

Executive Director Report



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

Kyle Karinen, J.D., LL.M

Several years ago, my predecessor, Melanie DeLeon, did a series of articles for this newsletter that detailed the Commission's disciplinary process. Those four articles are still available on the Commission's website, and I commend those articles to all readers.

1. Someone Filed a Complaint Against Me – Now What? A Peek Behind the Curtain ([WMC Update Spring 2021](#))
2. The Investigation Process ([WMC Update Summer 2021](#))
3. Case Disposition: The Third Act in our Behind the Curtain Series ([WMC Update Fall 2021](#))
4. Compliance – The Last Act in our Behind the Curtain Series ([WMC Update Winter 2021](#))

These articles offer a broad outline of the processes behind the Commission's statutory mandates. These articles are particularly worthwhile considering the Commission's January adoption of a [procedure for managing conflicts of interest](#).

Washington's law against conflicts of interest for state officers, like commission members, is fairly straightforward and mandatory. The laws highlighted concentrate a good deal on financial interests. As a professional licensing agency housed in a larger umbrella agency, for the members of the Commission, it's very rare to make decisions that involve their own financial interests, financial interests of a relative or business or professional associate. In a situation where those concerns are implicated, commission members must recuse themselves.

The other area where the procedure is applied is a little broader – appearance of fairness. As put forth in a relevant Washington Supreme Court decision, appearance of fairness applies over commission actions in order to ensure that "a reasonably prudent and disinterested observer would conclude that all parties obtained a fair, impartial, and neutral hearing." I invite you all to again reconsider Ms. DeLeon's series again at this point.



The disciplinary process set forth in Washington law requires commission member input at multiple points including, but not limited to:

1. Authorizing investigation of a complaint.
2. Directing an investigation as a Reviewing Commission Member (RCM).
3. Making a disposition decision on a completed investigation.
4. Serving on a hearing panel after formal charges are initiated.
5. Review and consider for approval a settlement agreement; and
6. Review and consider for approval a release from oversight.

There are a couple of additional considerations worth noting. At the Case Management Team (CMT) meetings where commission members decide whether to authorize an investigation, the materials they review are redacted and do not contain identifying information. Some of these measures were adopted for the purpose of reducing implicit bias, but to ensure that the Commission has reviewed complaint information with the identity of the physician or physician assistant redacted.

After that point, during the investigation and disposition decisions, the only commission member who knows the identity of a physician or physician assistant is the Reviewing Commission Member along with identifying information like educational background and the name of the facility where the allegations took place.

Practically, these measures support a decision-making process that supports the principles of fairness and neutrality on the part of commission members. The procedure contains additional measures and considerations beyond these highlights. The Commission adopted this policy after over a year of discussion between commission members and discussion with other interested parties during the Commission's Policy Committee. It was adopted with the goal of providing clarity and greater transparency and I hope readers will find it thoughtful and comprehensive. As always, please feel free to reach out to me directly at 360-236-4810 or kyle.karinen@wmc.wa.gov if you have comments or concerns.