

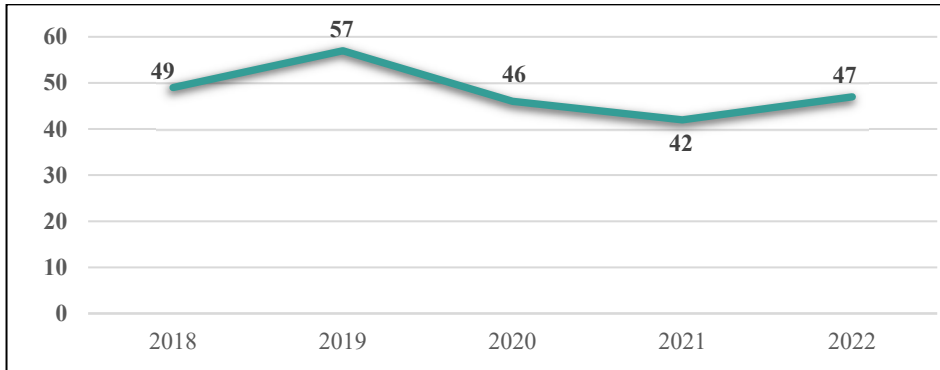
Nursing Care Quality Assurance Commission/Washington Health Professionals Services 2022 Annual Report

CONTENTS	PAGE
1. Length of time to determine eligibility for participation	2
2. Length of time from when WHPS receives the referral to the execution of the contract	2
3. Number and types of referrals	3
4. Number of nurses participating (new and existing)	3
5. Return to work rates	3
6. Successful discharge and other discharge reasons	4
7. Relapse rates and numbers	5
8. Number of nurses removed from practice and reasons for removal	5
9. Recidivism rates	6
10. Case managers' caseloads	6
11. Internal quality assurance frequency and findings	7
12. Case managers' response time to non-compliance and relapse issues	7
13. Confirmation that required documents can be tracked and verified	7
14. Findings and performance	8
15. Legal or financial components as directed by NCQAC	8
16. Results of annual procedure review and policy recommendation to NCQAC	8
17. Education, outreach plans and reports	8-9
18. Annual summary of performance measures	10

All measured results were derived from data collected between January 1 and December 31, 2022

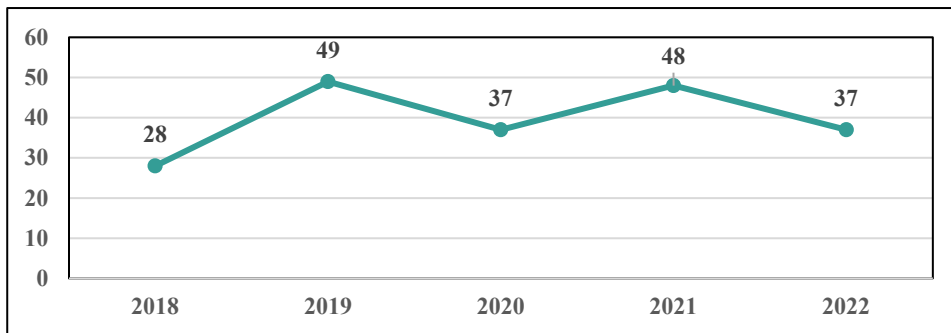
1. Length of time to determine eligibility for participation:

- Average days from intake to contract offer.

