitions

Agreed Order: The document, formally called Stipulated Findings of Fact, Conclusions of Law, and Agreed Order, is a negotiated settlement between the health care provider and representatives of the agency. It states the substantiated violations of law and the sanctions being placed on the health care provider's credential. The health care provider agrees to the conditions in the order. The Agreed Order is presented to the disciplinary authority and, if approved, becomes final. The order is reported to national data banks and the public through a press release.

Board or Commission: A board or commission is a part-time, statutory entity which has rule-making authority, performs quasi-judicial functions, has responsibility for the administration or policy direction of a program, or performs regulatory or licensing functions with respect to a specific profession. See also Chapter 43.03 RCW.

Certification: This credential demonstrates that the professional has met certain qualifications. The regulatory authority – a board, commission, or the secretary of health – sets the qualifications. With some professions, someone who isn't certified may perform the same tasks, but may not use "certified" in their title.

Default Orders: A Default Order is issued when the credentialed health care provider is given notice, but either fails to answer the allegations or fails to participate in the adjudicative process as required by law.

Deterrent Sanctions: These include items such as reprimands and fines.

Final Order after Hearing: The document is formally called Findings of Fact, Conclusions of Law and Order. This document is issued after a formal hearing has been held. The hearing may be held before a health law judge representing the secretary as the decision-maker or before a panel of board or commission members with a health law judge acting as the presiding officer. The document identifies the proven facts, violations of law, and the sanctions being placed on the health care provider's credential. The health care provider has the right to ask for administrative review of an initial order. Final orders are subject to reconsideration of the decision or to appeal to a superior court. The order is reported to national data banks, and released to the public through a press release.

License: This credential allows people to practice if they meet certain qualifications. Practicing without a license is illegal. Licensing regulates what practitioners are trained and authorized to do.

Notice of Decision (NOD): This document is issued, pursuant to RCW 18.130.055, when the disciplining authority decides to deny an application for licensure or grant the license with conditions.

Registration: The state keeps an official register of names and addresses of the people in a given profession. This credential signifies the professional is on that register. If required, a description and the location of the service are included; however, registrations do not include training, examination, or continuing education requirements.

Rehabilitative Sanctions: These include probation of license, substance abuse treatment and monitoring, remedial education, counseling, and limitations or restrictions on the practice. The health care provider continues to practice with conditions imposed.

Removal from Practice: The health care provider's credential is revoked or indefinitely suspended.

Removal from Practice with Conditions: The health care provider's credential is suspended for a specified period. Conditions for rehabilitation and reinstatement must be met before the credential can be returned to good standing.

Stipulation to Informal Disposition: A Stipulation to Informal Disposition (STID) is an informal resolution. If the health care provider agrees to sign the STID, he or she does not admit to unprofessional conduct, but does agree to corrective action. STIDs are reported to national data banks, but, because they are informal, they do not result in a press release.

Surrender: The health care provider relinquishes the right to practice. This type of sanction is only permitted, once a complaint is filed, through a stipulation to informal disposition or a formal order. Surrender is not used if the practitioner intends to practice in another jurisdiction or if the disciplining authority believes return to practice is reasonably possible.

**Appendix B: Licensee Counts by Profession
2013-15 Biennium**

Profession	2009	2010	2011	2012	2013	2014	2015	Annual Growth Rate
Advanced Emergency Medical Technician			398	395	391	367	362	-2.9%
Advanced Registered Nurse Practitioner	4,535	4,791	5,035	5,291	5,530	5,975	6,404	6.6%
Animal Massage Practitioner				13	29	45	59	42.6%
Athletic Trainer	372	411	460	499	520	548	587	5.6%
Audiologist	386	380	396	403	399	399	409	0.5%
Cardiovascular Invasive Specialist				90	166	188	224	16.2%
Chemical Dependency Professional	2,654	2,777	2,821	2,843	2,852	2,866	2,878	0.4%
Chemical Dependency Professional Trainee		1,071	1,452	1,462	1,457	1,503	1,446	-0.4%
Chiropractic X-Ray Technician	234	232	227	215	210	204	209	-0.9%
Chiropractor	2,249	2,260	2,334	2,328	2,359	2,383	2,467	2.0%
Counselor, Agency Affiliated		5,220	6,060	5,939	6,334	6,615	7,611	8.6%
Counselor, Certified		304	728	735	717	692	630	-5.0%
Counselor, Certified Advisor			10	10	4	2	3	-33.1%
Dental Anesthesia Assistant						4	117	—
Dental Assistant	9,339	9,836	11,036	11,709	12,698	13,220	13,692	5.4%
Dental Hygienist	5,196	5,370	5,562	5,696	5,810	5,901	6,056	2.1%
Dentist	5,923	6,072	6,155	6,080	6,048	6,170	6,355	1.5%
Denturist	140	142	151	138	147	160	143	1.2%
Dietitian Nutritionist	1,323	1,419	1,541	1,559	1,450	1,484	1,733	3.6%
Dispensing Optician	934	961	990	1,006	1,019	1,025	1,048	1.4%
Dispensing Optician Apprentice	1,018	999	1,049	1,028	990	968	966	-2.1%
East Asian Medicine Practitioner	1,131	1,203	1,262	1,253	1,296	1,345	1,387	3.4%
Emergency Medical Responder	806	704	628	551	468	405	394	-10.6%
Emergency Medical Technician	14,376	13,954	14,095	13,838	13,466	12,932	12,870	-2.4%
Expanded Function Dental Auxiliary	3	56	114	161	188	192	212	9.6%
Genetic Counselor			61	83	105	114	136	17.9%
Health Care Assistant*	15,991	16,665	17,880	18,515	21,207	0*	0*	—
Hearing Aid Specialist	263	275	285	290	296	300	302	1.4%
Home Care Aide				15	2,941	6,570	10,708	63.1%

Profession	2009	2010	2011	2012	2013	2014	2015	Annual Growth Rate
Humane Society	6	5	13	17	19	19	18	1.9%
Hypnotherapist	577	621	683	692	690	713	788	4.4%
Intermediate Life Support Technician	358	394	0	0	0	0	0	—
Intravenous Therapy Technician	597	573	0	0	0	0	0	—
Licensed Practical Nurse	14,085	13,973	13,975	13,380	13,060	12,433	11,944	-3.7%
Marriage and Family Therapist	1,056	1,138	1,237	1,239	1,286	1,378	1,486	6.2%
Marriage and Family Therapist Associate		223	297	345	393	434	466	10.5%
Massage Practitioner	13,018	13,276	13,864	13,927	13,708	13,759	13,656	-0.7%
Medical Assistant	0	0	0	0	0	27,357	31,291	—
Mental Health Counselor	4,521	4,827	5,099	5,312	5,515	5,765	6,059	4.5%
Mental Health Counselor Associate		905	1,233	1,329	1,482	1,656	1,789	10.4%
Midwife	105	108	108	116	123	140	161	11.5%
Naturopathic Physician	939	967	1,035	1,096	1,146	1,186	1,231	3.9%
Nursing Assistant	66,991	71,671	74,975	75,715	75,555	75,346	76,056	0.1%
Nursing Home Administrator	443	448	453	460	459	439	441	-1.4%
Nursing Pool Operator	201	186	187	172	157	147	158	-2.8%
Nursing Technician	551	432	415	360	331	355	396	3.2%
Occupational Therapist	2,644	2,747	2,876	2,966	3,078	3,174	3,271	3.3%
Occupational Therapy Assistant	565	594	625	694	762	873	956	11.3%
Ocularist	8	8	8	9	7	7	8	-3.9%
Optometrist	1,475	1,464	1,395	1,428	1,486	1,513	1,547	2.7%
Orthotist/ Prosthetist	245	264	283	291	301	313	330	4.3%
Osteopathic Physician	1,119	1,206	1,261	1,328	1,437	1,598	1,769	10.0%
Osteopathic Physician Assistant	45	45	50	48	52	53	59	7.1%
Paramedic	2,103	2,178	2,318	2,464	2,525	2,548	2,568	1.4%
Pharmacies and Other Pharmaceutical Firms	3,197	3,311	3,384	3,501	4,306	4,024	4,190	6.2%
Pharmacist	8,216	8,556	8,861	8,983	9,289	9,391	9,627	2.3%
Pharmacist Intern	1,141	1,232	1,236	1,314	1,419	1,413	1,394	2.0%
Pharmacy Assistant	6,123	7,574	8,364	9,059	9,284	9,658	10,299	4.4%
Pharmacy Technician	8,568	8,815	9,257	9,521	9,482	9,108	8,867	-2.3%
Physical Therapist	5,042	5,300	5,577	5,615	5,798	5,966	6,188	3.3%
Physical Therapist Assistant	1,258	1,381	1,531	1,631	1,779	1,866	1,971	6.5%

