



HEALTH PROFESSION CREDENTIALING IMPROVEMENT

Introductions

- Shawna Fox, Office Director, Office of Health Professions
- Harold Wright, Jr., Deputy Office Director, Office of Health Professions
- Zach Patnode, QA/CQI Administrator, Office of Health Professions
- Eve Austin, Executive Director Behavioral Health Section 7/8, Office of Health Professions
- Joseph Miller, Executive Director Behavioral Health Section 10, Office of Health Professions

HSQA Structure

- HSQA is the regulatory arm of DOH, and is composed of six offices that together regulate the health professions and facilities:
 - Office of the Assistant Secretary
 - Health Professions
 - Customer Service
 - Investigations and Legal Services
 - Community Health Systems
 - Health Systems Oversight
- Offices are arranged functionally with multiple offices engaged in the work of regulating professions and facilities

Office of Health Professions

- Regulates approximately 78 Health Profession Credentials
 - 14 are Board or Commission (appointed by the Governor)
 - 10 Advisory Committees (appointed by the Secretary of Health)
 - 54 regulated by Secretary of Health
- Works closely with partner commissions:
 - Washington Board of Nursing (WABON)
 - Washington Medical Commission (WMC)
 - Chiropractic Quality Assurance Commission (CQAC)
- Approximately 75 program staff and 100 credentialing staff (as of May 1, 2024)
- 8 profession Executive Directors, an Operations Director, and a Quality Administrator

Reimagining Profession Credentialing

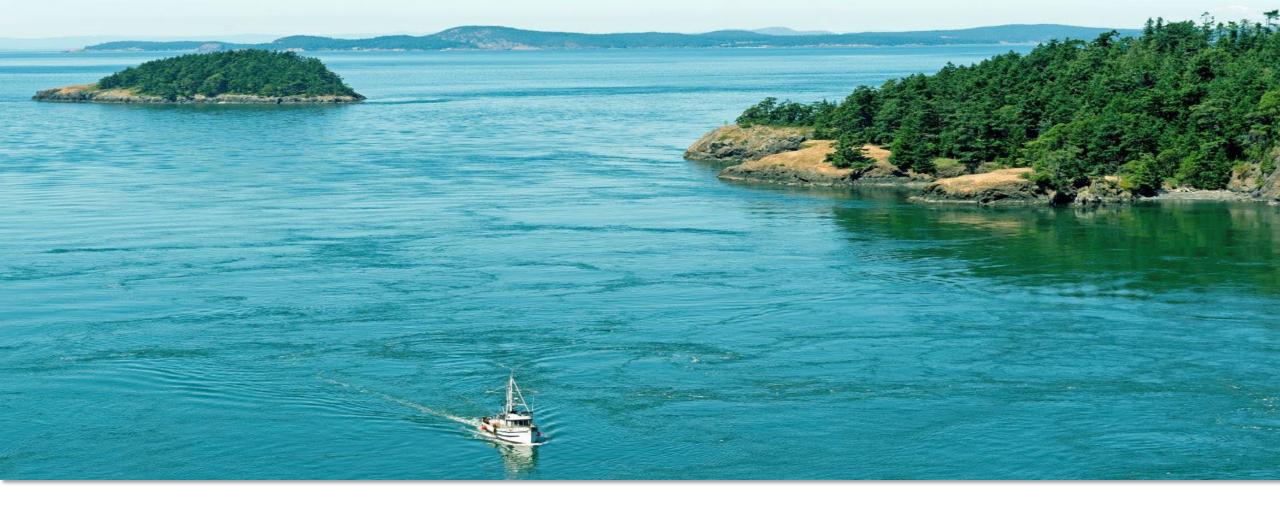
PSYCHOLOGY PILOT: PROJECT PATHWAY

Psychology Challenges

- Credentialing in Psychology is complex, and timelines can be extremely long (routine vs nonroutine, etc.)
- Can require multiple offices and the Examining Board of Psychology (EBOP) engaged simultaneously, starting very early in the process
 - EBOP has independent authority, DOH produces credentials on behalf of the board
- Multiple interested parties have been dissatisfied and focused on lengthy credentialing timelines
 - Access to care
 - Ability for psychologists to claim insurance reimbursement
 - Media attention
 - Complaints to Governor's office and legislators