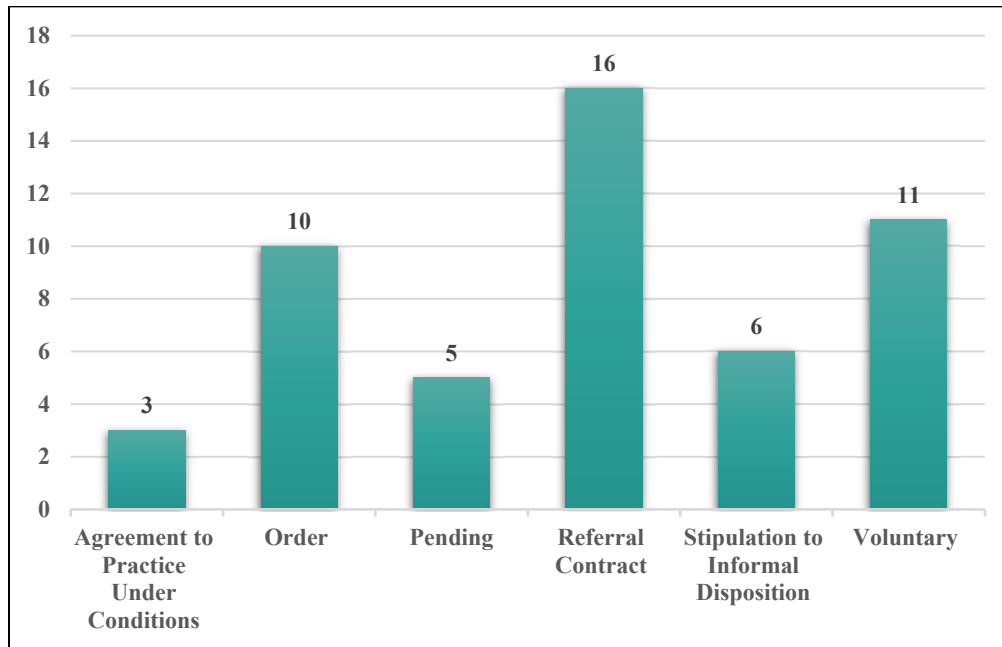


2. Length of time from when the program receives the referral to the execution of the contract:

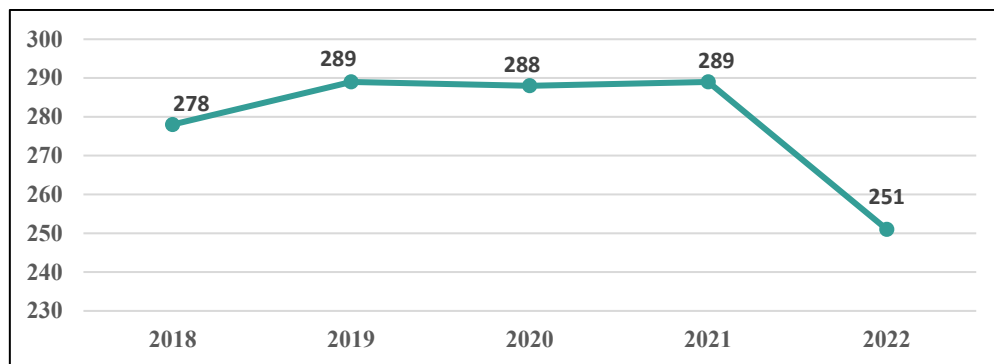
- Average days from intake to contract execution:
- WHPS offered 73 contracts to nurses in 2022, resulting in 51 signed WHPS monitoring contracts.



3. Number and types of referrals:



4. Average number of WHPS participants in 2022 (new and existing nurses):

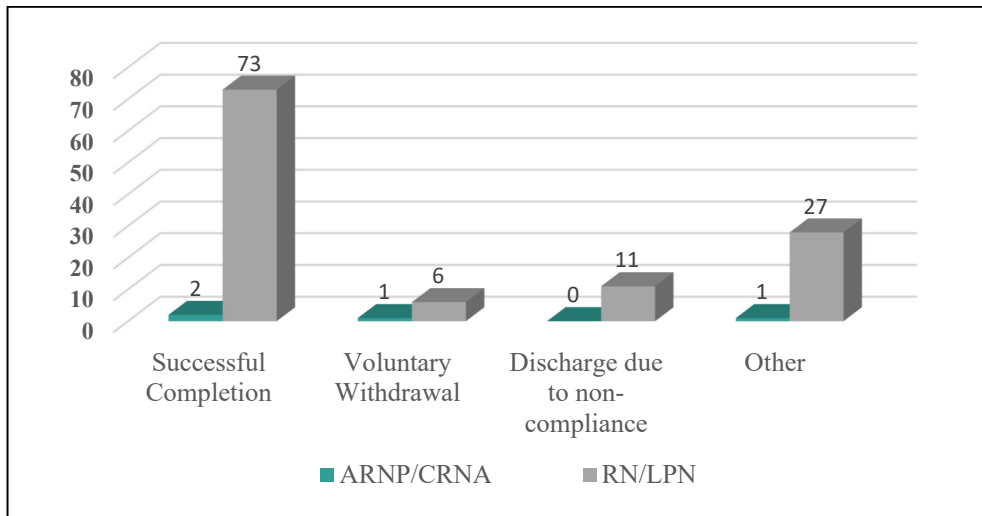


5. Return to work rates and timelines for new and existing nurses:

- In 2022, 77% of nurses were employed, totaling 179 nurses.
- The goal is to maintain 75% employment rate of nurses in active practice.

