

Interactive and Transparent Development of Evidence-based Policies

Introduction

The Washington Medical Commission (Commission) develops policiesⁱ to encourage the medical profession to improve the delivery of medical care and enhance patient safety.ⁱⁱ The Commission wishes to better engage the public and the profession by creating an interactive, consistent, and transparent procedure to obtain input to develop evidence-based policies.ⁱⁱⁱ This document describes the procedure the Commission uses to develop evidence-based policies.

Procedure

Step One: Determine the need for a policy

Any Commission member, member of the medical profession, organization, or member of the public may ask the Commission's Policy Committee to consider developing a policy in a particular area of medical practice. In general, the Policy Committee will consider developing a policy for an issue that has broad application to practitioners or the public, to respond to an emerging problem, and to fulfill its regulatory charge to protect the public. The Policy Committee may decide that a policy is not necessary, or that the subject is more appropriately addressed by adopting a rule, which has the force of law.

Step Two: Policy Committee

If the decision of the Policy Committee is to develop a policy, the Policy Committee Chair may assign members to a work group to analyze the research and evidence, and to draft the policy. The workgroup will include one or more Commission members and may include subject matter experts on staff. The workgroup may also include subject matter experts outside the Commission.

The Policy Committee also reviews existing policies to ensure that they remain useful and informative, and reflect the current state of medical practice and the current view of the Commission.

Step Three: Research and Obtain Evidence

If the Policy Committee decides to develop a policy or guideline, the next step is to research the topic and obtain evidence that will inform the Commission's decision-making. The research may include:

- Reviewing complaints or other patient experiences related to the topic of the proposed policy.
- Conducting a literature review of the latest journal articles and studies.
- Reviewing the positions of appropriate stakeholders.
- Reviewing the positions of other state medical boards and the Federation of State Medical Boards.

- Identifying and researching relevant legal issues, consulting with the Attorney General’s Office as needed.

Step Four: Analysis and Drafting

The work group will analyze the research and evidence, relevant law, and draft the policy. For existing policies, the workgroup will review feedback submitted to the Commission via the Commission web site or otherwise. The workgroup will create a first draft of the proposed policy.

Step Five: Policy Committee Review

In a public meeting, the Policy Committee will review the draft policy and proposes revisions. The Policy Committee presents the draft to the full Commission. The Commission provides feedback and then may approve posting the draft policy for public dissemination, including posting the draft on the Commission web site.

Step Six: Solicit Feedback from Public and Profession

Upon approval by the Commission, staff posts the draft policy to the Commission web site and invites members of the public and the profession to post comments on the proposed draft policy. The Commission will notify the public and the profession of the proposed policy by:

- Sending out notice of the draft policy on social media;
- Sending out notice of the draft policy to the Commission listserv;
- Sending the draft policy to stakeholders and interested parties

The Commission accepts comments on the proposed policy for 28 days. The Commission will have discretion to remove comments that do not contribute to a constructive discussion of the relevant issues.

Step Seven: Policy Committee Review of Feedback

In a public meeting, the Policy Committee reviews the feedback and comments from the public and the profession. The Policy Committee considers the extent to which the comments represent the expectations of the profession and are consistent with the Commission’s mission to promote patient safety and our vision of advancing the optimal level of medical care for the people of Washington. The draft policy is revised accordingly.

Step Eight: Secretary Review of Policy

The Commission staff sends the proposed policy to the Secretary of the Department of Health for review and comment. Following the Secretary’s review, the Policy Committee reviews and discusses the comments from the Secretary in a public meeting. The Policy Committee brings its recommendations to the full Commission. The full Commission reviews the proposed policy in a public meeting and may revise the policy. If the Commission revises the policy, the Commission sends the proposed policy back to the Secretary for review. Once the Commission approves a policy, the policy is filed with the Washington State Code Reviser and it is published in the Washington State Register.

Step Nine: Final Review and Adoption

Once the Policy Committee is satisfied with the proposed policy, it refers the draft to the full Commission with a recommendation to adopt the policy. The full Commission, in a public meeting, discusses the policy

and decides whether to adopt the final version. When the policy is final, the Commission publicizes it through its web site, social media channels, listserv, and newsletter.

Emergency Exception

In case of an emergency in which the development of a policy is required in a short time period, one or more of these steps may be waived.

Date of Adoption: May 19, 2017

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ⁱ [RCW 34.05.010\(15\)](#) defines “policy statement” as “a written description of the current approach of an agency, entitled a policy statement by the agency head or its designee, to implementation of a statute or other provision of law, of a court decision, or of an agency order, including where appropriate the agency’s current practice, procedure, or method of action based upon that approach.” A policy is advisory only. [RCW 34.05.230](#). Examples of Commission policy statements are “Complainant Opportunity to be Heard Through and Impact Statement,” and “Practitioners Exhibiting Disruptive Behavior.”

ⁱⁱ This procedure does not apply to the development of procedures, which merely establish the proper steps the Commission and staff take to conduct Commission business. Examples include “Consent Agenda Procedure” and “Processing Completed Investigations More Efficiently.”

ⁱⁱⁱ This process is largely based on the “consultation process” developed by the College of Physicians and Surgeons of Ontario. <http://www.cpso.on.ca/Footer-Pages/The-Consultation-Process-and-Posting-Guidelines>