Project Pathway

- Project Pathway Kickoff March 9th, 2023
 - Single leader and designated resources
 - Focus on culture, communication, and data
 - Approach:
 - Assign resources and tools to solve immediate issues
 - Create a Playbook for replication across other professions





APPROACH

Credentialing SWOT Analysis



STRENGTHS

- Support from leaders, Board, and partners
- Staff have credentialing experience
- Initial barriers identified early



WEAKNESSSES

- Urgency to action limits our ability to complete intensive root cause analysis
- Weaknesses and lack of transparency in credentialing data
- **Current operations** software (ILRS)



OPPORTUNITIES

- Collaborate with interested parties to develop efficiencies
- Beginning-to-end ownership of Profession Licensing
- **HELMS** implementation opportunities and efficiencies
- Establish a program/credentialing system that can be replicated across HSQA





THREATS

- Lack of staff redundancy in Credentialing
- Time and resource investment could weaken performance in other areas
- What we can't currently see and don't currently know

Project Pathway Goals

Improve Psychologist License turnaround time and reestablish credibility with our interested parties

SHORT

- Reducing pending credentials list to acceptable level
- Looking for quick wins

MEDIUM

- Maintain acceptable pending list
- Establish healthy boundaries between Board and DOH
- Build strong partnerships externally and internally (OCS/OHP)

LONG TERM

Continue learning and apply lessons across all health professions

Better Understanding the Pending List

Pending list breakdown by Detail Status (on 3/14/2023)

Row Labels	Count of Detail Status	Count of Detail Status2	Average of Days Since Application
FBI Background Check	9	2%	744
Nonroutine Incomplete	15	4%	1238
Nonroutine Not Yet with Board	19	5%	202
Nonroutine Waiting for Board	53	14%	665
Routine Incomplete	130	34%	385
Waiting on Applicant to Take EPPP	79	21%	1500
Waiting on Applicant to Take JP	79	21%	483
Grand Total	384	100%	709

Nonroutine Categories	Count	% of Total
Partial Credit	12	22%
Non-APA	4	7%
Non-APA Internship	6	11%
Endorsement	3	6%
Resubmission	14	26%
Other	15	28%
Total	54	100%

Scorecard

		8/8/2024	8/15/2024	8/22/2024	Target	Trend	Change
	Average days since last contact						
	Endorsement	76	77	62	45		-1
	Examination	75	72	65	45	_	-
	Temporary	80	56	43	30		-13
	Average days since last submission						(
_	Endorsement	86	89	106	90	,	1
Leading	Examination	92	92	87	90		-
Bu	Temporary	115	119	154	90		3
	Average Days Aged (Pending)	544	516	505	Х		-1
	Temporary	255	186	213	X		2
	Endorsement	339	328	390	X		6
	Examination	550	529	537	X		
	Nonroutine	903	904	821	X		-8
	Intakes	16	15	19	12		
	Temporary	36	36	36	17		
	Routine Incomplete Endorsement	17	18	15	18		-
P	Routine Incomplete Examination	45	47	48			
Pending Credentials	Nonroutine Incomplete	38	38	34		_	-
, m	Military	2	2	2	3		
řed	Exception	9	9	10	Х		
enti	Final	19	22	15	5	_	
als	FBI Background Check Only	24	17	18	Х		
	Initial Background Check	2	2	1	X		-
	EPPP Exam	92	93	93	X		
	JP Exam	10	9	9	X		
	Total	310	308	300	X	_	

