

Executive Director Report: WMC Progress to Eliminate Implicit Bias



WASHINGTON
**Medical
Commission**
Licensing. Accountability. Leadership.

Melanie de Leon, JD, MPA

Executive Director

In our summer newsletter, the WMC Executive Committee published a statement entitled, "[Racism in all of its forms is a public health issue](#)" where we stated that we were taking steps to minimize the effect of implicit bias in disciplinary actions. We are also taking these steps in our general internal business processes and I want to share some of our progress.

- Staff hiring process. We are now redacting the personal information on all applications and resumes received for staff vacancies as well as having "blind" first interviews. These changes mean that the interview panel cannot see the applicant (easy to do during virtual interviews) nor does the interview panel have access to the applicant's personal information such as age, name and address. We hope that taking these steps will reduce, if not eliminate, any implicit bias in our hiring process.
- Complaint Summary Document. We have removed the complainant's name, the name of the physician or physician assistant against whom the complaint is filed and any other information that may introduce implicit bias into the complaint review process. The Commissioners reviewing these complaints will not have this information any longer on the summary document and we are working to redact the entire complaint file to remove this type of information. This is still a work in progress.
- All commissioners received implicit bias training at their August meeting.
- The WMC established a new Healthcare Disparities Workgroup whose purpose is to:
 - To research and gather data regarding healthcare disparities with a focus on disparities in four areas: maternal mortality, breast cancer, heart disease and pain assessment.
 - Assess information, data gathered and determine action plans for the WMC to address and affect systemic racism in the healthcare system - from getting into medical school, to residency, to practice, as well as patient safety.
 - Collaborate with stakeholders, other commissions, associations, medical schools and other entities to determine steps to improve patient outcomes and address systemic racism in the healthcare system.
- The WMC also created the Health Equity Advisory Committee and its purpose is to:
 - Create a multi-disciplinary committee of clinicians, faculty, administrators, students, community and system leaders to review WMC rules, policies, procedures and guidelines to ensure healthcare equity for all patients regardless of race, ethnicity, language, religion, age, spiritual practice, sexual orientation, gender identity or expression, socioeconomic class and mental or physical status.
 - Identify educational opportunities for the advancement of healthcare equity.

Our journey is just beginning, but we have taken some big steps to look into our own processes to determine how we can be better. There will be more to come as this journey progresses.

Newsletter Survey

Please take a moment to share your thoughts about the WMC newsletter. Do you have a particular section that you like, or an idea on how to improve our publication? We want to hear from you. Click the link below to take the survey

[WMC Newsletter Survey](#)

Coffee with the Commission

One of the most interactive tools the WMC has ever introduced is our "Coffee with the Commission" series. This is a time to take a break and join the WMC for an informal conversation on a variety of topics. Check our event calendar, and follow us on Facebook to be notified of future topics and dates. If you have a topic that you would like to suggest we discuss, you can [email us](#) your suggestions.