6. The 2022 Discharge rates, which include successful discharge and other discharge reasons:

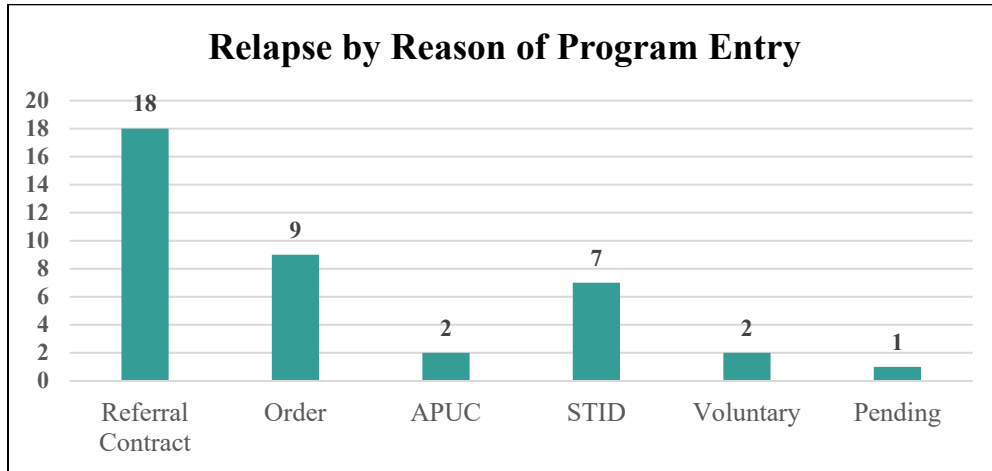
- Seventy-five (75) nurses successfully completed the program.
- Eleven (11) nurses discharged as a result of non-compliance.
- Seven (7) nurses voluntarily withdrew.
- Twenty-nine (29) nurses were discharged due to other reasons, including offer refused, medical discharge and untimely death.



7. Relapse rate/numbers:

- Thirty-nine (39) nurses that either had a positive test or relapsed in 2022, 11 nurses relapsed or tested positive due to unauthorized use more than once. WHPS processed 68 positive test results in 2022.

“Cited in W44.02, for public protection and the purposes of monitoring, the National Council of State Boards of Nursing Substance Use Disorder in Nursing (2011) defines relapse as “any unauthorized use or abuse of alcohol, medications or mind-altering substances.”

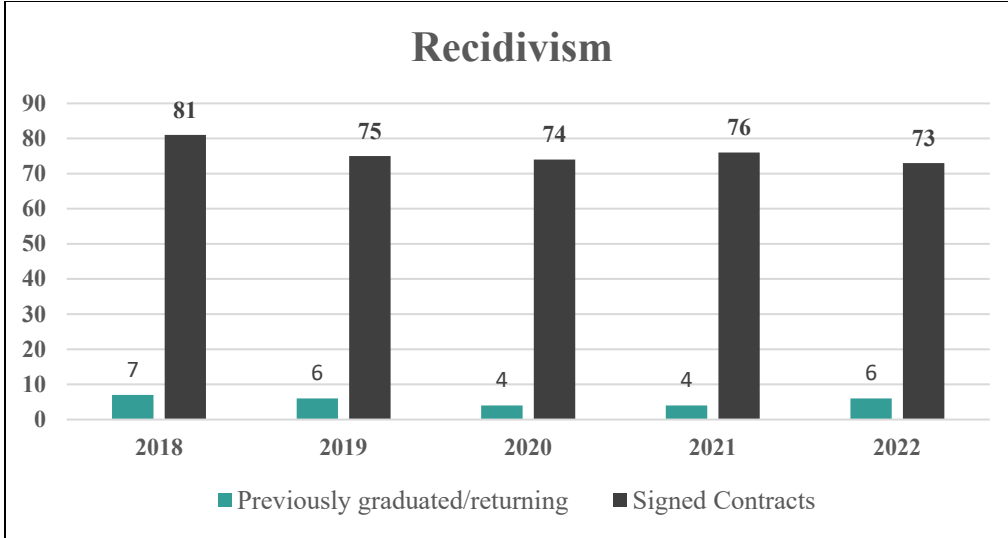


8. Number of nurses removed from practice and reasons for removal:

- In 2022, there were 39 incidents which resulted in 24 nurses being removed from practice.
- Of the 24 nurses, 11 had multiple incidences of unauthorized substance use and were removed from practice on more than one occasion.
- Of the 24 nurses, one (1) nurse was removed for prescription non-compliance.

