Virginia Board of Health Professions
Department of Health Professions
FULL BOARD MEETING
February 25, 2014

TIME AND PLACE:	The meeting was called to order at 11:05 a.m. on Tuesday, February 25, 2014 at the Department of Health Professions, Perimeter Center, 9960 Mayland Drive, 2nd Floor, Board Room 2, Henrico, VA, 23233
PRESIDING OFFICER:	Jonathan Noble, Chair
MEMBERS PRESENT:	Allison Gregory, Nursing Irene V. Farquhar, Medicine Charlotte Markva, Counseling Robert Maroon, Physical Therapy Jonathan Noble, Optometry Wanda Pritekel, ASLP Robert Rhodes, Pharmacy Virginia Van de Water, Psychology Yvonne Haynes, Social Work Robert Catron, Citizen Member
MEMBERS NOT PRESENT:	Jeffrey Levin, Dentistry Constance Pozniak, Veterinary Medicine Maureen Clancy, Citizen Member Paul T. Conway, Citizen Member Amanda Gannon, Long Term Care Administrators Blair Nelsen, Funeral Directors & Embalmers
STAFF PRESENT:	Elizabeth A. Carter, Ph.D., Executive Director for the Board Dianne Reynolds-Cane, MD, DHP Director Elaine Yeatts, DHP Senior Policy Analyst Diane Powers, DHP Director of Communications Ralph Orr, PMP Director Teresa Garbee, Communications Justin Crow, Research Assistant Laura Jackson, Operations Manager
BOARD COUNSEL:	Not present.
OTHERS PRESENT:	No signatures on sign-in sheet.
QUORUM:	With 10 members present a quorum was established.
EMERGENCY EGRESS:	Dr. Carter provided meeting attendees with the evacuation routes should the need arise.
WELCOME NEW MEMBER:	Dr. Noble congratulated the Board's newest citizen member, Mr. Robert J. Catron, on his appointment and introduced the other members.
PUBLIC COMMENT:	There was no public comment.

APPROVAL OF MINUTES:

On properly seconded motion by Ms. Markva, the meeting minutes from May 14, 2013 were unanimously approved

DEPARTMENT DIRECTOR'S REPORT:

Dr. Reynolds-Cane informed the Board that her four-year term as Director of the Department of Health Professions has come to an end. Her last day will be February 28, 2014. She thanked the Board for their hard work and dedication and wished them all well. She stated that it has been an honor to serve the Commonwealth.

LEGISLATIVE/REGULATORY UPDATE:

Ms. Yeatts reviewed DHP's bills and regulations.

AGENCY COMMUNICATIONS & EDUCATION:

Ms. Powers provided the Board with information regarding communications efforts to launch the PMP program in a new format. Brochures, a stand-alone presentation banner, and youTube tutorial videos have been created. Ms. Powers provided handout materials referencing standard operating procedures for media relations, the 2014 media relations log and 2014 video teleconferencing log.

SRP PRESENTATION:

Neal Kauder of Visual Research, Inc. provided a PowerPoint presentation which includes the background of the SRP effectiveness study, agreement monitoring, training and the new automated worksheets. (Attachment 1)

EXECUTIVE DIRECTOR'S REPORT:

Dr. Carter discussed the Board's budget, stating that the Board is within budget.

She noted that Mr. Crow has been promoted and is now the Deputy Executive Director of the Board of Health Professions and Deputy Director of the Healthcare Workforce Data Center. The Board members congratulated Mr.Crow.

Dr. Carter discussed the progress being made with the National Governors' Association grant. Additional information will be provided as progress is made.

The 2014 Work Plan was provided as a handout.

Dr. Carter noted that the DHP Healthcare Workforce Data Center (HWDC) now has 23 survey up and running. Mr. Crow provided additional information regarding the Center which included, data products ranging from profession reports, CareForce snapshots, regional reports and workforce briefs. This information is published on the HWDC website.

COMMITTEE REPORTS:

Regulatory Research

Dr. Farquhar reported that the Committee voted to table the discussion of regulatory the Pharmacy Technician Scope of Practice Barriers to Effective Team Delivery review until 2015 due to developments underway to better standardize profession requirements. Staff will continue to monitor the profession's progression in the interim.

