

The Clinical Support Program

Introduction

The Washington Medical Commission adopted a rule creating the clinical support program. The intent is to improve the quality of patient care by proactively supporting physicians and physician assistants (collectively practitioners) to address practice concerns through a plan of education or practice change, or both, before disciplinary action is necessary to protect the public. A practice concern is conduct that, if continued, could present a risk of harm to patients. The Commission issues this procedure to establish when and how the Commission will offer a practitioner the opportunity to participate in the clinical support program by signing a clinical support plan.

Procedure

Type of cases appropriate for a clinical support plan

Per WAC 246-919-xxx and WAC 246-918-xxx, a practitioner is eligible for the clinical support program when the Commission identifies a practice concern that can be corrected within three months and patient protection does not require practice limits. A clinic support plan is intended for minor practice concerns that can be quickly corrected. It is not meant for behavior that amounts to dishonesty, boundary violations, acts of moral turpitude, impairment or any conduct that presents a risk of harm to patients.

Examples of cases in which a clinical support plan may be appropriate are:

- A failure to provide records pursuant to a patient request in a reasonable time.
- A failure to complete a death certificate in a timely manner
- A failure to communicate with a patient or another practitioner in a timely manner
- A physician assistant not wearing a name badge
- A failure to issue a prescription electronically and no exception applies
- A failure by a physician assistant to file a practice agreement filed with the Commission
- A failure to comply with state reporting requirements
- A failure to complete required continuing medical education

When a clinical support plan may be offered

The Commission may offer a clinical support plan only prior to commencing a disciplinary action. Once the Commission orders that a Statement of Allegations and a Stipulation to Informal Disposition be offered to a practitioner, or orders that a Statement of Charges be served on a practitioner, the practitioner is not eligible for a clinical support plan, even if the Commission subsequently withdraws the Statement of Allegations or the Statement of Charges.

A clinical support plan is non-negotiable

When the Commission sends a practitioner a proposed clinical support plan to resolve a practice concern, the terms of the clinical support plan are non-negotiable. A practitioner may not ask to modify the plan offered by the Commission. The practitioner may decline to sign the document, but the practitioner may not make a counterproposal.

A clinical support plan must be signed within 14 calendar days

The practitioner must sign and the proposed clinical support plan within 14 calendar days of the date the proposed clinical support plan was placed in the mail to the practitioner. The Commission will not extend the time period. If the practitioner does not return a signed clinical support plan within the prescribed time period, the proposed action plan is considered to be withdrawn, and the practitioner is no longer eligible for the program.

A clinical support plan is a public document, but is not reportable

A clinical support plan is not disciplinary action and is not reportable to either the National Practitioner Data Bank, the Federation of State Medical Boards, or other entities. A clinical support plan will not be placed on the Department of Health web site, will not be put into a press release, and will not be placed in the Commission's newsletter. A clinical support plan is a public document and is subject to disclosure under Chapter 42.56 RCW, the Public Records Act.

Completion of the action plan and closure of the case.

When a practitioner submits proof of completion of the clinical support plan, the Commission will close the complaint. If a practitioner fails to complete the clinical support plan within the required time period, the Commission will notify the practitioner of the failure to complete the plan and will consider whether disciplinary action is necessary. Disciplinary action will be based on the evidence obtained in the investigation of the original complaint; it will not be based on the failure to complete the clinical support plan.

Number:

Date of Adoption:

Reaffirmed / Updated:

Supersedes:

DRAFT