Profession	2009	2010	2011	2012	2013	2014	2015	Annual Growth Rate
Physician	24,670	25,135	25,783	26,167	26,536	27,044	27,692	1.9%
Physician Assistant	2,220	2,358	2,472	2,569	2,691	2,814	3,018	5.5%
Podiatric Physician	309	322	328	334	317	335	353	1.9%
Psychologist	2,195	2,337	2,422	2,498	2,579	2,673	2,796	3.8%
Radiological Technologist	5,607	5,743	5,830	6,008	5,975	6,071	6,200	1.1%
Radiologist Assistant			3	6	7	8	8	10.1%
Recreational Therapist	131	140	139	134	134	134	146	2.9%
Reflexologist						174	248	—
Registered Nurse	79,740	82,094	83,381	84,258	86,091	87,359	87,097	1.1%
Respiratory Care Practitioner	2,384	2,426	2,516	2,593	2,657	2,692	2,794	2.5%
Retired Volunteer Medical Worker	4	6	6	7	7	4	4	-17.0%
Sex Offender Treatment Provider and Affiliate	151	148	149	146	138	135	129	-4.0%
Social Worker Advanced		94	96	98	100	114	119	6.7%
Social Worker Associate Advanced		128	174	181	207	207	201	3.6%
Social Worker Associate Independent Clinical		632	773	873	974	1114	1346	15.5%
Social Worker Independent Clinical	3,116	3,176	3,322	3,448	3,578	3,736	3,858	3.8%
Speech Language Pathologist	1,662	1,736	1,841	1,912	2,113	2,377	2,508	9.5%
Speech Language Pathology Assistant			151	204	206	206	209	0.8%
Surgical Technologist	2,544	2,824	3,041	2,952	2,923	2,898	2,980	0.3%
Veterinarian	3,023	3,166	3,343	3,416	3,417	3,481	3,586	1.6%
Veterinary Medication Clerk	381	425	542	597	656	739	825	11.4%
Veterinary Technician	1,433	1,569	1,610	1,699	1,817	1,886	2,027	6.1%
X-Ray Technician	1,928	1,890	1,837	1,711	1,567	1,551	1,580	-2.6%
Total	343,568	365,873	381,089	386,968	398,716	412,961	428,116	3.4%

* The Health Care Assistant credential has been abolished. See Medical Assistant counts.

Appendix C: Alternative Programs – Chemically Impaired Practitioners 2013-15 Biennium

The law provides a way to assure practitioners provide services according to regulatory standards. RCW 18.130.175 allows disciplining authorities to refer a practitioner to a voluntary substance abuse monitoring program instead of disciplinary action. The disciplining authority can also require that a chemically dependent health care provider participate in a substance abuse program.

Profession	Program	Total Mandated	Total Voluntary*	Total Enrolled in Biennium	Successful Completions
Advanced Registered Nurse Practitioner	WHPS	15	5	20	4
Certified Registered Nurse Anesthetist	WHPS	1	2	3	1
Chemical Dependency Professional/Trainee	WRAMP	110	5	115	47
Chiropractor	WRAMP	4	1	5	0
Counselor, Agency Affiliated	WRAMP	11	1	12	5
Counselor, Certified	WRAMP	2	0	2	0
Dental Assistant	WRAMP	13	0	13	0
Dental Hygienist	WRAMP	3	0	3	0
Dentist	WPHP	14	1	15	4
Dispensing Optician	WRAMP	1	1	2	0
Emergency Medical Technician	WRAMP	7	1	8	5
Home Care Aide	WRAMP	6	0	6	1
Licensed Practical Nurse	WHPS	36	15	51	11
Marriage and Family Therapist/Associate	WRAMP	3	0	3	0
Massage Practitioner	WRAMP	5	0	5	1
Medical Assistant/Health Care Assistant	WRAMP	19	1	20	4
Mental Health Counselor/Associate	WRAMP	4	0	4	0
Nursing Assistant	WRAMP	36	1	37	5
Occupational Therapist/Assistant	WRAMP	3	1	4	0
Osteopathic Physician	WPHP	6	0	6	10
Paramedic	WRAMP	5	2	7	1
Pharmacist/Technician/Intern	WRAPP	59	68	127	16
Physical Therapist/Assistant	WRAMP	6	1	7	1
Physician	WPHP	115	2	117	97
Physician Assistant	WPHP	16	0	16	11
Podiatric Physician	WPHP	1	0	1	1
Psychologist	WRAMP	4	1	5	1
Radiological Technologist	WRAMP	4	3	7	1
Registered Nurse	WHPS	281	140	421	101
Respiratory Care Practitioner	WRAMP	2	0	2	1
Social Worker	WRAMP	2	0	2	0
Speech Language Pathologist	WRAMP	1	0	1	0

Profession	Program	Total Mandated	Total Voluntary*	Total Enrolled in Biennium	Successful Completions
Surgical Technologist	WRAMP	3	1	4	1
Veterinarian	WPHP	2	1	3	5
Veterinary Technician/Medication Clerk	WRAMP	2	0	2	1
X-Ray Technician	WRAMP	2	0	2	0
Totals		804	254	1058	336

