Board Members Present:  
Randy Anderson, DPM, Chair  
Suzanne Wilson, DPM, Vice-Chair  
DJ Wardle, DPM  
Lotchie Kerch, DPM  

Staff Present:  
Susan Gragg, Program Manager  
Brandon Williams, Program Assistant  
Davis Hylkema, Program Support  
Gail Yu, Assistant Attorney General  
Mike Weisman, Staff Attorney  
Maura Craig, Policy Analyst  
Kitty Slater, Disciplinary Manager (by phone)  

Guests Present:  
Frank Schitoskey, Ambulatory Surgery and ESRD Survey Manager, Investigations and Inspections  
Chris Baumgartner, Executive Director DOH Health Professions  
Gary Garrety, Operations Manager PMP  
Eric Leonheart, DPM, WSPMA  

OPEN SESSION:  

1. CALL TO ORDER  
The business meeting of the Washington State Podiatric Medical Board (board) was called to order by Dr. Anderson, DPM, Chair, at 9:00 a.m. on July 13, 2017.  

1.1. Approval of agenda  
MOTION: The Chair entertained a motion to approve the July 13, 2017 agenda as submitted. The motion was seconded and passed.  

1.2. Introduction of board, staff, guests, and audience.  
The board, staff, and guests in attendance each gave a brief introduction.
1.3. Approval of business meeting minutes – April 13, 2017
   **MOTION:** The Chair entertained a motion to approve the April 13, 2017 minutes as presented. The motion was seconded and passed.

2. **Rules Workshops** – The board solicited input on the current rule projects concerning:

   2.1. Temporary practice permits for military spouses and state-registered domestic partners for podiatric physicians.
   Ms. Gragg explained the Options. Option 1 refers to 246-12 rules which are for all health professions. Option 2 addresses the language is placed into your profession’s own rule. Option 1 is the most expedient with the referral should there be language changes.
   **MOTION:** The Chair entertained a motion to accept Option 1. The motion was seconded and approved.

   2.2. Repeal of outdated, redundant rules
   Ms. Gragg explained that this proposal is repealing outdated and redundant rules with no language to review.
   **MOTION:** The Chair entertained a motion to accept Item 2.2. The motion was seconded and approved.

   2.3. Amendment of rule sections WAC 246-922-010, 246-922-120, and 246-922-240
   Ms. Gragg shared that Gail McGaffick, JD, Washington State Podiatric Medicine Association (WSPMA), suggested that the definitions under 120 General provisions can be moved to 010 Definitions, and that 120 can be removed. In Option 2 it was suggested to remove the archaic word “chiropody.” Gail Yu, AAG, suggested that the term “nursing home” be referred to RCW 18.51.010(3) which has the detailed definition.
   **MOTION:** The Chair entertained a motion to accept Option 3, which incorporated the above-mentioned suggestions. The motion was seconded and approved.

3. **Board Business**

   3.1. Rules Update
   Ms. Gragg presented needed corrections in the Podiatric Medical Board Rule Project Status Report as brought to her attention by Ms. McGaffick. In WAC 246-922-001 Scope of Practice, the citation of RCW 18.22.010 needs to be corrected to RCW 18.22.035. WAC 246-922-055 has a reference to the “secretary”, which needs to be corrected to the “board.” An additional correction was suggested to follow statutory language in reference to educational standards and eligibility requirements. Ms. Gragg explained that these technical corrections can be accomplished through a CR105 process, which does not require a hearing.
   **MOTION:** The Chair entertained a motion to authorize rulemaking to make these corrections through the CR105 process. The motion was seconded and approved.

Ms. Gragg sought the board’s input on sending the CE rules notification out in July, August and September in order to get the word out as much as possible so people are prepared. The board agreed.
Ms. Gragg informed the board that the Medical Quality Assurance Commission (commission) has updated its office based surgery rules move the identification of approved accrediting entities in a list, rather than being named specifically in rule. The list is referenced in the rules and will be posted on the commission’s website. Should Podiatry ever receive similar petitions, this approach is an efficient option that minimizes the need to open rules in order to add new entities.