Type of supervised hours (may be more than one): Practicum Preinternship Internship Post-doctoral Are the supervised hours you're attesting to the: Original submission Resubmission Please provide an explanation as to why the hours are being resubmitted:		Professional Reference Request (Cont.)
Are the supervised hours you're attesting to the:	Na	me of facility/institution where applicant obtained supervised experience
Practicum Preinternship Internship Post-doctoral Are the supervised hours you're attesting to the :	Ap	plicant's position title
Are the supervised hours you're attesting to the :	1.	Type of supervised hours (may be more than one):
Please provide an explanation as to why the hours are being resubmitted: 2. Describe briefly the applicant's duties as you knew them in the position listed above:		☐ Practicum ☐ Preinternship ☐ Internship ☐ Post-doctoral
2. Describe briefly the applicant's duties as you knew them in the position listed above: Second	Ar	e the supervised hours you're attesting to the : Original submission Resubmission
3. If you were a supervisor of the applicant's practicum, please complete the following: A. Dates of supervised experience: From	Pl	ease provide an explanation as to why the hours are being resubmitted:
A. Dates of supervised experience: From	2.	Describe briefly the applicant's duties as you knew them in the position listed above:
B. Total number of hours of practicum experience you supervised:	3.	If you were a supervisor of the applicant's practicum , please complete the following:
C. Practicum hours spent in supervision (see <u>WAC 246-924-049</u> for the definition of "supervision" in the Practicum)? 4. If you were a supervisor of the applicant's <u>preinternship</u> experience, please complete the following: A. Dates of supervised experience: From		
4. If you were a supervisor of the applicant's preinternship experience, please complete the following: A. Dates of supervised experience: From		C. Practicum hours spent in supervision (see WAC 246-924-049 for the definition of "supervision" in the
A. Dates of supervised experience: From	1	,
B. Number of hours of direct client contact providing assessment and intervention services: C. Number of hours of regularly scheduled, formal face-to-face individual supervision that addresses the direct psychological services provided by the applicant: D. Number of hours of other learning activities such as case conferences, seminars on applied issues, conducting cotherapy with a staff person including discussion of a case, and group supvervision: S. If you were a supervisor of the applicant's Internship experience, please complete the following: A. Was the internship site APA accredited or approved by APPIC? Yes No B. Dates of supervised experience: From To C. Number of hours of direct client contact providing assessment and intervention services: D. Number of hours of regularly scheduled, formal face-to-face individual supervision that addresses the direct psychological services provided by the applicant: Professional Reference Request (Cont.) F. Number of hours of other learning activities such as case conferences, seminars on applied issues, conducting cotherapy with a staff person including discussion of a case, and group supervision: 6. If you were a supervisor of the applicant's post-doctoral or other experience, please complete the following: A. Dates of supervised experience: From To B. Total number of hours of professional activity you supervised:	٠.	
psychological services provided by the applicant: D. Number of hours of other learning activities such as case conferences, seminars on applied issues, conducting cotherapy with a staff person including discussion of a case, and group supvervision: If you were a supervisor of the applicant's internship experience, please complete the following: A. Was the internship site APA accredited or approved by APPIC? Yes No B. Dates of supervised experience: From To C. Number of hours of direct client contact providing assessment and intervention services: D. Number of hours of regularly scheduled, formal face-to-face individual supervision that addresses the direct psychological services provided by the applicant: Professional Reference Request (Cont.) F. Number of hours of other learning activities such as case conferences, seminars on applied issues, conducting cotherapy with a staff person including discussion of a case, and group supervision: 6. If you were a supervisor of the applicant's post-doctoral or other experience, please complete the following: A. Dates of supervised experience: From To B. Total number of hours of professional activity you supervised:		