* Includes Voluntary and In-lieu of Discipline enrollments

**Appendix D: Distribution of Staff Attorney Workload
2013-15 Biennium**

Profession	Attorney											
	1	2	3	4	5	6	7	8	9	10	11	12
Advanced Emergency Medical Technician	0	0	0	0	0	2	0	0	0	0	0	0
Advanced Registered Nurse Practitioner	33	11	15	0	1	5	0	0	0	0	0	0
Animal Massage Practitioner	0	0	0	0	0	0	0	0	0	1	0	0
Athletic Trainer	0	0	0	0	0	0	0	0	0	0	0	0
Audiologist	0	0	0	0	0	0	0	0	0	1	0	0
Cardiovascular Invasive Specialist	0	0	0	0	1	0	0	0	0	0	0	0
Chemical Dependency Professional	2	1	3	6	0	2	2	2	5	3	9	0
Chemical Dependency Professional Trainee	10	4	6	3	0	7	4	9	14	4	27	1
Chiropractic X-Ray Technician	0	0	0	1	0	0	0	0	0	0	0	0
Chiropractor	0	2	0	9	1	35	0	147	0	42	0	0
Counselor, Agency Affiliated	1	1	3	4	0	2	0	3	4	1	5	0
Counselor, Certified	1	0	0	3	0	0	0	0	3	2	2	0
Counselor, Certified Advisor	0	0	0	0	1	0	0	0	0	0	0	0
Dental Anesthesia Assistant	0	0	0	0	1	0	0	0	0	0	0	0
Dental Assistant	2	0	1	10	0	0	0	0	0	9	6	0
Dental Hygienist	0	0	0	7	0	0	0	0	0	1	0	0
Dentist	1	0	1	49	0	0	4	0	1	53	3	0
Denturist	0	0	0	2	0	0	1	0	1	0	1	0
Dietitian/Nutritionist	0	0	0	0	1	0	0	0	0	0	0	0
Dispensing Optician	0	0	0	1	0	0	0	0	0	1	0	0
Dispensing Optician Apprentice	0	0	0	0	1	0	0	0	0	0	0	0
East Asian Medicine Practitioner	0	0	1	22	0	1	1	0	1	3	1	0
Emergency Medical Responder	0	0	0	0	1	0	0	0	0	0	0	0
Emergency Medical Technician	1	0	4	1	1	10	0	1	33	0	0	0
Expanded Function Dental Auxiliary	0	0	0	0	0	0	0	0	0	1	0	0
Genetic Counselor	0	0	0	0	1	0	0	0	0	0	0	0
Health Care Assistant	4	0	0	3	0	2	0	1	8	1	2	1
Hearing Aid Specialist	0	0	0	0	1	0	0	0	0	0	0	0
Hearing Aid Specialist	0	0	0	0	1	0	0	0	0	0	0	0
Home Care Aide	4	2	0	2	4	4	1	5	8	0	0	3
Humane Society	0	0	0	0	0	0	0	0	1	0	0	0
Hypnotherapist	0	0	0	0	0	0	1	0	1	0	0	0
Licensed Practical Nurse	56	35	4	1	0	9	0	0	5	0	0	0
Marriage and Family Therapist	1	0	0	0	0	1	1	0	1	1	0	0
Marriage and Family Therapist Associate	0	0	0	1	0	0	0	0	0	0	0	0
Massage Practitioner	5	0	0	16	0	42	22	2	14	26	2	31
Medical Assistant	4	0	3	3	0	2	4	0	12	2	15	6
Mental Health Counselor	2	0	5	5	0	0	3	1	5	3	0	3
Mental Health Counselor Associate	1	0	0	0	0	0	0	0	1	1	0	0
Midwife	0	0	0	0	1	0	0	0	0	2	0	0
Naturopathic Physician	0	0	0	0	1	8	0	0	0	0	0	0

Profession	1	2	3	4	5	6	7	8	9	10	11	12
Nursing Assistant	104	21	4	66	3	35	24	28	228	2	1	37
Nursing Home Administrator	0	0	0	0	0	0	0	0	0	0	0	0
Nursing Pool Operator	0	0	0	0	1	0	0	0	0	0	0	0
Nursing Technician	0	0	0	0	1	0	0	0	0	0	0	0
Occupational Therapist	0	0	0	7	0	0	0	0	24	0	1	2
Occupational Therapy Assistant	0	0	0	3	0	0	0	0	9	0	0	0
Ocularist	0	0	0	0	1	0	0	0	0	0	0	0
Optometrist	0	0	0	1	0	1	0	0	0	0	0	0
Orthotist/Prosthetist	0	0	0	0	0	0	0	0	0	0	0	0
Osteopathic Physician	0	0	0	0	0	14	0	0	22	2	0	0
Osteopathic Physician Assistant	0	0	0	1	0	0	0	0	3	0	0	0
Paramedic	0	0	3	0	0	4	0	0	18	0	0	0
Pharmacies and Other Pharmaceutical Firms	0	0	0	0	0	0	5	39	0	36	0	0
Pharmacist	1	0	0	11	0	0	20	108	0	94	0	0
Pharmacist Intern	0	0	0	0	0	0	0	3	0	2	0	0
Pharmacy Assistant	0	0	0	0	0	1	6	28	0	21	0	0
Pharmacy Technician	0	0	0	0	0	0	6	52	0	27	0	0
Physical Therapist	0	0	0	7	0	0	0	0	45	0	3	4
Physical Therapist Assistant	0	0	0	11	0	0	0	0	21	0	5	1
Physician	0	0	0	3	0	1	0	0	1	6	0	0
Physician Assistant	0	0	0	0	1	0	0	0	0	0	0	0
Podiatric Physician	0	3	0	0	1	0	0	0	1	0	0	0
Psychologist	1	0	18	1	2	0	0	0	0	1	0	7
Radiological Technologist	0	0	0	0	0	0	0	1	1	0	0	0
Radiologist Assistant	0	0	0	0	1	0	0	0	0	0	0	0
Recreational Therapist	0	0	0	0	0	0	0	0	0	0	0	0
Reflexologist	0	0	0	0	0	1	1	0	0	0	0	0
Registered Nurse	248	121	50	0	5	36	0	0	8	3	0	0
Respiratory Care Practitioner	1	1	0	0	0	0	0	1	1	0	1	0
Retired Volunteer Medical Worker	0	0	0	0	1	0	0	0	0	0	0	0
Sex Offender Treatment Provider and Affiliate	0	0	1	2	0	0	0	0	0	1	0	0
Social Worker Advanced	0	0	0	0	1	0	0	0	0	0	0	0
Social Worker Associate Advanced	0	0	0	0	0	0	0	0	0	0	0	0
Social Worker Associate Independent	0	0	0	0	0	0	0	1	1	0	0	0
Social Worker Independent Clinical	0	2	0	2	0	0	0	0	0	0	1	2
Speech Language Pathologist	0	0	0	1	0	0	0	0	0	0	0	0
Speech Language Pathology Assistant	0	0	0	0	1	0	0	0	0	0	0	0
Surgical Technologist	0	0	0	0	0	0	1	0	2	0	0	0
Veterinarian	0	0	0	0	0	1	0	0	91	8	0	0
Veterinary Medication Clerk	0	0	0	0	0	0	0	0	0	0	0	0
Veterinary Technician	0	0	0	0	0	0	0	0	7	0	0	0
X-Ray Technician	0	0	0	1	0	1	0	0	1	1	3	2
Totals	483	204	122	266	37	227	107	432	602	362	88	100
Months Worked In Biennium	24	24	24	24	10	24	24	24	24	24	24	24

