



### **BOARD OF MEDICINE** Open Session Minutes

June 26, 2024 8:31 AM -9:12 AM

#### **VIRTUAL MEETING**

Information on how to access the public portion of the meeting virtually is listed below:

Join by Web:
Meeting link:
https://dcnet.webex.com/dcnet/j.php?MTID=m7f823658b3b1e1556a59c90709042b04
Meeting number:
160 487 2313
Password:
eTJJfPgx322
Join by video system
Dial <u>1604872313@dcnet.webex.com</u>
+1-202-860-2110 United States Toll (Washington D.C.)
1-650-479-3208 Call-in number (US/Canada)
Access code:
160 487 2313

#### BOARD MISSION STATEMENT:

"To **protect** and enhance the health, safety, and well-being of District of Columbia residents by **promoting** evidence-based best practices in health regulation, high standards of quality care and implementing policies that **prevent** adverse events."

The Open Session Minutes continues on the next page with the 'Board Meeting Participants'.

### **BOARD MEETING PARTICIPANTS:**

BOARD MILLTING PARTICIPANTS:	
BOARD MEMBERS:	
Andrea Anderson, MD (AA)	
William Strudwick, MD (WS)	
Jeffrey Smith, MD (JS)	Absent
Archie Rich (AR)	Absent
Carolyn Gorman, MD (CG)	
Padmaja Pavuluri, DO (PP)	
Daanish Jones (DJ)	
VACANT (Physician Member)	
VACANT (Consumer Member)	
VACANT (Consumer Member)	
BOARD STAFF:	
Sithembile Chithenga MD MPH- Executive Director	
Lisa Robinson – Health Licensing Specialist	Absent
Mary Harris – Health Licensing Specialist	Absent
Charles Annor – Health Licensing Specialist	
Kim Quickley – Health Licensing Specialist	
Rona Rawls – Health Licensing Specialist	Absent
Chiquita Badgett – Health Licensing Specialist	
Ashley Callaham – Health Licensing Specialist	
Sabrina Gillison – Health Licensing Specialist	
Jennifer Stuart-Health Licensing Specialist	
Emilia Moran- Investigator	
Whitney Moore-Investigator	Absent
LEGAL STAFF:	
Suzanne Fenzel, Esq. – Board Attorney Advisor	
Ajay Gohil, Esq. – Board Attorney Advisor	
Ryan Vulpis-Intern	
Kelly Jim-Intern	
DC HEALTH STAFF:	
Matteo Lieb, Interim Director of Office of Government	Absent
Affairs	
Ariel Norman-HLS	
Emily McAndrew-Intern OGR	

The Open Session Agenda continues on the next page with the 'Call to Order'.<sup>1</sup>

<sup>&</sup>lt;sup>1</sup> The order in which the following agenda items are listed does not necessarily reflect the order in which the items are discussed during the meeting.

CALL TO ORDE	R
OS-24-06-01	INTRODUCTIONS
ALL	A. BOARD MEMBERS
	B. BOARD STAFF

APPROVAL OF N	APPROVAL OF MINUTES, CONSENT AGENDA, BOARD POLICIES, AND STAFF REPORTS				
OS-24-06-02	BOARD/DEPARTMENT REPORT	SC			
ALL	<ul> <li>A. BOARD CHAIR'S REPORT</li> <li>Dr. Anderson, Dr. Chithenga and Dr. Pavuluri</li> </ul>				
	attended a symposium on Alternate Licensing Pathways convened by the Federation of State Medical Boards (FSMB), Intealth, and the Accreditation Council for Graduate Medical Education (ACGME) in Washington, DC. This				
	symposium was a forum to share insights into efforts underway to establish and/or implement alternate licensing models for physicians who have completed training and/or practiced outside of the United States.				
	<ul> <li>The symposium convened over 175 members of the medical community including state medical boards, graduate medical educators, professional organizations and public stakeholders to discuss recent trends in several states considering allowing</li> </ul>				
	foreign trained physicians to practice in the US without going through the tradition pathway. Several states (around 8) have passed or are considering legislation that would bypass current				
	<ul> <li>medical residency process and recognize foreign residency training in lieu of US residency training.</li> <li>This has several pros and cons as it could potentially</li> </ul>				
	address physician shortages and physician maldistribution especially in rural areas. Other attendants cited concerns with inability to verify foreign residency training, the types of training and				
	the cultural sensitivity to US population. Some states have purposed skipping either one of all three parts of the USMLE examinations.				

