

Message from the Chair



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

Building Provider Relationships

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Not long after starting my practice right out of residency, I received a letter from the Medical Board of California alerting me that they had received a complaint about my care from a patient's family. The patient had recently died of complications from pneumonia after an urgent bowel surgery. Although in my mind I had done everything I could do to help the patient, I was already quite distraught over her death, and receiving a letter from the Medical Board only added to my despair. Questions and doubt began to surface in my own head, and I began to lose confidence in my 10 years of training and the skills I had meticulously honed. I felt shame and confusion and kept this letter hidden without discussing it with any of my colleagues. I felt lonely and undeserving of the great privilege that was granted me to help heal others. In addition, I felt added guilt over feeling this bad myself when in reality, the patient and her family's loss was exponentially greater than mine.

Reading the letter over and over again, it slowly sank in that the letter simply requested an explanation of what had happened to the patient. I did my best to recount the events, avoiding any admission of guilt (that was what we were trained to do back then) and

expressing my regret and sadness over the patient's death. I sent my response by certified mail the next morning. Since that day, I never heard from the Medical Board again.

Fast forward 22 years, and ironically, I find myself as chair of the organization where sending those letters to the physicians (MD) and physician assistants (PA) of Washington state is almost a daily routine. The Washington Medical Commission (WMC) receives dozens of complaints every week from various sources—patients, family, friends, mandatory reporters, other physicians and clinicians, other agencies, malpractice reports, other state boards, etc.

Many of these complaints result in a letter to the physician or physician assistant that describes the complaint and requires them to respond. The letters are innocuous enough, fairly standardized and not meant to sound accusatory or threatening. But the reality is that for the recipient, even the envelope with the WMC logo is enough to make their heart race and face become flush.



"There is no way we can eliminate the visceral reaction our letters can cause, and we recognize that most providers would rather not have to interact with us throughout their careers."

Message From the Chair

The mission of the WMC is “Promoting patient safety and enhancing the integrity of the profession through licensing, discipline, rulemaking, and education.” Some may presume that the word “discipline” implies “take away my license” or “pay a big fine” and “blacklist me forever.” Indeed, some MDs and PAs may have experienced these as a result of a severe violation. However, what is not explicit in the mission statement is that ideally, we strive to help physicians do what they do best and be successful in keeping Washingtonians healthy. Restricting or suspending physicians from practice is not a desired goal of the WMC if we can educate, rehabilitate, or assist them in other ways to keep working in their calling as a health professional.

In fiscal year 2022 (July 2021 – June 2022) the WMC received 1912 complaints, of which roughly 1/3 were investigated. Of these, only about 13% resulted in disciplinary action by the WMC. Almost all of these actions include requirements for continuing medical education and a report from the licensee, usually in the form of a paper that describes the clinical topic and how they have improved their practice. Despite the administrative hassles, many licensees have expressed appreciation for the WMC’s help and guidance toward improving their patient care, knowledge base, and confidence.

Over the years, the WMC has slowly focused more on high reliability in prevention of errors in health care. This includes an emphasis on systems-based errors that cause individual actions to lead to harm and implementing just culture that studies all errors as process improvement opportunities without blame. We have created a new work group called HiRO (High Reliability Organization) committee which is charged with studying and recommending solutions to improve how we can help MDs and PAs with medical errors non-punitively. The WMC itself maintains high reliability practices in the way we process complaints.

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However, we continue to emphasize to the MDs and PAs that our goal is to be their partner, resource, and occasional guidepost to help them be the best they wish to be.

To all of our MDs and PAs, and to the public, I invite you to [visit our website](#) and learn about the WMC’s achievements over the past few years and [our performance in FY2022](#). Also [check out our blog](#) to hear from our commissioners and staff about other behind-the-scenes topics.

I also want to welcome the newest members of the WMC, Po-Shen Chang, MD, Congressional District 3, Mabel Bongmba, MD, Congressional District 9, Elisha Mvundura, MD, Physician at Large, Ed Lopez, PA-C, Physician Assistant, and Robert “Doug” Pullen, Public Member. Thank you all for your dedication and commitment to advancing the health care for our patients and communities.

Finally, I would like to acknowledge John Maldon, immediate past chair of WMC. His steadfast leadership was critical to the continuity and resilience of the commission during the most challenging times of the pandemic as we faced constant changes while maintaining the highest quality of care and public safety. I cannot overstate the difficulties that the commission faced during these unprecedented times and the grace with which John led us through them.



If you have a suggestion for our quarterly newsletter, [send us an email](#).