Dr. Farquhar also reported that the Committee received an update on the Dental Hygienist and Dental Assistant Scope of Practice Barriers to

Effective Team Delivery review. She noted that the Joint Commission on Health Care (JCHC) will be conducting a targeted study of the dental capacity and educational priorities of Virginia's oral health care safety net provides. Since the Board's study will provide information of direct relevance to dental workforce, the Committee directed staff to offer assistance to JCHC for this study.

Dr. Farquhar also noted that Dr. Carter provided the Committee with an overview of the Military Credentialing Review and advised on Virginia's selection to participate in the National Governors' Association Center for Best Practices' *Veterans' Licensing and Certification Demonstration Policy Academy.* The objective of the grant is to streamline credentialing and licensing by creating a model pathway from medic to EMT, AEMT, and Paramedic; LPN, and PTA as a means of decreasing unemployment among veterans' and service members.

BOARD REPORTS There were no Board reports.

NEW BUSINESS There was no new business to discuss.

ADJOURNMENT: The meeting adjourned at 2:08 p.m.

_____

Jonathan Noble, OD
Board Chair

_____

Elizabeth A. Carter, Ph.D.,
Executive Director for the Board

Sanctioning Reference Points Progress Report

February 25, 2014

Prepared for:
Department of Health Professions
Board of Health Professions

Neal Kauder, President
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Topics for Discussion

- SRP Background
- Effectiveness Study
  - Progress
  - New worksheets
  - Veterinary Medicine
- Agreement Monitoring
- Training
- Automated Worksheets

Sanctioning Reference Points Development

Empirical information unavailable on factors that effect sanction decisions – aggravating or mitigating factors, etc.

SRPs have multiple goals and purposes:

- make sanctioning more predictable
- reduce unwarranted disparity
- education tool for new board members
- add empirical element to a process
- help 'predict' future caseloads (need for services, terms)

Comprehensive qualitative and quantitative methodology

Descriptive model/normative adjustment - data serves as baseline and boards modify to serve goals

SRP - Key Features

Voluntary - maintain complete discretion

Accommodate full array of mitigating and aggravating factors

Operate within existing statutes and regulations

Recommendations not too specific or narrow

Allow multiple sanctioning goals to be considered

BHP Requests that SRPs be Evaluated

- Consistency, proportionality and neutrality achieved?
- Examining whether or not SRP training has been adequately provided
- Examining board agreement with SRPs; also feedback on departures
- Re-examining/modifying SRP worksheet factors and scoring weights
- Re-examining/modifying sanction recommendation thresholds
- Identifying unintended consequences
- **Determining how board polices fit within SRPs (CCA's, PHCOs, Formal Hearings)**

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Effectiveness Study Tasks & Progress

	Nurses & CNA	RMA	Medicine	Dentistry	Pharmacy	Pharmacy Tech	Vet Med	Vet Techs
Conduct user satisfaction interviews	✓	✓	✓	✓	✓	✓	✓	✓
Code and key data from worksheets	✓	N/A	✓	✓	✓	N/A	✓	✓
Collect, code, key factors	✓	✓	✓	✓	✓	✓	✓	In Progress
Create database	✓	✓	✓	✓	✓	✓	✓	
Merge SRP data w/extralegal factors	✓	N/A	✓	✓	✓	N/A	✓	
Merge SRP/extra-legal data w/L2K	✓	✓	✓	✓	✓	✓	✓	
Present preliminary descriptive data	✓	✓	✓	✓	✓	✓		
Conduct Statistical analysis	✓	✓	✓	✓	✓	✓		
Present findings/ recommendations	✓	✓	✓	✓	✓	✓		
Deliver final report	✓	✓	✓	✓	✓	✓		

New Worksheets

- Nursing (3 worksheets)
- CNA
- Registered Medication Aides (RMA)
- Medicine (3 worksheets)
- Dentistry (3 worksheets)
- Pharmacists
- Pharmacy Technicians

Red indicates new material since the last BHP update.

