



Washington Health Professional Services
ANNUAL REPORT

2024

All measured results were derived from data collected between January 1, 2024 and December 31, 2024.

Washington State Board of Nursing
www.nursing.wa.gov



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01

Program direction to assure decisions are congruent with current research, knowledge, best practices and compliance with legislative and WABON directives.

Washington Health Professional Services (WHPS), in conjunction with the Substance Use Disorder Review Panel (SUDRP), is committed to providing a monitoring program that enables nurses facing the challenge of substance use disorder (SUD) to continue to practice while ensuring the safety of the public. WHPS follows the National Council of State Boards of Nursing (NCSBN) best practices related to SUD monitoring, including drug testing, attendance at mutual support groups, regular check ins, and worksite monitoring. WHPS staff regularly receive notices from RecoveryTrek and the United States Drug Testing Laboratories (USDTL) with information on updated SUD treatment processes, monitoring, testing, medications, and other related topics.

In 2024 the legislature enacted HB1255, which established a stipend fund for WHPS participants and included a provision in which disciplinary action indicators can be removed from Provider Credential Search upon successful completion of the program.

02

Results of annual procedure review with WABON.

In 2024, WHPS staff reviewed and submitted ten (10) separate procedures for board approval. Some of these changes were nonsubstantive and related to formatting after the WABON name change and re-branding. Others included modifications to case management processes following updated research and best practices.

WHPS staff and Discipline Subcommittee members provided vital input related to contract terms and conditions, case management processes, peer support groups, successful completion requirements, outreach and education, and the more generic topics of office hours and records management.

03

Confirmation that required documents can be tracked and verified.

The Assistant Director of Discipline and WHPS and the WHPS Operations Manager are responsible for consistently reviewing random case files every month. This ensures file completeness and verifies receipt of required documentation from participants, peer support group facilitators, worksite monitors, and other individuals involved in the participant's recovery.

WHPS requires a variety of documents of participants, including contracts, release of information forms, consistently updated prescription information, and treatment evaluations, as well as reports related to employment, group participation, and attendance. In addition to ensuring participants meet the requirements of their contracts, case managers are responsible for addressing noncompliance issues promptly and in adherence with WHPS procedures. Monthly reports provide statistical data that measures response consistency.

04

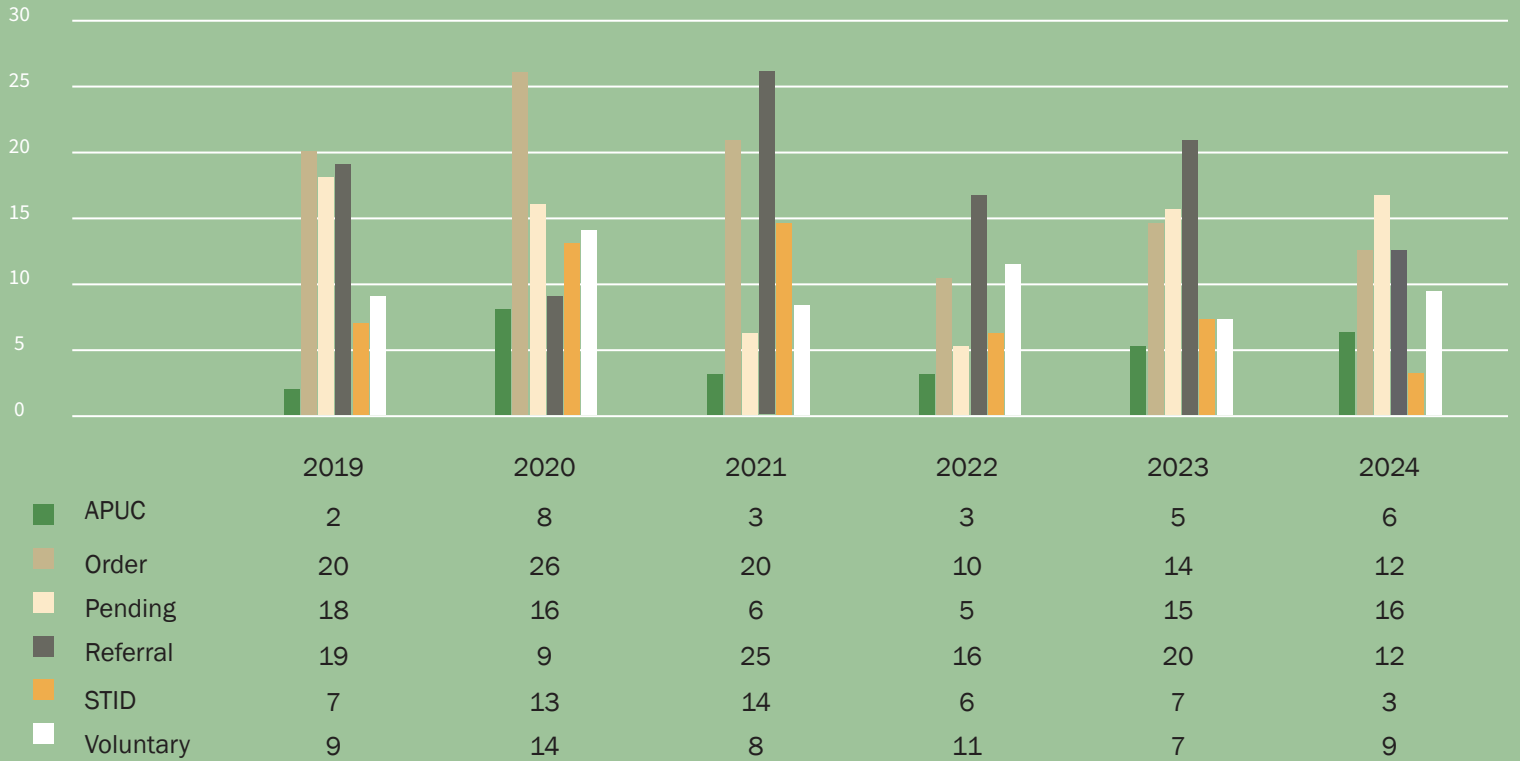
Legal or financial considerations as directed by WABON, including money awarded through the stipend program beginning in 2024.