Profession	13	14	15	16	18	19	20	21	22	23	24
Advanced Emergency Medical Technician	0	0	0	0	0	0	0	0	0	0	0
Advanced Registered Nurse Practitioner	5	0	22	14	0	11	8	0	0	0	0
Animal Massage Practitioner	0	0	0	0	0	0	0	0	0	0	0
Athletic Trainer	1	0	0	0	0	0	1	0	0	0	0
Audiologist	0	0	1	0	0	1	0	0	0	0	5
Cardiovascular Invasive Specialist	0	0	0	0	1	0	0	0	0	0	0
Chemical Dependency Professional	3	7	4	5	45	7	4	4	0	7	12
Chemical Dependency Professional Trainee	6	18	8	6	29	14	8	10	1	9	10
Chiropractic X-Ray Technician	0	0	0	0	0	0	0	0	0	0	0
Chiropractor	0	28	0	1	0	1	0	10	0	0	18
Counselor, Agency Affiliated	4	3	6	3	17	15	3	3	2	9	9
Counselor, Certified	1	2	0	3	7	2	0	0	0	2	2
Counselor, Certified Advisor	0	0	0	0	1	0	0	0	0	0	0
Dental Anesthesia Assistant	0	0	0	0	1	0	0	0	0	0	0
Dental Assistant	0	15	0	1	0	0	0	5	14	0	10
Dental Hygienist	0	7	0	0	0	1	0	4	6	0	0
Dentist	0	77	0	1	1	0	0	21	121	0	20
Denturist	0	11	0	0	0	0	0	12	23	0	0
Dietitian/Nutritionist	0	0	0	0	1	0	0	0	0	0	0
Dispensing Optician	0	0	0	0	1	4	0	0	2	0	0
Dispensing Optician Apprentice	0	0	0	0	1	0	0	0	0	0	0
East Asian Medicine Practitioner	0	1	0	0	0	5	0	5	5	1	0
Emergency Medical Responder	0	0	0	0	1	0	0	0	0	0	0
Emergency Medical Technician	0	8	0	0	0	0	0	1	1	0	1
Expanded Function Dental Auxiliary	0	0	0	0	0	0	0	0	0	0	0
Genetic Counselor	0	0	0	0	1	0	0	0	0	0	0
Health Care Assistant	1	2	0	4	1	0	0	0	0	2	10
Hearing Aid Specialist	0	0	0	0	1	0	0	0	0	0	0
Hearing Aid Specialist	0	0	0	0	1	0	0	0	0	0	0
Home Care Aide	6	13	1	1	1	2	0	15	0	2	2
Humane Society	0	0	0	0	0	0	0	0	0	0	0
Hypnotherapist	0	1	2	1	2	0	0	0	0	0	0
Licensed Practical Nurse	15	2	27	11	0	28	19	2	0	0	0
Marriage and Family Therapist	0	2	2	1	8	3	2	0	0	3	2
Marriage and Family Therapist Associate	0	0	1	3	1	1	1	2	0	0	0
Massage Practitioner	4	22	5	1	54	14	30	16	17	33	5
Medical Assistant	1	4	4	0	5	19	7	15	0	16	6
Mental Health Counselor	8	3	6	3	22	14	5	3	0	3	9
Mental Health Counselor Associate	0	0	2	1	2	1	0	0	0	1	5
Midwife	0	7	1	5	0	6	0	1	1	0	0
Naturopathic Physician	0	95	0	0	0	1	0	29	1	8	4
Nursing Assistant	95	107	7	41	6	3	0	196	1	2	7

Profession	13	14	15	16	18	19	20	21	22	23	24
Nursing Home Administrator	1	0	105	0	0	0	0	0	0	0	123
Nursing Pool Operator	0	0	0	0	1	0	0	0	0	0	0
Nursing Technician	0	0	0	0	1	0	0	0	0	0	0
Occupational Therapist	0	0	0	0	19	0	0	0	0	0	0
Occupational Therapy Assistant	0	0	0	0	7	0	0	0	0	0	0
Ocularist	0	0	0	0	1	0	0	0	0	0	0
Optometrist	0	2	0	0	0	38	0	0	3	0	0
Orthotist/Prosthetist	0	0	0	0	0	0	0	0	0	0	2
Osteopathic Physician	0	1	1	0	18	82	0	0	0	0	140
Osteopathic Physician Assistant	0	0	0	0	1	1	0	0	0	0	4
Paramedic	0	0	0	0	0	0	0	1	0	0	0
Pharmacies and Other Pharmaceutical Firms	20	1	17	2	0	0	0	0	0	0	0
Pharmacist	56	0	39	14	0	0	0	1	0	0	0
Pharmacist Intern	1	0	0	1	0	0	0	0	0	0	0
Pharmacy Assistant	10	1	17	3	0	0	0	1	0	0	0
Pharmacy Technician	16	0	14	2	0	0	0	0	0	0	0
Physical Therapist	0	0	0	0	20	0	0	0	0	0	0
Physical Therapist Assistant	0	1	0	0	5	0	0	1	1	0	0
Physician	0	2	0	2	2	1	1	2	4	3	2
Physician Assistant	0	0	0	0	1	0	0	0	0	0	0
Podiatric Physician	0	0	14	0	1	0	0	0	0	20	0
Psychologist	0	0	0	31	1	0	0	0	0	46	12
Radiological Technologist	1	0	0	0	0	0	0	1	0	1	1
Radiologist Assistant	0	0	0	0	1	0	0	0	0	0	0
Recreational Therapist	0	0	0	0	0	0	0	0	0	0	1
Reflexologist	0	0	0	0	1	0	1	0	0	0	0
Registered Nurse	60	8	138	30	0	63	54	13	0	0	0
Respiratory Care Practitioner	1	0	5	0	1	0	0	0	0	1	5
Retired Volunteer Medical Worker	0	0	0	0	1	0	0	0	0	0	0
Sex Offender Treatment Provider	0	0	1	0	1	0	0	0	0	2	1
Social Worker Advanced	0	0	0	0	1	0	0	0	0	0	0
Social Worker Associate Advanced	1	0	0	0	0	0	0	0	0	0	0
Social Worker Associate Independent	0	0	1	0	2	0	0	0	0	0	6
Social Worker Independent Clinical	4	0	0	1	17	2	0	1	0	1	12
Speech Language Pathologist	0	1	2	1	0	8	0	0	0	0	12
Speech Language Pathology Assistant	0	0	0	0	1	0	0	0	0	0	0
Surgical Technologist	0	0	0	1	2	2	0	0	0	5	1
Veterinarian	36	0	32	0	13	0	33	0	4	0	0
Veterinary Medication Clerk	0	0	1	0	1	0	2	1	0	0	0
Veterinary Technician	2	0	4	0	0	1	2	0	0	0	0
X-Ray Technician	0	0	0	0	0	2	0	0	0	2	3
Totals	359	452	490	194	331	353	181	376	207	179	462
Months Worked In Biennium	24	24	24	24	24	24	24	24	24	24	24