D. Number of hours of other learning activities such as case conferences, seminars on applied issues, conducting cotherapy with a staff person including discussion of a case, and group supvervision: Solid		
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C. Number of hours of direct client contact providing assessment and intervention services: D. Number of hours of regularly scheduled, formal face-to-face individual supervision that addresses the direct psychological services provided by the applicant: DH 668-041 August 2022 Page 2 of 4 Professional Reference Request (Cont.) F. Number of hours of other learning activities such as case conferences, seminars on applied issues, conducting cotherapy with a staff person including discussion of a case, and group supervision: 6. If you were a supervisor of the applicant's post-doctoral or other experience, please complete the following: A. Dates of supervised experience: From		
D. Number of hours of regularly scheduled, formal face-to-face individual supervision that addresses the direct psychological services provided by the applicant:		
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B. Total number of hours of professional activity you supervised:	6.	conducting cotherapy with a staff person including discussion of a case, and group supervision: If you were a supervisor of the applicant's post-doctoral or other experience, please complete the
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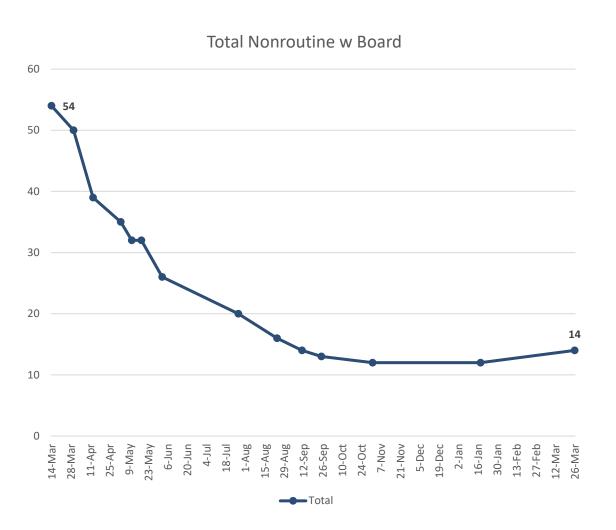
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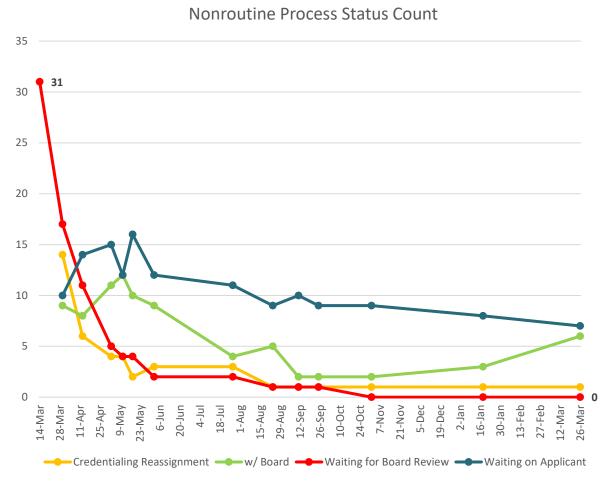
			Verified
A.	Direct Experience		
В.	Hours of Supervision, as defined in WAC 246-924-049		
C.			
verlap. lote to locume	ernship (WAC 246-924-053) Preinternship occurs betweer A maximum of 1500 hours can account for this experience. applicant: if claiming hours in this category and it hasn't airead, nt where you and the program documented the goals, student	y been submitted, please ensu expectations, and the method	ure you include the
ates o	f supervised experience: From// T	0	
	Direct client contact hours providing concerns:	Minimum Hours Required	Total Hours Verified
A.	Direct client contact hours providing assessment and intervention services	At least 60% of total hours	
	Regularly scheduled, formal face-to-face individual supervision that addresses the direct psychological services provided by the applicant	At least 2 hours out of every 20 hours of experience (at least 10% of total hours)	
C.	Other learning activities or indirect experience e.g. case conferences, seminars on applied issues, conducting cotherapy with a staff person including discussion of a case, and group supervision	At least 2 hours out of every 20 hours of experience (at least 10% of total hours)	
D.	Total Hours for this Preinternship Experience	A + B + C = D	
ubmitte itemsh	internship site APA accredited or approved by APPIC? \[Yes applicant. if claiming hours in this category, the internship was d, please ensure you include the written statement or brochure ip. I supervised experience: \[From \[/ / \] \] T	e that describes the goals and	
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ubmittensh dates o	applicant: if claiming hours in this category, the internship was ct, please ensure you include the written statement or brochure ip. I supervised experience: From/ T	Minimum Hours Required At least 25% of total hours At least 2 hours out of every 40 hours of experience (5% of total	Total Hours
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Practicum (WAC 246-924-049) Must be at least nine months in length and 300 hours of direct experience, 100 hours which must be in supervision. No more than 300 hours may count towards licensure. Additional hours accrued past the completion of the nine-month practicum that meet the preinternish prequirements may be reported under the

