

FINAL BILL REPORT

ESHB 1960

PARTIAL VETO

C 332 L 91

Brief Description: Redefining practice beyond the scope of practice for health professions.

By House Committee on Health Care (originally sponsored by Representatives Prentice, Paris, Day, Braddock, Cantwell, Edmondson, Franklin, Morris, Phillips, Pruitt, Basich, Leonard, Orr, Wood, R. Johnson, Heavey, Wineberry, May, D. Sommers, Beck and Dellwo).

House Committee on Health Care
Senate Committee on Health & Long-Term Care

Background: The Uniform Disciplinary Act provides standardized procedures and sanctions for specified acts of unprofessional conduct committed by regulated health practitioners. Occasionally, these procedures have resulted in the discrimination against non-traditional treatment providers.

The shortage of health care professionals is receiving increased attention among policy makers, health care providers, employers of providers and consumers. There are reports of widespread personnel vacancies at health care facilities and steady or falling enrollments at the state's health professional training programs. Many health care employers claim that health care careers have lost their appeal because of low pay, long working hours and the risk of disease.

Demographic forecasts for the next 20 years predict an increasing population of children and elderly adults. Both age groups tend to be high users of health care services, and an increase in the demand for health care is expected. At the same time, forecasters predict an overall shrinkage of the work force age population resulting in a smaller number of people available to fill health care occupations.

The current law discourages veterinary specialists from locating in the state because no mechanism for licensing the specialty exists which would then permit the specialty to be legally advertised.

Summary: The use of a nontraditional treatment by itself shall not constitute unprofessional conduct provided that such treatment does not result in injury to a patient or create an unreasonable risk that a patient may be harmed.

The licensing authorities for health professions must issue temporary practice permits. Allowing licensed individuals from other states to practice in Washington while their applications are being completed. Only persons whose licenses have been verified to be in good standing are eligible. The disciplining authorities for each of the regulated health care professions may participate in voluntary continued competency projects when selected by the Secretary of Health.

Community-based recruitment and retention projects are authorized. Up to three projects may be established by the Department of Health to assist local communities to recruit and retain health care professionals. A statewide health personnel recruitment and retention clearinghouse is also authorized to inventory and identify successful existing health professional recruitment and retention activities in the state, identify needed programs and provide this information to the public.

The Statewide Health Personnel Resources Plan is created. A committee comprised of representatives of various health and education related agencies is created and directed to prepare the plan, which is to be approved by the governor and submitted to the Legislature. The plan includes, but is not limited to, an assessment of future health care training needs including medical care, long-term care, mental health and other specialties; analysis of the need of multi-skilled personnel, education articulation, and the use of telecommunications and other innovative technologies to provide education to placebound students. Institutional plans are required from colleges, universities and vocational technical institutions specifying how they will implement the elements identified in the statewide plan.

New professions seeking credentialing, or existing ones upgrading the level of regulation, are required to describe the need for, location and cost of any proposed educational requirements.

The state's three current health professional loan repayment and scholarship programs are combined into one program. The program will terminate in June 1992 and will be replaced by an expanded comprehensive Health Professional Loan Repayment and Scholarship Program. Beginning in 1992, the designation of health care professions eligible for the Loan Repayment and Scholarship Program and the designation of shortage

areas will be made using a data-based analysis. Scholarship and loan repayments are to be awarded in three ways. One portion is to be made available for use by participants of the community-based health professional recruitment and retention projects. A second portion is to be made available for use by state-operated institutions, county public health and human service agencies, community health clinics and other health care settings providing services to charity and subsidized patients. The third portion is to be made available for general use for eligible providers serving in any shortage area. A trust fund is created to hold funds appropriated to the program.

Credentialing by endorsement is authorized for optometry, hearing aid fitters, midwives and dispensing opticians.

The Department of Health may issue a license to practice specialized veterinary medicine in a specialty area recognized by the Veterinary Board of Governors by rule. The license may be issued to a national veterinarian who: is currently certified by a national specialty board or college recognized by the board by rule in the specialty area; is not subject to disciplinary action regarding a license in the United States, its territories, or Canada; has successfully completed a state exam on this state's laws and rules regulating the practice of veterinary medicine; and provides supporting information. The secretary of health must establish a fee for such a license.

The bill contains a null and void clause for the health professional shortage parts of the bill.

Votes on Final Passage:

House	98	0	
Senate	42	3	(Senate amended)
House	83	0	(House concurred)

Effective: July 28, 1991

Partial Veto Summary: The governor vetoed section 35, a repealer section which would have eliminated three programs. His reason for the veto is that the Legislature mistakenly repealed Chapter 28B.102 RCW, the Future Teachers Conditional Scholarship Program. The Legislature meant to repeal Chapter 28B.104 RCW, the Nurses Conditional Scholarship Program.