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RMA Worksheet

SRP Worksheet for RMAs Only — **Board of Nursing**

Case Type Score (score only one)	Points	Score
a. Impairment	30	_____
b. Abuse, Abandonment or Neglect	20	_____
c. Standard of Care	20	_____
d. Misappropriation of Patient Property/Fraud	10	_____
Case Type Score		

Offense and Respondent Score (score all that apply)		
a. Patient injury with intent	50	_____
b. Past difficulties (substances, mental/physical)	50	_____
c. Financial or material gain	40	_____
d. Any patient involvement	30	_____
e. Three or more employers in past 5 years	30	_____
f. Concurrent criminal conviction	10	_____
g. Act of commission	10	_____
Offense and Respondent Score		
Total Worksheet Score (Case Type + Offense and Respondent)		

Score	
0-65	No Sanction/Reprimand
66-90	Stayed Suspension, Probation, Terms/Recommend Formal
91+	Recommend Formal Hearing

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Dentistry Standard of Care Worksheet

Offense Score	Points	Score
More than one patient involved	60	
Patient vulnerable	30	
Act of commission	25	
One or more teeth involved	10	
Patient injury	10	
Patient required subsequent treatment	10	
Multiple respondents involved	10	
Self prescribing or prescribing beyond scope	10	
Total Offense Score		

Prior Record Score	Points	Score
License previously lost	60	
Previous finding of a violation	20	
Previous violation with a sanction imposed	20	
Previous violation similar to current	10	
Criminal activity conviction	10	
Total Prior Record Score		

Sanction Grid

Prior Record Score	Offense Score: 0-40	Offense Score: 41-65	Offense Score: 66 and over
0	No Sanction/ Reprimand/Education	No Sanction/ Reprimand/ Education / Monetary Penalty	Monetary Penalty / Treatment
1-20	No Sanction/ Reprimand/ Education / Monetary Penalty	Monetary Penalty / Treatment	Treatment / Recommend Formal or Accept Surrender
21 and over	Monetary Penalty / Treatment	Monetary Penalty / Treatment	Treatment / Recommend Formal or Accept Surrender

Respondent: _____ License Number: _____

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Pharmacy Technician Worksheet

SRP Worksheet for Pharmacy Technicians

Board of Pharmacy
Adopted 9/10/2013

Case Type (score only one)	Points	Score
A. Inability to Safely Practice	35	
B. Standard of Care	25	
C. Professional Practice Issues	5	

Offense and Respondent Factors (score all that apply)		
A. Financial/Material gain	70	
B. Respondent impaired during incident	55	
C. Any Patient Involvement	35	
D. DCA Violation	30	
E. Case involved any type of drug	25	
F. Case involved opioids	30	
G. Any prior violations	15	
Total Respondent Score		

Score	Sanctioning Recommendations	Fine Amounts
0-60	No Sanction/Reprimand/Monetary Penalty	$50-$250
61-90	Treatment/Monitoring	N/A
91 and up	Loss of License/Refer to Formal	N/A

Respondent Name: _____ Date: _____

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Veterinary Medicine SRP Evaluation

Original SRP Database

All violations 1999-2005 -- 6 year “window”

208 Orders

SRP Worksheet Database

All completed SRP worksheets 2007 to 2013

75 Orders

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Vet Med’s Current SRP Worksheet

Case Type (score only one)

	Points	Score
Failure to Obtain CE	50	
Drugs or Impairment	20	
Inspections/Records	10	
Standard of Care	10	
Unlicensed Activity	5	
Case Type Score		

score only one

Patient Injury (score only one)

Death of the patient resulted	40	
Physical injury to the patient resulted	10	
Patient Injury Score		

score only one

Offense Factors (score all that apply)

Act of commission	50	
Financial or material gain by the respondent	30	
Respondent took no corrective action	30	
Past difficulties (substances, mental/physical)	30	
One or more prior violations	20	
Previous violations similar to instant offense	20	
Multiple respondents associated with case	10	
Offense Factor Score		

score all that apply

Total Worksheet Score (case type + patient injury + offense factors) _____

SCORE	Sanctioning Recommendations	Monetary Penalty Recommendations
0-49	No Sanction/Reprimand/Monetary Penalty/CE	Up to $500
50-79	Monetary Penalty/CE/Inspection	$200 to $1000
80-129	Monetary Penalty/Inspection/Treatment/Monitoring	$500 to $2000
130-199	Treatment/Monitoring/Recommend Formal or Accept Surrender	$1000 to $2000
200 or more	Recommend Formal or Accept Surrender	$2000 or more

