



STATE OF WASHINGTON
DEPARTMENT OF HEALTH

**Podiatric Medical Board
Meeting Minutes**

October 21, 2021
9:00 a.m.

On Thursday, October 21, 2021, the Podiatric Medical Board held a business meeting via Webinar. In accordance with the Open Public Meetings Act, notices were sent to individuals requesting notification of meetings.

BOARD MEMBERS:

Randy Anderson, DPM, Chair
Jacqueline Buckley, DPM
Zarko Kajgana, DPM
Lotchie Kerch, DPM, Secretary
DJ Wardle, DPM, Vice Chair
Civillia Winslow Hill, Public Member

STAFF PRESENT:

Susan Gragg, Program Manager
Renee Fullerton, Executive Director
Davis Hylkema, Assistant Program Manager
Noelle Chung, Assistant Attorney General
Ashley Maxwell, Supervising Staff Attorney
Heather Cantrell, Policy Analyst

OTHERS PRESENT:

Lynn Kovacevich Renne, DPM – WSPMA
Gail McGaffick, JD – WSPMA

1. **Call to Order/Introductions**

Chair Randy Anderson, DPM, called the meeting of the Washington State Podiatric Medical Board to order at 9:03 a.m. on October 21, 2021. The board made the following actions for these agenda items:

1.1 **Introductions**

The board members, staff, and guests introduced themselves.

1.2 **Approval of agenda**

MOTION: A motion was made to approve the October 21, 2021 business meeting agenda. The motion was seconded and unanimously approved.

1.3 **Approval of July 15, 2021 meeting minutes**

MOTION: A motion was made to approve the July 15, 2021 meeting minutes as presented. The motion was seconded and unanimously approved.

2. **Rule Workshop**

The board held a rule workshop to solicit stakeholder input on possible amendments to the continuing medical education (CME) rules in WAC sections [246-922-300](#) and [246-922-310](#) in accordance with the CR101 filed August 10, 2021, as WSR # 21-17-050.

The board considered the following amendments suggested by the Washington State Podiatric Medical Association (WSPMA):

1. Include language in WAC 246-922-300 to recognize maintenance of specialty board certification as meeting the 100 hour CME requirement;
2. Decrease the minimum requirement in Category 1 from 50 credits to 40 credits;
3. Include the flexibility to recognize those courses completed for Category 1 and 2 whether they are attended in-person, remotely, or that are pre-recorded;
4. Include language in Category 1 that specifically identifies the Council on Podiatric Medical Education (CPME) and the Accreditation Council for Continuing Medical Education (ACCME); and
5. Amend Category 3 as follows:
 - a. Increase the maximum allowable credits from 50 to 60;
 - b. Increase each subcategory limit from 20 to 30; and
 - c. Expand some clarification for some subcategories, as well as include a new subcategory for proctoring new podiatric physicians (a new requirement being implemented for some hospitals).

In addition, Ms. Gragg reported that the two rule sections use the terms “continuing education” and “continuing medical education”. She suggested amendments to use “continuing medical education” throughout for consistency.

As well, the board determined to include clarification language that the completion of a residency or fellowship program year during the practitioner’s CME cycle meets the full 100 credit requirement for that cycle.

MOTION: A motion was made to accept the suggested amendments as presented. The motion was seconded and unanimously approved.

3. **Old Business**

3.1 Interpretive Statement PO 99-44

The board considered proposed amendments to their Interpretive Statement regarding podiatric physicians performing histories and physicals for surgical procedures. The intent for filing an Interpretive Statement with the Office of the Code Reviser is for it to be a stand-alone document, where a general layperson could read it and understand the board’s intent. The original version was somewhat brief and appeared to be unclear as to whether it applied only to foot/ankle surgical procedures or for any surgical procedure. The board considered suggested amendments to include background information on the basics of histories and physicals, podiatric education and training, and applicable law and rule.

MOTION: A motion was made to approve the suggested amendments as presented. The motion was seconded and unanimously approved.

4. **New Business**

4.1 COVID-19 follow-up

Based on the continued timing uncertainty of the declared state of emergency, Ms. Gragg recommended extending the board's CME policy another six months, through June 30, 2022.

MOTION – A motion was made to extend the COVID-19 CME policies through June 30, 2022. The motion was seconded and unanimously approved.

4.4 Correspondence/Inquiries

The board reviewed and discussed correspondences received since the last meeting.

There were no correspondences or inquiries received.

5. **Program Reports**

5.1 Budget report

Ms. Gragg shared a brief budget chart for the first three months of the 2021-2023 biennial budget, as well as the full budget status report for the 2019-2021 biennium. The Department of Health has not yet "closed the books" so further updates should be available at the next business meeting. She explained that once the current disciplinary cases are resolved, the financial report will give a more realistic view of the budget numbers but overall, the budget is in good standing.

5.2 Statistics reports

As of October 11, 2021, the current credential count report shows total active licensees to be 359, 7 with licenses in inactive status, 6 with licenses in retired active status, and 19 with post-graduate training limited licenses.

In addition, the active disciplinary case report shows four marked for closure, four in investigation; twelve in RBM/SA review, and ten in adjudication.

Ms. Gragg also included a chart showing case allegation trends from January 2017 through September 2021; these trends are those allegations assigned at the intake phase and include all cases received, even those that were closed at assessment. The board had questions about how their statistics compare to other boards and commissions; Ms. Gragg was directed to provide links to the Health Professions Regulatory Activities Reports (also known as "UDA Reports") that include consistent reporting of statistics for all the health professions (regulated by the Secretary and boards/commissions) for comparison purposes.

5.3 Continuing education audit report

There were no updates.

5.4 Recruitment update

Ms. Gragg shared with the board that the public member recruitment packet is still in review at the Governor's office.

5.5 Other reports

None.

6. **Open Forum**

Public attendees are provided time to address the board on issues of significance to or affecting the practice of podiatric medicine and that are not related to topics for which a rules hearing was or will be scheduled.

There were no open forum items.

7. **Future Business**

The board discussed adding the following items to the agenda for future meetings:

- Discussion on histories and physicals for medical admissions for infections.

8. **Settlement Presentations**

Settlement and/or Agreed Order presentations are contingent upon agreements being reached between the parties prior to a board meeting. Discussions are made in closed session; however, decisions are made during open session.

There were no settlement presentations.

9. **Adjournment of public meeting**

Randy Anderson, DPM, Chair, adjourned the meeting at 10:09 a.m.

10. **Discipline and Licensing**

The board attended to licensing and disciplinary matters.