***Appendix E: Distribution of Investigator Workload
2013-15 Biennium***

	Investigator														
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Advanced Emergency Medical Technician	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Advanced Registered Nurse Practitioner	0	0	0	0	1	0	0	0	0	0	27	0	0	0	0
Animal Massage Practitioner	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Athletic Trainer	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Audiologist	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0
Cardiovascular Invasive Specialist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Chemical Dependency Professional	15	2	1	12	0	1	0	0	12	0	0	1	0	0	0
Chemical Dependency Professional Trainee	2	2	0	1	0	0	0	0	3	0	0	1	0	0	0
Chiropractic X-Ray Technician	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Chiropractor	8	1	6	3	0	9	0	0	13	0	0	0	0	0	0
Counselor, Agency Affiliated	3	0	4	2	0	0	0	0	8	0	0	1	0	0	0
Counselor, Certified	0	1	0	1	0	1	0	0	0	0	0	0	0	0	0
Counselor, Certified Advisor	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Dental Anesthesia Assistant	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Dental Assistant	1	7	0	1	0	0	1	0	1	0	0	0	0	0	0
Dental Hygienist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Dentist	2	25	6	2	0	3	2	0	20	0	0	0	0	0	0
Denturist	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0
Dietitian/Nutritionist	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0
Dispensing Optician	6	0	1	0	0	0	0	0	0	0	0	0	0	0	0
Dispensing Optician Apprentice	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
East Asian Medicine Practitioner	0	1	1	2	0	0	0	0	0	0	0	0	0	0	0
Emergency Medical Responder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Emergency Medical Technician	0	3	0	1	0	0	0	0	1	0	0	0	0	0	0
Expanded Function Dental Auxiliary	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Genetic Counselor	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Health Care Assistant	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Hearing Aid Specialist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Hearing Aid Specialist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Home Care Aide	1	2	0	1	0	0	0	0	10	0	0	0	0	0	0
Humane Society	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Hypnotherapist	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0
Licensed Practical Nurse	0	0	0	1	15	0	0	0	0	0	23	0	0	0	0
Marriage and Family Therapist	3	0	1	3	0	0	0	0	0	0	0	0	0	0	0

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Marriage and Family Therapist Associate	0	0	0	1	0	0	0	0	2	0	0	0	0	0	0
Massage Practitioner	3	5	67	5	0	0	1	0	78	0	0	1	0	0	0
Medical Assistant	8	7	2	6	0	1	1	0	12	0	0	2	0	0	0
Mental Health Counselor	5	2	2	0	0	6	0	0	4	0	0	0	0	0	0
Mental Health Counselor Associate	0	0	2	0	0	1	0	0	0	0	0	0	0	0	0
Midwife	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Naturopathic Physician	18	1	1	2	0	2	0	0	4	0	0	0	0	0	0
Nursing Assistant	13	27	20	37	0	8	1	0	104	0	0	7	0	0	0
Nursing Home Administrator	1	1	0	0	0	2	0	0	3	0	0	1	0	0	0
Nursing Pool Operator	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Nursing Technician	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Occupational Therapist	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0
Occupational Therapy Assistant	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0
Ocularist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Optometrist	1	0	0	0	0	2	0	0	2	0	0	0	0	0	0
Orthotist/Prosthetist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Osteopathic Physician	8	1	3	0	0	5	1	0	5	0	0	0	0	0	0
Osteopathic Physician Assistant	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0
Paramedic	4	0	0	0	0	0	0	0	4	0	0	0	0	0	0
Pharmacies and Other Pharmaceutical Firms	0	1	0	0	0	1	0	0	1	0	0	0	4	23	0
Pharmacist	0	0	0	0	0	0	0	0	0	0	0	0	17	61	0
Pharmacist Intern	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0
Pharmacy Assistant	0	0	0	0	0	0	0	0	0	0	0	0	5	8	0
Pharmacy Technician	0	0	0	0	0	1	0	0	0	0	0	0	5	8	0
Physical Therapist	1	1	2	0	0	1	0	0	3	0	0	2	0	0	0
Physical Therapist Assistant	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Physician	4	0	1	0	0	0	0	0	1	33	0	0	0	0	104
Physician Assistant	0	0	0	0	0	0	0	0	1	2	0	0	0	0	8
Podiatric Physician	1	1	0	0	0	1	0	0	1	0	0	0	0	0	0
Psychologist	3	3	1	1	0	9	0	0	0	0	0	0	0	0	0
Radiological Technologist	0	0	0	2	0	0	0	0	1	0	0	0	0	0	0
Radiologist Assistant	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Recreational Therapist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Reflexologist	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0
Registered Nurse	2	0	1	0	41	0	0	2	0	0	123	0	0	0	0
Respiratory Care Practitioner	0	0	0	0	0	0	0	0	3	0	0	0	0	0	0
Retired Volunteer Medical Worker	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sex Offender Treatment Provider and Affiliate	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Social Worker Advanced	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Social Worker Associate Advanced	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Social Worker Associate Independent	0	0	0	2	0	0	0	0	3	0	0	1	0	0	0
Social Worker Independent Clinical	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0
Speech Language Pathologist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Speech Language Pathology Assistant	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Surgical Technologist	2	0	0	1	0	0	0	0	1	0	0	0	0	0	0
Veterinarian	5	0	5	0	0	0	0	0	5	0	0	0	0	0	0
Veterinary Medication Clerk	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Veterinary Technician	0	1	0	0	0	0	0	0	4	0	0	0	0	0	0
X-Ray Technician	0	0	1	0	0	0	0	0	3	0	0	0	0	0	0
Grand Total	120	97	129	88	57	56	7	2	319	35	173	18	31	101	112
Months Worked	24	24	24	10	8	24	5	1	24	24	15	10	18	24	14

	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
Advanced Emergency Medical Technician	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Advanced Registered Nurse Practitioner	0	0	0	0	0	0	0	0	0	0	4	23	0	0	0
Animal Massage Practitioner	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0
Athletic Trainer	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Audiologist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Cardiovascular Invasive Specialist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Chemical Dependency Professional	1	0	0	23	6	0	0	3	4	7	0	0	0	4	17
Chemical Dependency Professional Trainee	0	0	0	10	3	0	0	0	1	1	0	0	0	0	10
Chiropractic X-Ray Technician	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Chiropractor	4	0	0	7	1	0	0	4	3	5	0	0	0	5	11
Counselor, Agency Affiliated	0	0	0	11	3	0	0	3	3	0	0	0	0	3	2
Counselor, Certified	0	0	0	3	1	0	0	0	1	0	0	0	0	0	2
Counselor, Certified Advisor	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0
Dental Anesthesia Assistant	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Dental Assistant	0	0	0	0	2	0	0	0	1	4	0	0	0	0	4
Dental Hygienist	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0
Dentist	9	0	0	15	6	0	0	7	11	22	0	0	0	8	20
Denturist	1	0	0	0	3	0	0	1	2	2	0	0	0	1	2
Dietitian/Nutritionist	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0
Dispensing Optician	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0
Dispensing Optician Apprentice	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
East Asian Medicine Practitioner	0	0	0	0	3	0	0	0	2	1	0	0	0	0	4
Emergency Medical Responder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Emergency Medical Technician	0	0	0	0	1	0	0	0	0	1	0	0	0	1	6
Expanded Function Dental Auxiliary	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Genetic Counselor	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Health Care Assistant	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Hearing Aid Specialist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Home Care Aide	12	0	0	4	8	0	0	1	2	1	0	0	0	4	5
Humane Society	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Hypnotherapist	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0
Licensed Practical Nurse	0	0	0	0	0	0	0	0	0	0	15	18	0	0	0
Marriage and Family Therapist	0	0	0	12	0	0	0	0	1	2	0	0	0	1	0
Marriage and Family Therapist Associate	0	0	0	1	0	0	0	0	0	4	0	0	0	0	0
Massage Practitioner	4	0	0	3	12	0	0	3	2	4	0	0	0	3	7
Medical Assistant	7	0	0	1	10	0	0	8	3	3	0	0	0	4	9
Mental Health Counselor	1	0	0	33	0	0	0	3	13	0	0	0	0	1	11
Mental Health Counselor Associate	0	0	0	6	0	0	0	0	2	0	0	0	0	0	1
Midwife	0	0	0	0	0	0	0	0	9	0	0	0	0	0	2