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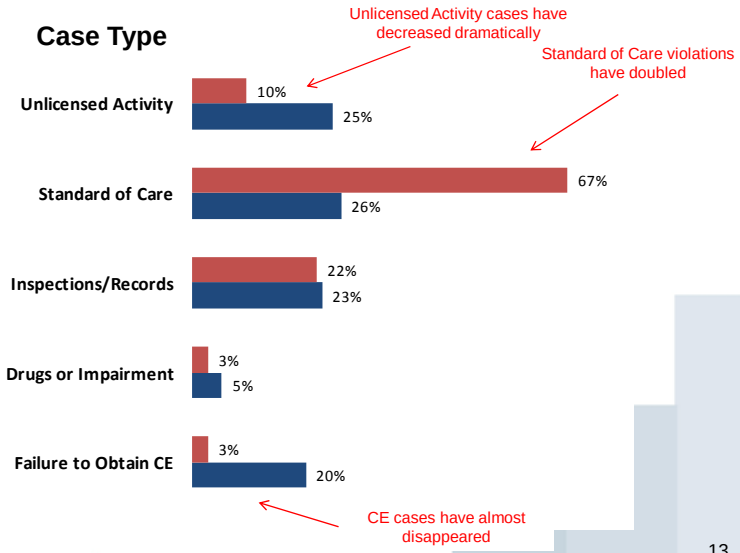
A Comparison of Case Type

Completed SRP Worksheets
2008 Sample



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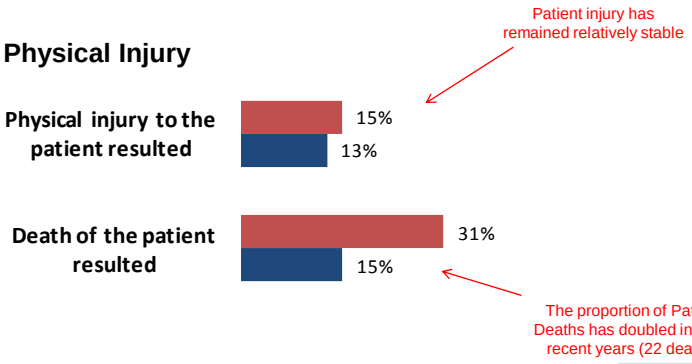

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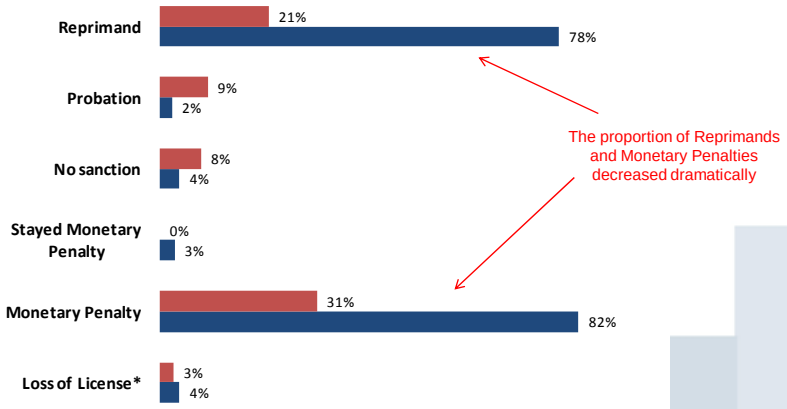
A Comparison of Case Type

Completed SRP Worksheets
2008 Sample

Vet Med Sanctions Handed Down



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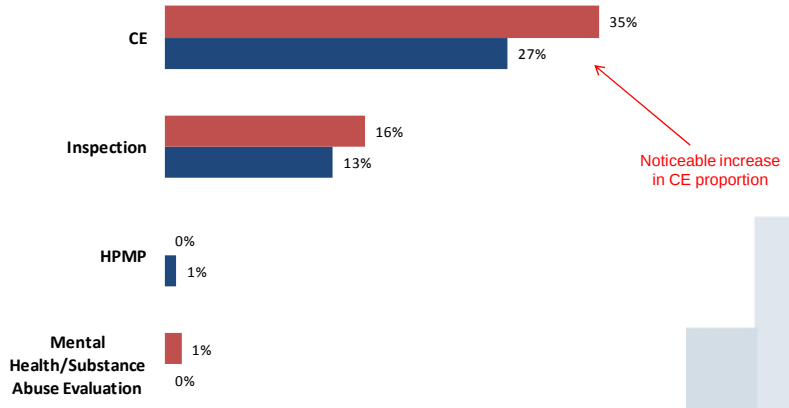
A Comparison of Case Type

Completed SRP Worksheets
2008 Sample

Terms Handed Down



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New Guidance on Vet Case Discipline

1. Guidance document: 150-8 , Adopted: May 17, 2012

   Establishes pre-defined sanctions for Practicing on an Expired License

2. Guidance Document: 150-11, Revised: June 3, 2013

   Establishes pre-defined sanctions for Failure to Complete CE

What effect did these changes have on Sanctioning Reference Points?

