OREGON MEDICAL BOARD OVERVIEW
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GOALS FOR TODAY
- Understand the Board’s Purpose
  - Purpose
  - Mission
  - Members
- Understand the Board’s Role
  - Licensing
  - Regulating
  - Investigating
- Understand the Board’s Expectations
  - Professionalism
  - Quality Care
  - Resources

THE BOARD’S PURPOSE
PURPOSE, MISSION, MEMBERS
**Purpose of State Medical Boards**

- Support
- Professional
- Physician
- Rehabilitation
- Public
- Advancement

**Mission Statement**

The mission of the OREGON MEDICAL BOARD is to protect the health, safety and wellbeing of Oregon citizens by regulating the practice of medicine in a manner that promotes access to quality care.
WHAT DOES A MEDICAL BOARD DO?

2018 OREGON MEDICAL BOARD

THE BOARD’S ROLE
LICENSE TO PRACTICE MEDICINE
The licensing process is the first step in promoting quality care

...regulating the practice of medicine in a manner that promotes access to quality care

As of July 2, 2018

Acupuncturists: 1452
Podiatrists: 224
Physician Assistants: 2098
MDs and DOs: 18364

22,138 licensees as of July 1, 2018

Licensee Make Up

Renewing a License
THE BOARD’S ROLE
REGULATING THE PRACTICE OF MEDICINE

MEDICAL PRACTICE ACT
- Defines “Practice of Medicine”
- Creates the State Medical Board
- Sets Standards and Qualifications for Licensure
- Defines "Unprofessional Conduct"
- Establishes how Disciplinary Action is Taken

PA PROFESSION
PHYSICIAN RESPONSIBILITIES

- **Supervision Levels**
  - "General Supervision" - supervising physician is not on-site with the PA, but is available for synchronous communication
  - "Direct Supervision" - supervising physician must be in the facility when the PA is practicing
  - "Personal Supervision" - supervising physician must be at the side of the PA at all times, personally directing the action of the PA

- Minimum 8 hours of on-site supervision monthly (may be waived)
- Regular and routine chart review

8 HOURS ON-SITE SUPERVISION

- **NEW! Waiver Criteria:**
  - PA and physician are both in good standing with the OMB
  - Maintain NCCPA certification
  - PA has been in continuous medical practice for at least 2 years immediately preceding the request
  - PA has been in practice with this supervising physician, SPO, or at this medical practice for at least 6 months

- If criteria are met, staff may approve the PA and physician to meet monthly via synchronous technology
- If criteria are not met, staff will forward the request to the Board for additional consideration

AGENTS

- A physician designated in writing to supervise a PA when the supervising physician is unavailable for a period of time
- Must be competent to perform all duties delegated to the PA
- Assumes the same responsibilities as the supervising physician
- Agent Acknowledgment Form should be kept at the practice site (not filed with the Board)
**AGENTS**

- A physician designated in writing to supervise a PA when the supervising physician is unavailable for a period of time
- Must be competent to perform all duties delegated to the PA
- Assumes the same responsibilities as the supervising physician
- Agent Acknowledgment Form should be kept at the practice site (not filed with the Board)

*Agents are not available for Supervising Physician Organizations*

**1:4 RATIOS**

- Each physician may supervise up to 4 PAs (or as approved by the Board)
- Each PA may be supervised by up to 4 supervising physicians (or as approved by the Board)

*Ratios do not apply to Supervising Physician Organizations*
SUPERVISING PHYSICIANS ORGANIZATIONS (SPO)
- A group of supervising physicians who collectively supervises a PA
- The SPO must maintain a list of supervising physicians within the SPO and notify the Board of any changes
- Any member of the SPO may supervise the PA
- All supervising physicians must be Board-approved

PRACTICE AGREEMENTS
- A written agreement between a PA and a supervising physician that describes the manner in which the PA’s services will be used
- Submit or Modify within 10 days
- Keep a copy at practice location
- Update every 2 years (with license renewal) or when changes are made
- Terminate within 15 days