	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
Naturopathic Physician	0	0	0	1	1	0	0	0	7	5	0	0	0	0	3
Nursing Assistant	164	0	0	24	62	0	0	35	58	26	0	0	0	40	49
Nursing Home Administrator	0	0	0	3	2	0	0	3	2	3	0	0	0	1	5
Nursing Pool Operator	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Nursing Technician	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Occupational Therapist	0	0	0	1	4	0	0	0	0	0	0	0	0	2	3
Occupational Therapy Assistant	0	0	0	0	1	0	0	0	0	0	0	0	0	1	1
Ocularist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Optometrist	0	0	0	1	1	0	0	0	0	0	0	0	0	1	2
Orthotist/Prosthetist	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0
Osteopathic Physician	3	0	0	4	5	0	0	2	3	0	0	0	0	0	8
Osteopathic Physician Assistant	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Paramedic	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Pharmacies and Other Pharmaceutical Firms	0	0	0	0	0	41	1	0	0	0	0	0	0	0	0
Pharmacist	0	0	0	0	0	37	15	0	0	0	0	0	0	0	0
Pharmacist Intern	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0
Pharmacy Assistant	0	0	0	0	0	7	1	0	0	0	0	0	0	0	0
Pharmacy Technician	0	0	0	0	1	3	1	0	0	0	0	0	0	0	0
Physical Therapist	1	0	0	0	0	0	0	3	0	0	0	0	0	2	3
Physical Therapist Assistant	0	0	0	1	0	0	0	0	3	0	0	0	0	0	3
Physician	0	205	5	0	0	0	0	2	0	0	0	0	14	0	1
Physician Assistant	0	13	1	0	0	0	0	0	0	0	0	0	1	0	0
Podiatric Physician	0	0	0	0	1	0	0	1	1	0	0	0	0	2	4
Psychologist	0	0	0	20	1	0	0	0	4	1	0	0	0	1	1
Radiological Technologist	1	0	0	0	0	0	0	0	1	0	0	0	0	0	0
Radiologist Assistant	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Recreational Therapist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Reflexologist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Registered Nurse	0	0	0	0	0	0	0	0	0	1	41	99	0	0	0
Respiratory Care Practitioner	1	0	0	0	1	0	0	1	0	0	0	0	0	0	1
Retired Volunteer Medical Worker	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sex Offender Treatment Provider and Affiliate	0	0	0	5	0	0	0	0	0	0	0	0	0	0	0
Social Worker Advanced	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Social Worker Associate Advanced	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Social Worker Associate Independent	0	0	0	4	0	0	0	1	1	1	0	0	0	0	4
Social Worker Independent Clinical	0	0	0	10	0	0	0	4	4	1	0	0	0	0	0
Speech Language Pathologist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Speech Language Pathology Assistant	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Surgical Technologist	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0

	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
Veterinarian	2	0	0	2	5	0	0	4	5	1	0	0	0	5	4
Veterinary Medication Clerk	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Veterinary Technician	0	0	0	0	0	0	0	1	1	0	0	0	0	2	0
X-Ray Technician	0	0	0	1	1	0	0	1	0	0	0	0	0	0	0
Grand Total	211	218	6	209	147	88	19	92	154	100	60	140	15	92	210
Months Worked	24	24	3	24	3	24	24	15	21	24	8	24	24	19	24

	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45
Advanced Emergency Medical Technician	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Advanced Registered Nurse Practitioner	0	0	0	0	0	0	19	0	0	0	0	0	0	0	0
Animal Massage Practitioner	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Athletic Trainer	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0
Audiologist	0	0	0	0	0	0	0	0	1	0	1	0	0	0	0
Cardiovascular Invasive Specialist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Chemical Dependency Professional	6	9	2	0	0	2	0	2	1	9	10	0	0	6	0
Chemical Dependency Professional Trainee	3	6	3	0	0	3	0	0	0	4	0	0	0	1	0
Chiropractic X-Ray Technician	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Chiropractor	2	4	4	0	0	6	0	9	2	10	9	0	0	6	0
Counselor, Agency Affiliated	1	5	4	0	0	0	0	1	0	6	3	0	0	2	0
Counselor, Certified	0	1	0	0	0	0	0	1	0	2	0	0	0	0	0
Counselor, Certified Advisor	0	1	0	0	0	0	0	0	0	0	1	0	0	0	0
Dental Anesthesia Assistant	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Dental Assistant	0	0	0	0	0	3	0	0	6	4	1	0	0	2	0
Dental Hygienist	0	0	0	0	0	1	0	1	1	0	0	0	0	0	0
Dentist	2	21	4	0	0	11	0	12	12	29	6	0	0	4	0
Denturist	0	2	2	0	0	0	0	2	1	3	0	0	0	0	0
Dietitian/Nutritionist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Dispensing Optician	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Dispensing Optician Apprentice	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
East Asian Medicine Practitioner	0	1	1	0	0	1	0	0	0	3	3	0	0	0	0
Emergency Medical Responder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Emergency Medical Technician	0	10	4	0	0	3	0	2	1	3	3	0	0	0	0
Expanded Function Dental Auxiliary	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Genetic Counselor	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Health Care Assistant	1	0	0	0	0	1	0	1	0	0	0	0	0	0	0
Hearing Aid Specialist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Home Care Aide	1	6	9	0	0	9	0	6	4	7	7	0	0	3	0
Humane Society	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Hypnotherapist	0	1	1	0	0	0	0	0	0	0	0	0	0	0	0
Licensed Practical Nurse	0	1	0	0	0	1	25	0	0	0	0	0	0	0	0
Marriage and Family Therapist	0	1	0	0	0	0	0	0	0	0	1	0	0	0	0
Marriage and Family Therapist Associate	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0
Massage Practitioner	21	7	35	0	0	30	0	4	14	6	4	0	0	46	0
Medical Assistant	4	5	10	0	0	8	0	10	2	10	2	0	0	4	0
Mental Health Counselor	3	5	1	0	0	1	0	11	2	6	5	0	0	0	0
Mental Health Counselor Associate	2	1	0	0	0	0	0	0	0	0	1	0	0	0	0
Midwife	6	1	0	0	0	0	0	1	0	0	0	0	0	0	0