9. Recidivism rates:

- There were six (6) nurses who had previously successfully completed the WHPS program and returned in 2022 to sign a new contract.



10. Case managers' caseloads:

- Average caseloads in 2022

Melissa Fraser:	56
Lori Linenberger:	53
Heidi Collins:	51
Alicia Payne:	51
Shelley Mezek:	50

11. Internal quality assurance frequency and findings:

2022	Total Program Participation	Average Days from Intake to Contract Signed	Average Days Positive Drug Test Turn-around Time	Incidents Referred to SUDRP	Average Days to Report an Incident to SUDRP	Number of Late Monthly Reports Submitted by Nurses	Emp. Rate	Case File Integrity, Required Documents, Up-to-date, Detailed Information	Missed Tests
Jan	250	23	5	6	23	18	75	98	3
Feb	247	20	8	9	18	14	75	97	7
Mar	280	42	7	6	20	17	74	98	8
Apr	266	39	9	3	103	16	76	100	5
May	259	43	10	4	19	19	77	96	5
June	252	37	8	9	61	19	78	100	3
July	245	41	8	4	43	17	79	98	6
Aug	244	35	5	10	22	18	80	99	0
Sep	245	47	6	5	20	15	79	100	3
Oct	241	61	3	5	20	19	78	96	8
Nov	242	36	5	5	23	17	77	97	5
Dec	238	50	5	9	29	18	79	96	8
Target		45	7		30	30	75	100	5

12. Case managers’ response time to non-compliance and relapse issues:

- A review of 2022 non-compliance and incidents determined the case managers responded to all incidents in a timely manner, followed policies and procedures, documented communication and saved all relevant documentation.

13. Confirmation that required documents can be tracked and verified:

- In an effort to continually verify program compliance and ensure all processes and procedures are followed, the assistant director of discipline, WHPS and operations manager review selected case files monthly. The purpose for this review is to confirm completeness of files and verify receipt of required documentation. This includes, but is not limited to signed contracts, release of information, treatment evaluations and reports, employment contracts and required employment reports, group participation reports, attendance reports, self-reports, up-to-date prescription information, medication management reports or other required documentation. The case file integrity data collected is included in the internal quality assurance review frequency and findings table in #11 above.

14. Findings of performance:

- The internal compliance review team completed their review February 2021. Two recommendations were to manage caseloads effectively and address role confusion between case managers and case manager associates. Two case manager associates were reallocated to case managers in late 2021. The benefits are fully visible in 2022 as caseloads lowered to an average of 52 participants per case manager. Dedicated case managers are able to provide individualized attention to participants, which has resulted in fewer instances of non-compliance, better outreach, and enhanced communication with participants.
- Another recommendation to increase communication between WHPS staff, commission members and nurse participants resulted in the development of the Substance Use Disorder Review Panel (SUDRP). The committee of commission members and staff who developed SUDRP implemented the program in July 2022. This panel consists of (6) six commission members, the assistant director of discipline, WHPS and staff, and representatives from NCQAC legal, case management and investigations. The panel meets weekly to discuss non-compliance and provide a venue for WHPS participants who have requested graduation approval or have recently graduated to come and share their WHPS experience.

15. Legal or financial components as directed by NCQAC:

- WHPS receives its funding through licensing fees.
- WHPS does not have a dedicated budget.

16. Results of annual procedure review with NCQAC:

- NCQAC leadership and WHPS staff continually review WHPS procedures to ensure they are up to date with current research and legislation. WHPS staff brings proposed changes to the NCQAC Discipline Subcommittee for review and recommendation before submitting to the NCQAC for action.

- **Procedure recommendations to the NCQAC:**

The Discipline Subcommittee (DSC) reviewed WHPS Procedure W42.03 Drug and Alcohol Testing specifically related to monitoring interruptions. After some discussion to provide clarity related to nurses who go into in-patient treatment, the DSC determined the procedure should remain the same.