	<ul> <li>There is an advisory committee that will come up with recommendations by the end of the year. The committee's recommendations will inform jurisdictions with current/pending legislation or those considering it.</li> <li>Dr. Anderson also participated in a USMLE patient characteristic advisory panel that came up with recommendations to inform representation of patient identities in USMLE exam questions regarding to gender, race, and ethnicity.</li> </ul>	
В. ЕХ	ECUTIVE DIRECTOR'S REPORT	
	<ul> <li>DC Health Updates</li> <li>All licenses, certificates or registrations issued after June 16<sup>th</sup>, 2024, of this year expire on the last day of the licensee's birth month. Additionally, applicants born in even numbered years will receive even numbered expiration dates, applicants born in odd numbered years will receive odd numbered expiration dates, which will apply to all application types.</li> <li>For those renewing, this will not take effect until September 2024. This authority is pursuant to Chapter 40 Section 4006.3 DCMR Chapter 40 General Rules. A mass email blast and as well as other notifications are scheduled to go out to all licensees.</li> <li>This year the public health priorities for continuing medical education are due for revision. Any changes will be shared with stakeholders in a timely manner.</li> <li>In preparation of the different license types up for renewal all online materials will be revamped to ensure they are reflective of current practices and requirements.</li> <li>The workforce survey results fact sheets have all been published and will be attached to the minutes of this agenda, the link will be shared with all stakeholders once available.</li> <li>MTL cycles will end on June 30<sup>th</sup>, 2024.</li> </ul>	

<ul> <li>As part of preparations for board will begin developing initiatives and priorities.</li> <li>The board is streamlining li will include a review of the Authorities.</li> <li>Town hall meetings will be members and stakeholders HORA amendments and im</li> </ul>	g and reviewing strategic cense processing. This current Delegated held with board to review proposed
<ul> <li>ii. Advisory Committees         The board met with the Mar Advisory Committee. The for Certified Profession Miregulations. These regulation July's meeting along with regulations.     </li> <li>The Acupunctures Advision convened earlier in the more the impact of the proposion Revision Act (HORA.) are introduced proposals to hell workforce shortages.</li> </ul>	ocus of the meeting was idwives (CPM) draft ons will be presented in the Physician Assistant sory Committee also nth. The group discussed sed Health Occupations nendments. They also
<li>iii. Board Vacancies/MOTA Up Three new board members board. Details will be p meetings.</li>	are expected to join the
iv. Licensure Census The Executive Director pro current licensure census in t ACUPUNCTURIST ANESTHESIOLOGIST ASSISTAN ATHLETIC TRAINER	the District of Columbia.
CHINESE HERBOLOGY MEDICAL TRAINING LICENSE I MEDICAL TRAINING LICENSE I MEDICAL TRAINING LICENSE I MEDICAL TRAINING REGISTRA MEDICINE AND SURGERY NATUROPATH PHYSICIAN OSTEOPATHY AND SURGERY	(B) 419 I 30

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TECHNOLOGIST	
POLYSOMNOGRAPHIC TRAINEE	1
SURGICAL ASSISTANT	122
TRAUMA TECHNOLOGIST	4
DMV PHYSICIAN RECIPROCITY	389
MEDICAL COMPACT	419
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significate revision in the seventeen mayoral approval and has been intro	•
received an hearing on 12/7 with o	
Director of health licensing medica	
testimony, another mark up on Mar 2	
on April 2 <sup>nd</sup> and May 7 <sup>th</sup> which was s	go law sometime i
Major , the anticipation is this will	go iaw sometime i
Major , the anticipation is this will August.	-
<ul><li>Major , the anticipation is this will</li><li>August.</li><li>April budget meeting occurred discuss</li></ul>	sing work force issues
<ul> <li>Major , the anticipation is this will August.</li> <li>April budget meeting occurred discuss the subsequent mark up for the buc</li> </ul>	sing work force issues dget on May 9 whic
<ul> <li>Major , the anticipation is this will August.</li> <li>April budget meeting occurred discuss the subsequent mark up for the buc passed and finally reading on June 11</li> </ul>	sing work force issues dget on May 9 whic
<ul> <li>Major , the anticipation is this will August.</li> <li>April budget meeting occurred discuss the subsequent mark up for the buc</li> </ul>	sing work force issues dget on May 9 whic L which it now sits fo