WHPS receives funding through licensing fees and does not have a dedicated budget outside of that funding source. WHPS employs a part-time medical director, and upon Dr. David Beck's retirement, in mid-2024, WABON contracted with Daniel Roa, DNP, PMHNP to fill that role. WHPS also manages a no-cost contract with RecoveryTrek, a third-party administrator supporting SUD monitoring and compliance through a comprehensive data management system.

In July 2024 WHPS implemented the stipend program from the enactment of HB 1255. The legislature initially funded the program with \$25,000, By the end of 2024, WHPS provided financial support by defraying \$6101 in costs associated with testing costs and peer support group fees for 21 qualified applicants.

05

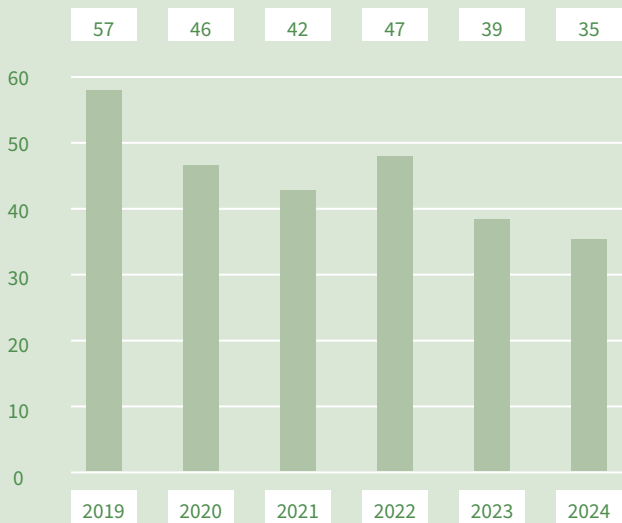
Number and types of referrals.



06

Length of time to determine eligibility for program participation.

Average Days

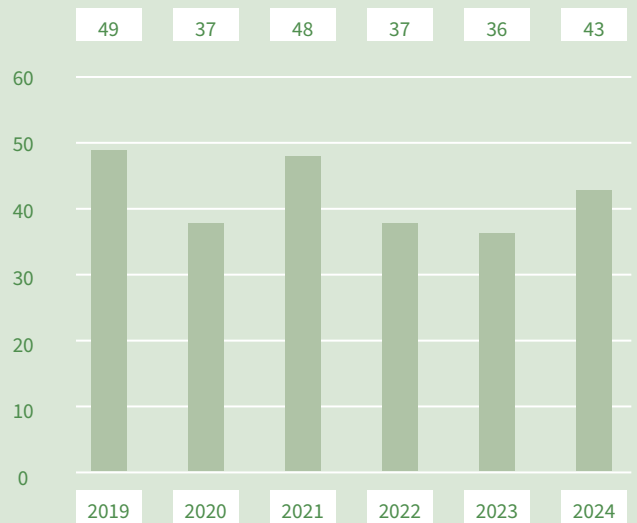


- Average days from intake to contract (agreement) offered.
- Process includes intake, evaluation recommendations, reason for entry/referral, case file review at weekly WHPS case staffing.
- Performance measure is 45 days from intake to contract offered.
- Not all contracts offered result in a signed contract.

07

Length of time from when the program receives the referral to the execution of the agreement.

Average Days From Intake to Contract Signed, Monitoring Begins



- Term agreement used interchangeably with contract.
- Average days from intake to contract (agreement) signed/monitoring begins.

08

Return to work rates for WHPS nurses working under their current credentials.