The DSC also reviewed W43.01 Missed Check-Ins and Tests, specifically related to nurses experiencing challenges to testing because of pandemic limitations. Nurses find fewer test sites available and more limited lab hours. The consensus was to begin exploring the use of oral fluids as a testing option. WHPS expanded testing options by partnering with the Genotox toxicology lab through Recovery Trek. This allows nurse participants to submit their specimen from anywhere in the US by shipping their specimen in a sealed and secured package directly to the lab. This reduces the frequency of missed tests and requested monitoring interruptions.

17. Education outreach plans and reports:

In 2022 COVID-19 continued to reshape the healthcare landscape. Two fundamental shifts affecting WHPS are 1) the increased use and reliance on digital communications, and 2) a focus on proactive approaches to clinician health and well-being.

WHPS responded by connecting with nurses, employers, treatment facilities, professional associations and other groups via virtual presentations and exhibitions. In-person engagements are returning, however not to pre-pandemic levels. This is illustrated by the prevalence of online and “hybrid” education events.

WHPS is using digital and social media outreach to connect with nurses and other stakeholders where they gather and with larger audiences. Examples include, updating and expanding the WHPS webpage, writing a quarterly DOH blog column, and creating the first WHPS BONcast.

The broader issue of clinician health and well-being (high rates of burnout, depression, self-medication, and suicide) is forcing healthcare organizations to rethink their approach to culture and a sustainable workforce. The trend is to rely less on a regulatory approach and more on cultivating a positive organizational culture that supports wellness and access to supports. Some believe this may be one of the driving forces behind declining participation across the country.

Maintaining relationships with associations and other professional groups is an outreach focus as they serve as allies and a significant communication conduit. Major interested parties WHPS works with includes the Washington State Nurses Association, Services Employee International Union, Washington Center for Nursing, Washington Health Care Association, and the Northwest Organization of Nurse Leaders.

On the national scene, Dr. John Furman continues to maintain relationships with organizations such as the National Council of State Boards of Nursing, National Organization of Alternative Programs, American Society of Addiction Nursing, and International Nursing Society on Addictions. This ensures that WHPS stays apprised of current literature, best practices, and regulatory activities.

A particular point of pride is the research paper written by Kimberly D Mozingo DNP, MBA-HM, BSN, CNOR. Ms. Mozingo engaged with WHPS and the NCQAC Research subcommittee on her DNP project and produced the paper *Substance Abuse Disorder in Nursing: Evaluation and Recommendation for Regulatory Monitoring Program Performance Measures and Enhancement*, published in the *Journal of Addictions Nursing*. Ms. Mozingo received the Christine Vourakis Impact Award for having the highest social impact in 2022.

2022 outreach highlights include, but are not limited to, presentations and engagements with the following groups:

- Washington Health Care Association
- Northwest Organization of Nurse Leaders

- Washington Association of Nurse Anesthesiologists
- Washington Association of Alcohol and Drug Addiction Counselors
- Aging and Long-Term Support Administration
- Leading Age Washington
- Washington State Hospital Association

In 2023, Dr. Furman looks forward to working with NCQAC to strengthen stakeholder relationships, develop substance use disorder continuing education modules, and stage NCQAC bi-annual SUD conference. The SUD conference theme in 2023 is supporting health and resilience in nursing.

18. Annual summary of performance measures

License Type	New Intake	Average Monitoring Per Month						
ARNP/CRNA	2	19						
RN/LPN	71	232						
NT								
Total	73	251						
CONTRACTS SIGNED BY REFERRAL TYPE (IN-STATE/OOS MONITORING)								
License Type	APUC	Order	Pending	RC	STID	Voluntary	TOTAL	
ARNP/CRNA	1			1	1			
RN/LPN	2	10	5	15	5	11		
Total	3	10	5	16	6	11	51	
DISCHARGE TYPES								
License Type	Not Appropriate	Offered/ Refused	Referred Back to NCQAC	Pending Discipline	Voluntary Withdrawal	Successful Completion	Deceased	TOTAL
ARNP/CRNP	3	1			1	2		7
RN/LPN	8	14	7	4	6	73	2	114
NT								0
Total	11	15	7	4	7	75	2	121
PERFORMANCE MEASURES * Average Caseload per Case Manager								
Melissa Fraser			56					
Heidi Collins			51					
Alicia Payne			51					
Shelley Mezek			50					
Lori Linenberger			53					
Average from Intake to Monitoring - Target 45 Days						47		
EMPLOYMENT MEASURES								
2022 Employment Rates:				Employed		Not-Employed		
Percentage - Target 75%				77%		23%		

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