3.2. 2018 Meeting Dates
MOTION: The Chair entertained a motion to set the Podiatric Medical Board 2018 meetings for January 11, 2018; April 12, 2018; July 12, 2017; and October 11, 2018. The motion was seconded and approved.

3.3. Signature Delegation
Ms. Gragg reported the Signature Delegation requires updating every two years. She included an updated Form 1-1-19A. She also explained the Form 1-1-19C proposed additions to the existing Designation of Signature Authority list of the adjudicative services of proceedings related to RCW 18.130.090, RCW 18.130.370, RCW 18.130.180(5), RCW 18.130.180(5), RCW 18.130.400, RCW 18.130.180, and RCW 18.130.230. There is also the Addendum granting delegation of signature authority to the Executive Director and to the Program Manager for Red Jacket correspondence, continuing education audits, approval of materials submitted for routine continuing education audits (completions), and for extension completions.
MOTION: The Chair entertained a motion to update the Signature Delegation and accept the additions. The motion was seconded and approved.

3.4. Bylaws Update
Ms. Gragg explained the proposed changes to the bylaws. Changes include the addition of hyperlinks to the cited RCWs, and the statutory requirement to include the position and role of Secretary. Information defining ad hoc committees was also added. Under the signature lines the personal names were removed, retaining only the title.
MOTION: The Chair entertained a motion to accept the additions and changes as presented. The motion was seconded and approved.

3.5. Business Plan
Ms. Gragg presented the current business plan for the board’s review, an activity that is to be done every two years.
MOTION: The Chair entertained a motion to approve the current business plan with an amendment to include outreach and the possible development of a newsletter. The motion was seconded and approved.

3.6. Implementing Engrossed Substitute House Bill 1427 (ESHB 1427)
3.6.1. Ms. Gragg provided the board with a report on ESHB 1427, which directs the Medical Quality Assurance Commission, the Nursing Care Quality Assurance Commission, the Dental Quality Assurance Commission, the Board of Osteopathic Medicine and Surgery, and the Podiatric Medical Board to adopt opioid prescribing rules by January 2019. Ms. Gragg presented a high-level draft
timeline showing various goals that include authorizing rule-making, the anticipated seven public workshops, rule adoption hearings, and communication/outreach. Staff has established an Implementation Committee to assist the boards and commissions.

**MOTION:** The Chair entertained a motion authorize rulemaking to implement ESHB 1427. The motion was seconded and approved.

The board was also requested to name one or possibly two volunteers for representatives to sit on the combined workgroup. Drs. Anderson and Wardle volunteered to represent the board.

3.6.2. Mr. Baumgartner continued the presentation on ESHB 1427 with an explanation of the impacts of ESHB 1427 on the Washington Prescription Monitoring Program (PMP). Among several goals, he emphasized the linking of existing PMP data to death data in order to proactively identify practitioners most associated with deaths and overdoses. Another is the creation of prescriber feedback reports, an assessment resource showing practitioners how their prescribing practices measure up to other practitioners in their specific profession. This report could also be used by the Department of Health to identify practitioners who measure above the standard median in their prescribing habits, and proactively issue notification to them. Mr. Baumgartner encouraged the board, as it enters the rulemaking process, understanding its authority and resources, to consider the idea of mandating the use of the PMP. He noted that this is not an official policy position, but that the idea is likely to come up. Mr. Baumgartner shared examples of what some other states are doing. The overall idea is to put data into the hands of the providers for the purpose of quality improvement in practice and patient care.

3.7. Annual PMP report

In addition to the report in agenda item 3.6.2, Mr. Baumgartner shared what a Washington State Labor and Industries report card used in workman compensation currently looks like. Mr. Baumgartner summarized the overall presentation’s purpose was to help the board be prepared for the elements and issues involved in the implementation process of ESHB 1427.