	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45
Naturopathic Physician	1	3	1	0	0	0	0	1	1	0	2	0	0	0	0
Nursing Assistant	18	42	61	0	0	83	0	39	51	66	55	0	0	33	0
Nursing Home Administrator	3	0	2	0	0	4	0	0	1	2	1	0	0	0	0
Nursing Pool Operator	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Nursing Technician	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Occupational Therapist	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0
Occupational Therapy Assistant	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0
Ocularist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Optometrist	1	0	0	0	0	0	0	1	0	1	0	0	0	0	0
Orthotist/Prosthetist	0	0	0	0	0	0	0	0	4	0	0	0	0	0	0
Osteopathic Physician	13	5	3	0	0	1	0	7	2	10	0	0	0	1	0
Osteopathic Physician Assistant	0	0	0	0	0	1	0	0	1	0	0	0	0	0	0
Paramedic	0	3	0	0	0	0	0	2	0	1	0	0	0	1	0
Pharmacies and Other Pharmaceutical Firms	1	1	0	0	0	0	0	1	0	0	0	0	7	0	6
Pharmacist	0	0	0	0	0	0	0	0	0	0	0	4	28	0	11
Pharmacist Intern	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Pharmacy Assistant	0	0	0	0	0	0	0	0	0	0	0	1	10	0	0
Pharmacy Technician	0	0	0	0	0	0	0	0	0	0	0	3	14	0	1
Physical Therapist	0	2	2	0	0	0	0	0	1	4	4	0	0	0	0
Physical Therapist Assistant	0	0	3	0	0	3	0	1	0	1	0	0	0	0	0
Physician	3	2	0	219	70	0	0	0	1	0	0	0	0	2	0
Physician Assistant	1	0	0	8	2	0	0	0	0	0	0	0	0	0	0
Podiatric Physician	4	0	1	0	0	0	0	1	1	2	1	0	0	0	0
Psychologist	1	2	1	0	0	1	0	0	0	6	0	0	0	1	0
Radiological Technologist	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0
Radiologist Assistant	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Recreational Therapist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Reflexologist	0	0	0	0	0	0	0	0	0	2	0	0	0	1	0
Registered Nurse	2	1	0	0	0	0	116	0	0	0	1	0	0	0	0
Respiratory Care Practitioner	0	0	4	0	0	0	0	2	0	0	4	0	0	0	0
Retired Volunteer Medical Worker	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sex Offender Treatment Provider and Affiliate	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0
Social Worker Advanced	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Social Worker Associate Advanced	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Social Worker Associate Independent	0	0	0	0	0	0	0	0	0	2	0	0	0	0	0
Social Worker Independent Clinical	0	1	1	0	0	0	0	0	0	5	1	0	0	3	0
Speech Language Pathologist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Speech Language Pathology Assistant	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Surgical Technologist	0	0	4	0	0	0	0	1	0	1	0	0	0	0	0

	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45
Veterinarian	0	2	4	0	0	1	0	3	2	2	1	0	0	5	0
Veterinary Medication Clerk	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0
Veterinary Technician	0	0	0	0	0	0	0	0	2	0	1	0	0	0	0
X-Ray Technician	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0
Grand Total	100	155	167	227	72	175	160	125	114	208	129	8	59	121	18
Months Worked	24	24	16	24	12	24	24	24	24	24	24	4	24	24	24

	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60
Advanced Emergency Medical Technician	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0
Advanced Registered Nurse Practitioner	0	0	0	10	0	0	0	14	0	0	0	0	8	1	0
Animal Massage Practitioner	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0
Athletic Trainer	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Audiologist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Cardiovascular Invasive Specialist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Chemical Dependency Professional	0	0	2	0	0	0	0	0	3	6	0	2	0	1	0
Chemical Dependency Professional Trainee	0	0	2	0	1	0	0	0	0	0	0	0	0	0	0
Chiropractic X-Ray Technician	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Chiropractor	2	0	7	0	8	0	0	0	9	11	0	10	0	1	0
Counselor, Agency Affiliated	0	0	7	0	1	0	0	0	2	0	0	3	0	0	0
Counselor, Certified	0	0	1	0	2	0	0	0	1	0	0	1	0	0	0
Counselor, Certified Advisor	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Dental Anesthesia Assistant	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Dental Assistant	0	0	1	0	0	0	0	0	4	6	0	1	0	0	0
Dental Hygienist	0	0	0	0	0	0	0	0	3	0	0	3	0	0	0
Dentist	0	0	25	0	14	0	0	0	47	27	0	27	0	0	0
Denturist	0	0	0	0	0	0	0	0	1	3	0	2	0	0	0
Dietitian/Nutritionist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Dispensing Optician	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Dispensing Optician Apprentice	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
East Asian Medicine Practitioner	0	0	1	0	2	0	0	0	0	0	0	1	0	0	0
Emergency Medical Responder	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Emergency Medical Technician	0	0	5	0	1	0	0	0	0	1	0	1	0	0	0
Expanded Function Dental Auxiliary	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Genetic Counselor	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Health Care Assistant	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Hearing Aid Specialist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Home Care Aide	0	0	10	0	2	0	0	0	9	3	0	1	0	2	0
Humane Society	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Hypnotherapist	0	0	0	0	1	0	0	0	0	1	0	0	0	0	0
Licensed Practical Nurse	0	0	0	28	0	0	0	27	0	0	0	0	16	1	0
Marriage and Family Therapist	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0
Marriage and Family Therapist Associate	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Massage Practitioner	2	0	13	0	2	0	0	0	7	2	0	0	0	26	0
Medical Assistant	0	0	10	0	2	0	0	0	2	1	0	17	0	0	0
Mental Health Counselor	0	0	5	0	3	0	0	0	1	4	0	1	0	0	0
Mental Health Counselor Associate	0	0	0	0	0	0	0	0	0	3	0	0	0	0	0
Midwife	0	0	0	0	0	0	0	0	3	0	0	2	0	0	0

	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60
Naturopathic Physician	0	0	0	0	2	0	0	0	0	2	0	0	0	5	0
Nursing Assistant	1	0	89	0	27	0	0	0	23	4	0	20	0	9	0
Nursing Home Administrator	0	0	2	0	7	0	0	0	2	0	0	0	0	1	0
Nursing Pool Operator	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Nursing Technician	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Occupational Therapist	0	0	0	0	2	0	0	0	0	2	0	0	0	0	0
Occupational Therapy Assistant	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0
Ocularist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Optometrist	0	0	0	0	0	0	0	0	2	0	0	1	0	0	0
Orthotist/Prosthetist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Osteopathic Physician	0	0	4	0	16	0	0	0	9	0	0	3	0	0	0
Osteopathic Physician Assistant	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Paramedic	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0
Pharmacies and Other Pharmaceutical Firms	0	1	2	0	1	7	0	0	0	0	47	0	0	1	0
Pharmacist	0	2	0	0	0	9	0	0	0	0	33	0	0	1	0
Pharmacist Intern	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0
Pharmacy Assistant	0	0	0	0	0	3	0	0	0	0	6	0	0	1	0
Pharmacy Technician	0	0	0	0	0	5	0	0	0	0	7	0	0	0	0
Physical Therapist	0	0	3	0	0	0	0	0	11	0	0	0	0	0	0
Physical Therapist Assistant	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Physician	0	0	0	1	1	0	174	0	0	0	0	1	0	135	168
Physician Assistant	0	0	0	0	0	0	12	0	0	0	0	1	0	8	24
Podiatric Physician	0	0	0	0	0	0	0	0	0	0	0	2	0	0	0
Psychologist	0	0	1	0	0	0	0	0	0	0	0	4	0	1	0
Radiological Technologist	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0
Radiologist Assistant	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Recreational Therapist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Reflexologist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Registered Nurse	0	0	1	93	1	0	0	118	0	0	0	0	93	1	1
Respiratory Care Practitioner	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0
Retired Volunteer Medical Worker	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sex Offender Treatment Provider and Affiliate	0	0	0	0	3	0	0	0	0	1	0	1	0	0	0
Social Worker Advanced	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0
Social Worker Associate Advanced	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0
Social Worker Associate Independent	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0
Social Worker Independent Clinical	0	0	2	0	0	0	0	0	3	1	0	0	0	0	0
Speech Language Pathologist	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Speech Language Pathology Assistant	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Surgical Technologist	0	0	1	0	0	0	0	0	2	1	0	0	0	0	0

