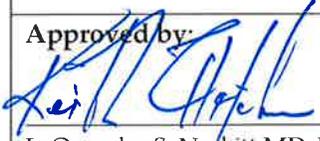
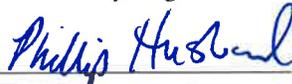


District of Columbia Department of Health <h2>Quality Assurance Audits for Health Professional Licensure</h2>		PROCEDURE 1411.000 Implementing Office: Health Regulation and Licensing Administration Training Required: Yes Originally Issued: Revised/Reviewed: NOV 05 2018
Approved by:  LaQuandra S. Nesbitt MD, MPH; Agency Director	Review by Legal Counsel:  Phillip Husband, Esq.; General Counsel	Effective Date: NOV 05 2018 Valid Through Date: NOV 05 2021

I. Authority	Reorganization Plan No. 4 of 1996; Mayor’s Order 1997-42; District of Columbia Health Occupations Revision Act of 1985, effective March 25, 1986 (D.C. Law 6-99; D.C. Official Code § 3-1203.02) (“HORA”); Mayor’s Order 98-140; 17 DCMR § 4000.1 <i>et seq.</i>
II. Reason for the Policy	The Health Regulation and Licensing Administration (HRLA) within the Department of Health (DC Health) is responsible for licensing, certifying or registering health professionals in order for them to practice in the District of Columbia. This responsibility necessitates a robust quality assurance (QA) function to ensure that applicants for initial and renewal licensure, certification or registration possess all qualifications required for health professional licensure, certification or registration. Periodic QA audits of applications are necessary to ensure that licenses, registrations or certifications have only been issued to applicants meeting all statutory and regulatory requirements and that the review process has been carried out in a timely and effective manner
III. Applicability	This SOP shall apply to all employees, contract staff, interns, volunteers, and summer youth employees within HRLA (referred to collectively hereafter as “employees” or “HRLA employees”) whose job duties include any component of receiving or processing applications for licensure, registration or certification as a health professional, or the issuance of health professional licenses, registrations or certifications.

IV. Policy Statement

Every category of health professional license, registration or certification is issued by the Director of DC Health, or his or her designee, after the board regulating the health occupation, composed primarily of professionals within that occupation, determines that an applicant for a license, certificate, or registration meets all of the requirements for the license, certificate, or registration under the HORA and the applicable regulations. Each board has an Executive Director (ED), a HRLA employee responsible for the board's daily operations.

The final authority to determine if an applicant has met all requirements established by regulation to assure that the applicant has had the proper training, experience, and qualifications to practice the health occupation resides with the appropriate occupational board. This authority may be delegated to the ED. An ED may only exercise this authority if the board has formally delegated that authority within the current calendar year, and that delegation is documented in the board's official minutes. The ED may then delegate that authority to other staff, if such authority is also delegated and documented in the same manner as outlined above. If the ED does delegate authority to other staff, the ED will ensure said staff is adequately trained to properly review and approve licenses. This process will culminate in written statements, signed by all staff authorized to approve applications, acknowledging they have read and understand all requirements for licensure. The EDs will be responsible for creating this acknowledgment form, and for ensuring staff is kept up to date on any change in licensure requirement. Should a change in requirements occur, the EDs shall be responsible for obtaining updated acknowledgements from staff.

The EDs shall conduct periodic QA audits of health professional applications to ensure that applications are complete and that licenses, registrations, or certifications have only been issued to applicants meeting all appropriate statutory and regulatory requirements.

The Senior Deputy Director of HRLA (SDD), or designee, shall issue an audit checklist template to all EDs. The SDD may revise and reissue the template at his/her discretion. The template may be in electronic or paper form and shall include the identity of the person completing such checklist.

The template may include, but not be limited to, confirming the following:

For approved licensure, registration or certification applications:

1. For paper applications, that the information entered by HRLA into the electronic licensure system is accurate and matches what was submitted by the applicant;
2. All required documents for approval of licensure, registration or certification, as set forth by statute and regulations and board policies, were received;
3. The documents submitted (e.g., transcripts, licensure verifications, CBC results, etc.) meet the requirements as outlined in existing regulations and board policies;
4. The appropriate application checklist was completed and signed off by the applicant reviewer;
5. The application was approved in compliance with the board's regulatory and policy requirements;
6. The application was approved within seven (7) days of receipt of the completed application by the application reviewer (with the exception of applications requiring legal or board review).

For closed applications, i.e. those that did not result in the issuance of a license, registration or certification:

1. The application reviewer documented the reason(s) for closure;
2. The reasons for closure were in compliance with statutory and regulatory requirements; and
3. The application reviewer notified the applicant regarding reasons for closure and the documented date of closure.

Each ED may add additional items to the audit checklist template that reflect board-specific requirements. This revised document shall be the official checklist to be used in all QA audits for the relevant board until the SDD or ED issues a revision.

Every ED shall complete periodic QA audits. These audits shall occur no less frequently than every quarter. An audit shall include the following components:

	<ol style="list-style-type: none"> 1. A random sampling of both approved and closed applications, received since the prior audit, using an accepted sampling methodology; 2. An evaluation of selected applications using the board’s QA audit checklist; 3. An evaluation of any data reports from the electronic licensing system requested by the ED; <p>At the conclusion of the audit, the ED shall report the following to the SDD:</p> <ol style="list-style-type: none"> 1. A summary of the quality of performance based upon the information reviewed; 2. A list of findings (if applicable); 3. A progress update on any unresolved findings from previous audits (if applicable); 4. A list of recommendations to resolve any new or repeat findings (if applicable). <p>The ED may, as a result of an audit, make re-training mandatory to address an audit finding.</p> <p>Any employee in violation of any part of this SOP may be subject to commensurate disciplinary action.</p>
<p>V. Definitions & Acronyms</p>	<p>ED- Executive Director</p> <p>HORA- Health Occupations Revision Act</p> <p>HRLA- Health Regulation and Licensing Administration</p> <p>QA- Quality Assurance. All the planned and systematic activities implemented within the quality system that can be demonstrated to provide confidence that a product or service will fulfill requirements for quality.</p> <p>SDD- Senior Deputy Director of the Health Regulation and Licensing Administration</p>

<p>VI. Procedures</p>	<p>Procedure:</p> <ol style="list-style-type: none"> 1. At the conclusion of the calendar quarter, the ED will pull a random sample of open and closed applications 2. The ED will complete the audit checklist for each sampled record. 3. The ED will compile the findings of the record audit. 4. The ED will draft an update on any unresolved or repeat findings. 5. The ED will generate a list of recommendations to address any findings. 6. The SDD will review the audit report. 7. The ED will implement the recommendations of the audit report.
<p>VII. Contacts</p>	<p>Senior Deputy Director- Health Regulation and Licensing Administration</p> <p>Executive Director- Board of Medicine</p> <p>Executive Director- Board of Nursing</p> <p>Executive Director- Board of Allied & Behavioral Health</p> <p>Executive Director- Board of Dentistry</p> <p>Executive Director- Board of Pharmacy</p> <p>Executive Director- Board of Veterinary Medicine</p> <p>Executive Director- Board of Chiropractic</p>
<p>VIII. Related Documents, Forms and Tools</p>	<p>None</p>