The focus of WHPS is to ensure the safety of the public, achieved by actively monitoring nurses with SUD while they are working in healthcare. WHPS encourages nurses to seek and maintain employment using their current nursing credentials. Case managers work with multiple healthcare employers to facilitate employment of nurses in the program and work with them to set appropriate guidelines and restrictions in the workplace as part of the participation contract.

Since 2019, an average of 79% of nurses enrolled in WHPS have been able to return to work under their credential while in the program.

In 2024, the percentage of nurses enrolled in WHPS and working under their credential was 82%.

09

Number of nurses temporarily removed from practice and reasons for removal.

Reasons for removal from practice include, but are not limited to:

- Positive Drug Tests
- Unauthorized use of prescription or over-the-counter medications
- Employment noncompliance
- Excessive missed tests
- Admitted relapse

37 incidents of noncompliance resulting with a nurse being removed from practice.

26 Nurses removed from practice in 2024

5 Nurses removed more than once

2 Nurses removed more than twice

2 Nurses terminated from employment upon being removed from practice

4 incidents took place within a nurse's first 90 days of enrollment in WHPS

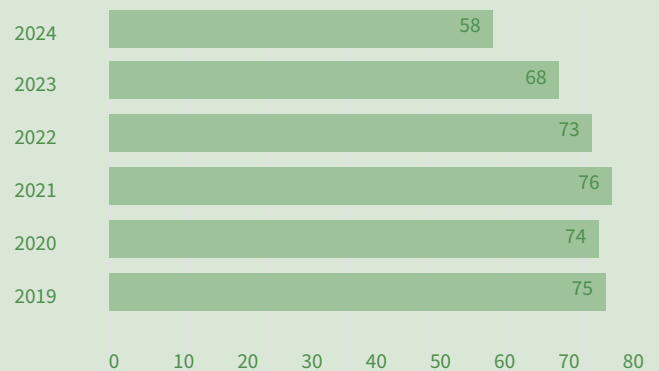
10

Recidivism rates for completers.

Returning to WHPS after successfully completing program



New Contracts offered/Signed



11

Responses of case managers to non-compliance and relapse issues.

WHPS case managers are committed to a consistent approach to monitoring participants. This is especially important when dealing with situations that result in a non-compliance incident.

Case managers must follow procedures appropriately, they must accurately document all relevant communications, and they must maintain the documents securely in the monitoring database. Monthly reports measure promptness and consistency of responses to non-compliance incidents.

Annual summary of the Substance Use and Disorder Review Panel (SUDRP) actions.

SUDRP is a group of board members with delegated decision-making authority and WABON staff, including WHPS case managers and legal staff, who review cases of nurses’ non-compliance with the program. They also review and approve completions, stipend applications, and give audience to nurses in the WHPS program who would like to address the panel.

In 2024 SUDRP reviewed 64 cases, for an average of five per month. The goal is to have no non-compliance cases to

review. There were no instances of treatment or attendance non-compliance during 2024.

Cases reviewed	64
Positive Drug Screen.....	63
Missed Test/Check in	17
Relapse	15
Other	8
Employment.....	3

Education outreach plans and report.

After Dr. John Furman’s retirement in early 2024, outreach became the responsibility of all WHPS staff members. Case managers connected often with healthcare facilities, students, human resource staff, nurse and facility managers, and healthcare executives to schedule presentations and educate about the program. In this post-pandemic world and with travel restrictions in place, WHPS staff most often presented virtually through Teams and Zoom

In addition, WHPS reached nearly 150 individuals who attended the WABON 2024 Conference: *Voice & Vision - The Possibilities* in October. Case manager Melissa Fraser, joined by two former WHPS nurse participants, provided an informative session about the program, benefits of monitoring and maintaining nursing practice, and an overview of SUD and its impact on nurses. The nurse participants provided their personal stories and their successes that WHPS supported them to achieve. WHPS also staffed an information table at the conference, providing information on the program to nurses on an individual basis.

External audit findings of performance.

Mid-year in 2024, WABON leadership identified a WHPS case manager as a strong asset to the HELMS implementation team and gave her the opportunity to support that project on a part-time basis. This resulted in an increased caseload for the other case managers.

In November, WABON reallocated two positions to maximize operations and equalize the workload. An existing support position moved into the role of operations manager, and the previous operations manager assumed the duties of case manager.

WHPS finished 2024 with one part-time and five full-time case managers, which provides additional time for case managers to perform important outreach activities in addition to their regular responsibilities.

Policy Recommendations to WABON.

In 2024, the legislature funded the WHPS-administered stipend program with \$25,000 from the general fund to support nurses struggling with the financial burden of participation in WHPS. This allotted amount is ongoing.

However, WABON sought a decision package to expand the funding to reach more applicants and cover more costs of the program beyond testing and peer support group attendance. Unfortunately, the Governor’s budget did not include that funding.



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