Online!
DELEGATED DUTIES

- Medical duties may be delegated by the supervising physician:
  - Services must be generally described in the practice agreement
  - Services must be within the scope of practice and the competency of the supervising physician
  - Services must be within the scope of practice and the competency of the PA
  - Services must be provided under appropriate supervision
  - PA must obtain informed consent, if required

PRESCRIBING AUTHORITY

- A PA’s prescriptions must include the supervising physician’s name, address, and phone number
- Signature must include “P.A.”
- PA’s DEA number must be included for controlled substances
- Prescribing authority must be delegated in the practice agreement

Note: Schedule II prescribing must be approved by the Board. The PA must maintain certification with NCCPA.
VIEW A PRACTICE AGREEMENT

THREE MAIN FUNCTIONS

- Licensing
- Discipline
- Regulation
THE BOARD’S ROLE
INVESTIGATIONS AND DISCIPLINE

ENFORCEMENT IS THE SECOND STEP IN
PROMOTING QUALITY CARE

Protect the public ‘from the practice of medicine by
unauthorized or unqualified persons and from
unprofessional conduct’ by licensees

CATEGORIES OF INVESTIGATIONS

- Investigations Conducted in 2017
  - Unprofessional Conduct: 31%
  - Inappropriate Care: 30%
  - Other: 16.5%
  - Inappropriate Prescribing: 10%
  - Malpractice Review: 5%
  - Sexual Misconduct: 2%
  - Personal Substance Abuse: 2%
  - Physical or Mental Disease/Impairment: 1%
  - Board Order Non-Compliance: 1.5%
**COMMON ISSUES**
- Over Prescribing Pain Medication
- Alcohol or Substance Abuse
- Sexual Misconduct
- Inappropriate Care/Incompetent Care
- Unprofessional Conduct

Very Often Caused By...
- Poor Communication
- Disruptive Behaviors
- Not Setting/Recognizing Boundaries

**INVESTIGATION OUTCOMES**

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**THE BOARD’S EXPECTATIONS**

**Professionalism, Quality Care, Resources**
**PROACTIVE PRACTICES**

- **Learn & Practice Strong Communication Skills**
  - Patients
  - Colleagues
  - Staff

- **Stay Current**
  - Medicine Changes
  - New Standards

- **Abide By Community Standards**

- **Maintain Professional Boundaries**
  - Know Them ...
  - Respect Them!

- **Don’t Become Isolated**
  - Isolation = Vulnerability

- **“You Are Human!”**
  - Get Help When Needed

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**KEEPING THE PROFESSION STRONG**

- The Board must know if a Licensee is, or may be in violation of Board rules, state law or professional and ethical standards, including:
  - Medically incompetent
  - Unprofessional or dishonorable conduct (e.g. boundary violations)
  - Impaired and thus unable to safely practice medicine

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**HEALTH PROFESSIONALS’ SERVICES PROGRAM (HPSP)**

- Confidential monitoring program for Medical, Dental, Pharmacy and Nursing licensees with a substance abuse disorder, mental health disorder, or both
  - Separate from Licensing Boards
  - Board Referral: monitoring through a Board agreement
  - Self-Referral: confidential enrollment if licensee remains in compliance
PHYSICIAN SUPPORT & OREGON WELLNESS PROGRAM FOR HEALTH CARE PROFESSIONALS

- Healthy Providers = Healthy Patients

- The Emotional and Physical Health of Providers has a Direct Effect on the Broader Public

STATEMENTS OF PHILOSOPHY

- Statements of Philosophy are adopted by the Board to express its philosophy and intentions regarding the practice of medicine in the state of Oregon

- Currently the Board has adopted 22 Statements of Philosophy:

OMB RESOURCES

- Topics of Interest webpages
- Additional information on OMB programs