Dates of supervised experience: From _____/

Nonroutine Progress





Average Time to Licensure Improvements

Application Date	Numbers of Issued by Path	y Project	Average Number of Days Between Application Date and License Issuance					
	Licenses	Temporary Permits	Licenses	Temporary Permits				
12/29/2011 – 12/9/2022	131	3	647	188				
12/9/2022 – 3/9/2023	43	25	173	63				
3/10/2023 – 5/13/2024	156	162	102	35				
Total Licenses Issued	330	190						

Cultural and Interpersonal Framework

How do we see our work?

- People-first and human-centered management (Resetting our Human Capital)
- Construct and reform systems, culture, and language to take ownership of the entire licensing application process
 - From receipt of application to issuance of license
 - Current procedure does not meet the need
 - Long wait times and pending application lists

How do we change and continuously improve?

- Data-driven management
 - Making the invisible, visible
- Language matters
 - (deficient → incomplete, backlog → pending)
- Maximizing partnerships (Associations, Boards/Commissions, Legislation)
- Evaluate issues and implement improvements previously raised but unable to be addressed

Credentialing Reorganization Phases



March 1st, 2024

Behavioral Health **Professions**

Home Care Aides

4 teams, 46 FTEs



April 1st, 2024

Pharmacy

Dental

Acupuncture/ Eastern Medicine

Nursing Assistants (Cert/Reg), **Medical Assistants** (Reg)

3 teams, 32 FTEs



May 1st, 2024

Therapy **Professions**

Medical **Professions**

Veterinary

Vision Professions

3 teams, 25 FTEs

Where are we today?

PROFESSION CREDENTIALING IMPROVEMENTS

Team and Training (Leadership Resources)

- Preparing our Leaders to support Credentialing Staff
 - Tools for leading larger teams
 - Establishing a Quality Team
 - Managing team dynamics by empowering dynamic leadership
- Meeting cadence
 - Pre-transition team building
 - Daily Morning Huddles
 - Weekly Tacticals with Scorecard Review
- Training
 - Mentorship
 - Leveraging expertise and knowledge
 - Developing from least complex to most complex

Behavioral Health: AACs, CCCs, ABA professions, Hypnotherapist, and SUDP

		Pending							Final			
Profession Name	8/8/2024	8/15/2024	8/22/2024	Pending Apps Target (3mo Received)	Trend	8/15/2024	8/22/2024	Intakes Target (.5mo Received)	8/8/2024	8/15/2024	8/22/2024	Finals Target (.5mo Received)
Counselor Agency Affiliated Registration	2072	2024	1993	1240	ļ	19	30	207	632	606	589	207
Counselor Agency Affiliated Certification	188	193	203	42		2	1	7	5	6	6	7
Counselor Agency Affiliated License	273	268	273	50	\rightarrow	0	0	8	51	42	47	8
Licensed Assistant Behavior Analyst	37	40	41	31		7	4	5	4	5	5	5
Certified Behavior Technician	569	575	574	470		12	8	78	173	187	175	78
Licensed Behavior Analyst	49	56	60	49		1	7	8	19	25	30	8
Counselor Certified Certification	78	75	74	26	1	0	0	4	0	8	10	4
Counselor Certified Adviser Certification	2	2	2	0	• • • •	0	0	0	0	0	0	0
Hypnotherapist Registration	2	2	4	26		0	1	4	0	0	0	4
Substance Use Disorder Professional Certification	236	236	234	58		0	0	10	47	44	51	10
Substance Use Disorder Professional Trainee Certification	113	115	127	130		1	2	22	27	32	42	22
Totals	3619	3586	3585	2122	/	42	53	354	958	955	955	354

Behavioral Health: MHC, LMFT, SW, Psychologist, and SOTP

	Pending			Intakes			Final								
Profession Name	8/15/2024	8/22/2024	8/29/2024	Pending Targ	Trend	8/15/2024	8/22/2024	8/29/2024	Intakes Targ	Trend	8/15/2024	8/22/2024	8/29/2024	Finals Targe* (.5mo receivea)	Trend
Marriage and Family Therapist Associate License	105	111		81		48	11	6	12		3	7	1	12	-
Marriage and Family Therapist License	235	235		152		45	53	6	13	-	10	14	19	13	
Marriage and Family Therapist Probationary License	35	31		15		11	13	2	5		3	1	4	5	
Marriage and Family Sub Total	364	364		248	-	104	77	14	30	-	16	22	24	30	
Mental Health Counselor Associate License	547	560		373		136	77	77	10		28	65	62	2	
Mental Health Counselor License	538	524				142	153	135			66	44	58		
Mental Health Counselor Probationary License	67	63		45		35	33	38	0		1	1	2	51	
Mental Health Sub Total	1123	1123		418	•	313	263	250	115		95	110	122	107	
Social Worker Advanced License	81	77		31		2	2	4	3		1	2	0	3	
Social Worker Advanced Probationary License	11	12		10		0	0	1	0		1	1	0	1	
Social Worker Associate Advanced License	47	48		68		6	8	3	10	-	1	0	4	10	
Social Worker Associate Independent Clinical License	257	260		284		53	23	28	41	•	41	70	51	41	
Social Worker Independent Clinical License	1105	1089		542		145	146	141	54	-	41	39	40	54	
Social Worker Independent Clinical Probationary Licens	35	37		35		12	13	18	4		0	0	2	2	
Social Work Sub Total	1541	1541		970		218	192	195	112		85	112	97	112	
Psychologist License	264	238		70		5	7	6	12		х	X	х	12	• • • •
Psychologist Probationary License	3	4		1		0	0	6	1		x	X	х	1	• • • • •
Psychologist Temporary Permit	43	38		12		4	6	1	6		x	x	х	6	• • • •
Psychology Sub Total	314	314		83	•	9	13	13	18		0	0	0	18	• • • • •
Sex Offender Treatment Provider Affiliate Certification	4	4		1		0	0	0	0		0	0	0	0	• • • •
Sex Offender Treatment Provider Certification	3	3		1		0	0	0	0		0	0	0	0	• • • •
Sex Offender Treatment Sub Total	7	7		2		0	0	0	0		0	0	0	0	
Total W/O Sub Totals	3380	3334		1721	/	644	545	472	169	-	196	244	243	211	