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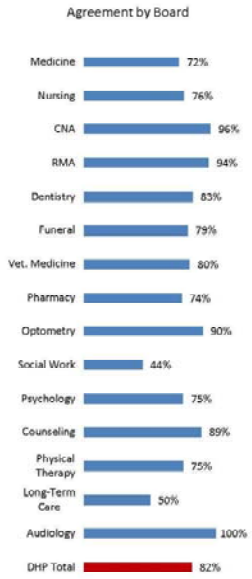
Virginia Department of Health Professions
Sanctioning Reference Points (SRP) Agreement Analysis
Data through December 31, 2014

Board	Start Date	Completed Worksheets	Agreement #	Agreement %	Aggravating Departures #	Aggravating Departures %	Mitigating Departures #	Mitigating Departures %
Medicine	Aug-04	211	152	72%	8	4%	51	24%
Nursing	Jul-05	1196	907	76%	244	20%	45	4%
CNA	Jul-05	703	674	96%	16	2%	13	2%
RMA	Jun-13	18	17	94%	1	6%		
Dentistry	Jun-06	171	141	83%	16	9%	14	8%
Funeral	May-07	28	22	79%	1	4%	5	18%
Vet. Medicine	May-07	75	60	80%	11	15%	4	5%
Pharmacy	Nov-07	85	63	74%	3	4%	19	22%
Optometry	Dec-08	10	9	90%	1	10%		
Social Work	Jun-09	9	4	44%	2	22%	3	33%
Psychology	Jun-09	8	6	75%			2	25%
Counseling	Jun-09	9	8	89%			1	11%
Physical Therapy	Nov-09	4	3	75%	1	25%		
Long-Term Care	Mar-10	6	3	50%			3	50%
Audiology	Jun-10	1	1	100%				
DHP Total		**2534**	**2070**	**82%**	**304**	**12%**	**160**	**6%**



Agency wide SRP Training

Consider public training seminar for attorneys or others

Board	Last Trained
Nursing	November 2013
Physical Therapy	August 2010
Vet Med	October 2010
Optometry	November 2010
Dentistry	December 2010
ASLP	October 2010
Pharmacy	December 2010
Funeral	April 2011
Medicine	February 2004
Behavioral Sciences	April & June 2009
LTC	Untrained
Public Training	September 2011
Enforcement/APD	-----

Trainings to Come

March 25, 2014

May 2014

Automated Worksheet Development

CNAs Only Worksheet — Board of Nursing - Adopted 3/22/11

Sanctioning Scoring Factors

Case Type Score (auto fill)	Points	Score
a. Abuse or Neglect, With Injury	70	
b. Impairment	50	
c. Inappropriate Relationship	50	
d. Misappropriation of Property	50	
e. Abuse or Neglect, Without Injury	30	
f. Verbally Inappropriate	10	
g. Standard of Care	10	
h. Fraud	10	
Case Type Score		0

Offense and Respondent Score (score all that apply)		
a. Significant and substantial danger to the public	30	
b. Impaired at the time of the incident	30	
c. Financial or material gain	20	
d. Certificate ever taken away by any jurisdiction (including VA)	10	
e. Concurrent criminal conviction	10	
f. Act of commission	10	
g. Two or more concurrent founded cases	10	
h. Patient especially vulnerable	10	
Offense and Respondent Score		0
Total Worksheet Score (Case Type + Offense and Respondent)		0
Respondent Name		

Sanction Grid

Score	Sanction
0 - 49	No Sanction Reprimand
50 - 79	Reprimand Probation Terms Recommend Formal Finding of Abuse/Neglect/Misappropriation Revocation or Suspension with or without Finding of Abuse/Neglect/Misappropriation
80 and up	Recommend Formal Finding of Abuse/Neglect/Misappropriation Revocation or Suspension with or without Finding of Abuse/Neglect/Misappropriation

Questions?

Sanctioning Reference Points Progress Report

February 25, 2014

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