3.8. Board Newsletter

Dr. Anderson shared that he learned about the quarterly newsletter published by the Medical Quality Assurance Commission (MQAC) while at a medical executive meeting. Examples of their newsletter were provided in the meeting packet as reference while the board considered creating its own newsletter. The board discussed whether to publish the names of the physicians who have undergone disciplinary action. These are included in the MQAC newsletter. AAG Gail Yu explained that RCW 18.131.10 requires the public to be notified of such cases; including such information in a newsletter is supported by law. The board also discussed the frequency and timing of a newsletter publication.
MOTION: The Chair entertained a motion to begin the development of a Podiatric Medical Board newsletter, which would include legal actions taken by the board and be published twice a year. The motion was seconded and approved.

3.9. Correspondence
No correspondence had been received.

4. Program Reports
4.1. Budget and fee update
Ms. Gragg noted that the final biennium report will probably be available by the beginning of September. She reported that the budget looks fine. Ms. Gragg informed the board that the hearing for the implementation of the Washington State Physicians Health Program surcharge is set for September 8, 2017.

4.2. Statistics reports
Ms. Gragg summarized the report identifying 348 active licenses, 24 active limited licenses, and 22 current cases in progress with most of those being in board member and legal review.

Ms. Gragg reported that recent inspections of surgical locations and currently certified ambulatory surgical centers that may include some office space surgery clinics are showing increasing incidents of inadequate infection control standards, potential for aseptic breaches, apparent lack of supervision, questions about appropriate use of general anesthesia, lack of documented protocols for verifying instrument sterility, and potential for unlicensed practice. Repeat inspections reveal a pattern of unsustained progress in many cases, and some showing significant decline. She suggested providing education in this area through newsletter articles as an effort to give the facilities and practitioners the tools to succeed, with the goal of reducing the causes of complaints and the related expense of processing them. Ms. Gragg introduced Mr. Schitoskey who spoke on the scope of the inspections. The board identified two actions at this point:
1. Articles that are aimed at both facilities and practitioners will be published in the soon-to-be-developed newsletter that present these current patterns of concern, and provide CDC guidelines and best practices. AAG Gail Yu and Mr. Schitoskey will collaborate on creating these articles.
2. Input from the DOH legal department was requested to help the board determine what its scope of regulatory and legal authority over the operation of a podiatry owned facility (surgical centers) ought to be. The board understands that their authority to weigh in on quality of care and scope of licensure, but the length of its reach into the procedures of the facilities need to be discussed and determined. Discussion on this topic will be placed on the agenda for the October 12, 2017 meeting.

Ms. Gragg informed the board of a feasibility study of the nine-year-old integrated licensing and regulatory systems currently being used. A new system being considered would bring improvements and integrate additional useful features and efficiencies. Bringing in the new system could cause a slight increase in the licensee fee increase for a period of four years, or, as an alternative, those boards with a large reserve could allocate
some funds instead of imposing a temporary fee increase. Ms. Stephanie Goebel, IT Systems Specialist, will be invited to come to the October 12, 2017 board meeting to talk about it.

5. **Open Forum**
   There was no open forum business.

6. **Settlement Presentations**
   No settlements were presented.

7. **Adjournment of public meeting**
   The public portion of the board meeting was adjourned at 11:54 a.m.

**Closed Session**

8. **Discipline and Licensing**

**Adjournment** – the board meeting was adjourned at 1:30 p.m. by Dr. Anderson, Chair.

**Next Meeting:**
- **Date:** October 12, 2017
- **Time:** 9:00 a.m.
- **Location:** Blackriver Training and Conference Center
  800 Oakesdale Ave SW
  Renton, WA 98057-5221

Respectfully Submitted by

Susan Gragg, Program Manager

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**NOTE:** PLEASE VISIT THE PODIATRIC MEDICAL BOARD’S WEB SITE FOR FUTURE AGENDAS AND MINUTES AT: [WWW.DOH.WA.GOV](http://WWW.DOH.WA.GOV). GO TO “LICENSES, PERMITS AND CERTIFICATES”; CLICK ON “PROFESSIONS – NEW, RENEW OR UPDATE” AND YOU WILL FIND A LIST OF THE HEALTH PROFESSIONS. GO TO “PODIATRIC PHYSICIANS”, THEN TO “BOARD MEETINGS” FOR AGENDAS AND MINUTES.