	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60
Veterinarian	0	0	5	0	15	0	0	0	5	0	0	6	0	1	0
Veterinary Medication Clerk	0	0	0	0	2	0	0	0	1	0	0	0	0	0	0
Veterinary Technician	0	0	1	0	1	0	0	0	1	0	0	0	0	0	0
X-Ray Technician	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0
Grand Total	5	3	203	132	118	25	186	159	155	80	94	116	117	196	193
Months Worked	3	23	24	24	24	3	24	24	24	24	24	24	24	24	24

	61	62	63	64	65	66	67	68	69	70	71	72	73	74
Advanced Emergency Medical Technician	0	0	0	0	0	0	0	0	0	0	0	1	0	0
Advanced Registered Nurse Practitioner	14	0	0	0	0	0	0	0	1	0	0	0	3	0
Animal Massage Practitioner	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Athletic Trainer	0	2	0	0	1	0	0	0	0	0	0	1	0	0
Audiologist	0	0	0	0	0	0	1	0	0	0	0	0	0	0
Cardiovascular Invasive Specialist	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Chemical Dependency Professional	0	13	0	0	5	0	7	8	4	0	0	9	0	0
Chemical Dependency Professional Trainee	0	4	0	0	1	0	13	6	3	0	0	4	0	0
Chiropractic X-Ray Technician	0	0	0	0	0	0	0	1	0	0	0	0	0	0
Chiropractor	0	17	0	0	5	0	5	2	4	0	1	15	0	1
Counselor, Agency Affiliated	0	11	0	0	2	0	13	8	5	0	0	5	0	0
Counselor, Certified	0	2	0	0	1	0	0	1	1	0	0	1	0	0
Counselor, Certified Advisor	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Dental Anesthesia Assistant	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Dental Assistant	0	4	0	0	0	0	7	2	1	0	0	4	0	0
Dental Hygienist	0	1	0	0	0	0	0	1	2	0	0	0	0	0
Dentist	0	27	0	0	3	0	17	9	6	0	1	33	0	1
Denturist	0	4	0	0	0	0	1	0	1	0	0	0	0	0
Dietitian/Nutritionist	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Dispensing Optician	0	1	0	0	0	0	0	0	0	0	0	3	0	0
Dispensing Optician Apprentice	0	0	0	0	0	0	0	0	0	0	0	1	0	0
East Asian Medicine Practitioner	0	0	0	0	1	0	2	1	0	0	0	1	0	1
Emergency Medical Responder	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Emergency Medical Technician	0	2	0	0	9	0	1	1	0	0	0	2	0	0
Expanded Function Dental Auxiliary	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Genetic Counselor	0	0	0	0	1	0	0	0	0	0	0	0	0	0
Health Care Assistant	0	0	0	0	1	0	0	1	0	0	0	0	0	1
Hearing Aid Specialist	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Home Care Aide	0	3	0	0	3	0	11	4	14	0	0	6	0	0
Humane Society	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Hypnotherapist	0	0	0	0	1	0	0	1	1	0	0	0	0	0
Licensed Practical Nurse	20	0	0	0	0	0	0	0	1	0	0	0	20	0
Marriage and Family Therapist	0	2	0	0	0	0	0	2	2	0	0	2	0	0
Marriage and Family Therapist Associate	0	3	0	0	0	0	0	1	1	0	0	1	0	0
Massage Practitioner	0	18	0	0	48	0	5	1	10	0	0	8	0	1
Medical Assistant	0	6	0	0	6	0	4	5	13	0	0	36	0	2
Mental Health Counselor	0	12	0	0	8	0	2	14	0	0	0	3	0	0
Mental Health Counselor Associate	0	4	0	0	0	0	3	6	2	0	0	2	0	0
Midwife	0	3	0	0	0	0	0	0	0	0	0	2	0	0

	61	62	63	64	65	66	67	68	69	70	71	72	73	74
Naturopathic Physician	0	6	0	0	2	0	1	3	9	0	0	6	0	6
Nursing Assistant	0	45	0	0	49	0	53	32	82	0	1	39	0	3
Nursing Home Administrator	0	8	0	0	4	0	1	1	0	0	0	6	0	0
Nursing Pool Operator	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Nursing Technician	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Occupational Therapist	0	2	0	0	0	0	0	0	0	0	1	1	0	0
Occupational Therapy Assistant	0	0	0	0	1	0	0	0	0	0	0	2	0	0
Ocularist	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Optometrist	0	1	0	0	1	0	0	0	0	0	0	1	0	0
Orthotist/Prosthetist	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Osteopathic Physician	0	10	0	0	3	0	0	0	2	0	0	7	0	0
Osteopathic Physician Assistant	0	0	0	0	0	0	0	0	1	0	0	2	0	0
Paramedic	0	1	0	0	6	0	0	0	0	0	0	4	0	0
Pharmacies and Other Pharmaceutical Firms	0	0	5	0	0	0	0	0	1	15	0	5	0	1
Pharmacist	0	0	20	0	0	0	0	0	0	37	0	0	0	0
Pharmacist Intern	0	0	0	0	0	0	0	0	0	1	0	0	0	0
Pharmacy Assistant	0	0	3	0	1	0	0	0	0	18	0	1	0	0
Pharmacy Technician	0	0	1	0	0	0	0	0	0	17	0	2	0	0
Physical Therapist	0	6	0	0	1	0	0	1	2	0	0	2	0	0
Physical Therapist Assistant	0	0	0	0	1	0	0	1	0	0	0	3	0	0
Physician	0	4	0	150	1	278	0	0	0	0	0	11	0	3
Physician Assistant	0	0	0	8	0	23	0	0	0	0	0	0	0	0
Podiatric Physician	0	1	0	0	1	0	1	2	1	0	0	0	0	0
Psychologist	0	12	0	0	1	0	3	5	1	0	0	6	0	0
Radiological Technologist	0	0	0	0	7	0	0	0	0	0	0	1	0	0
Radiologist Assistant	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Recreational Therapist	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Reflexologist	0	1	0	0	2	0	1	0	0	0	0	0	0	0
Registered Nurse	84	0	0	0	0	0	0	0	1	0	0	0	57	1
Respiratory Care Practitioner	0	0	0	0	0	0	0	0	0	0	0	1	0	0
Retired Volunteer Medical Worker	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sex Offender Treatment Provider and Affiliate	0	1	0	0	0	0	0	0	1	0	0	2	0	0
Social Worker Advanced	0	1	0	0	0	0	0	0	0	0	0	0	0	0
Social Worker Associate Advanced	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Social Worker Associate Independent	0	6	0	0	1	0	1	1	0	0	0	4	0	0
Social Worker Independent Clinical	0	3	0	0	1	0	2	7	1	0	0	1	0	0
Speech Language Pathologist	0	1	0	0	0	0	0	2	0	0	0	1	0	0
Speech Language Pathology Assistant	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Surgical Technologist	0	0	0	0	0	0	1	0	0	0	0	0	0	0

	61	62	63	64	65	66	67	68	69	70	71	72	73	74
Veterinarian	0	12	0	0	6	0	1	0	1	0	0	7	0	0
Veterinary Medication Clerk	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Veterinary Technician	0	0	0	0	1	0	0	0	0	0	0	0	0	0
X-Ray Technician	0	0	0	0	1	0	0	0	1	0	0	0	0	0
Grand Total	118	260	29	158	187	301	157	130	176	88	4	255	80	21
Months Worked	24	24	24	24	24	24	24	24	24	24	24	24	22	24