Early Success

	Unreviewed Applic	ant Submissions		Intake	Final		
	March-24	Current	March-24	Current	March-24	Current	
Behavioral Health Team 1	1328	321 (oldest 6/17)	825	54 (oldest 6/29)	312	764	
Agency Affiliated Counselors			651	29			
Behavioral Health Team 2	950	763 (oldest 5/8)	349	651 (oldest 5/16)	425	302	
Home Care Aides	5851 (oldest 6/2023)	3183 (oldest 4/30)	5204	4670 (oldest 12/28/23)	280	86	

New Metrics and Overall Improvements

	Avg Issue: Rec'd Monthly	Avg Resolved: Received Monthly
2021	0.81	0.93
2022	0.83	0.94
2023	0.76	0.87
2024 Through 5/30	0.85	1.00

Next Steps

Data-driven management:

- Move initial scorecard for all credentials to weekly cadence (from monthly),
- Set meaningful targets,
- Pursue more detailed data as resources allow.

Policy Alignment:

• Work remains in aligning policies and procedures, while not yet fully understood, we will create consistency across both teams.

Technology Evaluation:

- Are there any technology needs to enhance daily work experience.
- Consider compatibility issues with their phone system and addressing call volumes.

Staffing and Resource Allocation:

- Evaluation of staffing levels and resource allocation.
 - Working with HSC3 Supervisors on assessment and forecast of workload distribution, staff development needs and retention.
 - Examples: address the cyclical cycle of temporary positions, improve leadership development and succession planning.

Constituent Engagement:

- Engaging with profession providers, professional associations, and our BCC's.
- Clear communication to mitigate any potential concerns and reestablish credibility. Example: update each professions website and provide FAQ's.

Credentialing Improvement Initiatives

- Add resources and tools to Credentialing Staff/utilize existing more effectively
 - Health Enforcement and Licensing Management System (HELMS)
 - Updated, improved, and additional training materials
 - Additional staff
 - New phone lines/team mailboxes
- Add resources and tools to Program Staff/utilize existing more effectively
 - Nonroutine trackers and handoff checklists
 - Adjusted ILRS access
 - **Pro Tem Board Members**
 - Additional staff
- Improve information available to applicants
 - Website/FAQs/Visuals
 - Improved applications and forms
 - Partner with Associations and interested parties
- Streamline processes
 - **Nonroutine**
 - 1724 Section 8/9

HELMS Lite: Improving the Customer Experience

- Launched April 24th, 2024
- This is the first of three launches for the HELMS system (February 2025 and Q4 2025)
- Replaces the existing customer application portal
- Applicants will now have the ability to:
 - Submit applications from their mobile phone or device
 - Update their profile (Locate and edit applications)
 - Significantly reduce paper applications and streamline process
 - Significantly reduce call volume for status updates
 - Delete draft applications
 - Attach required documentation
 - Print payment confirmation and receipt





QUESTIONS?

Contact

- Shawna Fox, Office Director, Office of Health Professions
 - Shawna.Fox@doh.wa.gov
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