OS-24-06-03	OPEN SESSION MINUTES	AMC/SC
ALL	<b>Board Action:</b> Consideration of the Open Session minutes from the May 29, 2024, meeting.	
	<b>Background:</b> The Open Session Minutes are a record of the Board's past meeting(s), describing the events, list of attendees; a statement of the issues considered and related responses or decisions of the Board.	
	<b>Motion:</b> Motion made by Dr. Gorman to approve minutes. Seconded by Dr. Pavuluri.	
	<b>Vote:</b> Dr. Anderson, Dr.Gorman, Ms. Jones, Dr. Pavuluri and Dr. Strudwick	
OS-24-06-04	OPEN CONSENT AGENDA	AMC/SC
ALL	<b>Board Action:</b> Consideration of the current open Consent Agenda items for purposes of review and/or ratification of Board actions taken since the last Board meeting.	
	<b>Background:</b> The Open Consent Agenda is a record of the decisions and/or actions taken by the Board or its staff since the last meeting of the Board.	
	<b>Motion:</b> Motion made by Dr. Gorman to approve minutes. Seconded by Dr. Pavuluri.	
	<b>Vote:</b> Dr. Anderson, Dr. Gorman, Ms. Jones, Dr. Pavuluri and Dr. Strudwick	
OS-24-06-05	PUBLIC COMMENTS	
ALL	<b>Background:</b> To provide the public with the opportunity to comment on or provide feedback to the Board.	

MOTION TO C	CLOSE
OS-24-06-06	MOTION TO CLOSE
ALL	<b>Board Action:</b> To go into closed session to discuss confidential matters as permitted in DC Official Code § 2-575(b).
	<b>Background:</b> Pursuant to DC Official Code § 2-575(b), the Board will move into the Closed Executive Session portion of the meeting to discuss the following:
	<ol> <li>To consult with an attorney to obtain legal advice and to preserve the attorney-client privilege between an attorney and a public body, or to approve settlement agreements pursuant to § 2-575(b)(4)(a).</li> </ol>
	<ol> <li>Preparation, administration, or grading of scholastic, licensing, or qualifying examinations pursuant to section § 2-575(b)(6).</li> </ol>
	<ol> <li>To discuss disciplinary matters pursuant to section § 2- 575(b)(9).</li> </ol>
	<ol> <li>To plan, discuss, or hear reports concerning ongoing or planned investigation of alleged criminal or civil misconduct or violations of law or regulations, if disclosure to the public would harm the investigation pursuant to section § 2-575(b) (14).</li> </ol>
	<b>Motion:</b> Motion made by Dr. Gorman to approve minutes. Seconded by Dr. Strudwick.
	Vote: Dr. Anderson, Dr. Gorman, Ms. Jones, Dr. Pavuluri and Dr. Strudwick

The Open Session Agenda continues on the next page with 'Motion to Adjourn'. The next Board meeting is in person and will be held on July 24, 2024, at 2201 Shannon Place SE, Washington DC 20020.

MOTION TO A	DJOURN	
OS-24-06-07	MOTION TO ADJOURN	
ALL	Board Action:	
	To adjourn the meeting.	
	Background:	
	At the end of every meeting, a motion to adjourn must be made in	
	open session to close out the business of the Board.	
	Matter Matter with the De Course to show the Over sectors of	
	Motion: Motion made by Dr. Gorman to close the Open session at	
	9:12 am and move to Executive Session. Seconded by Dr. Strudwick.	
	Vote: Dr. Anderson, Dr.Gorman, Ms. Jones, Dr. Pavuluri and Dr.	
	Strudwick	

#### This ends the Open Session Agenda.

This meeting is governed by the Open Meetings Act. Please address any questions or complaints arising under this meeting to the Office of Open Government at <u>opengovoffice@dc.gov</u>. 3 DCMR § 10409.2

# DC BOARD OF MEDICINE LICENSED PHYSICIANS AND SURGEONS

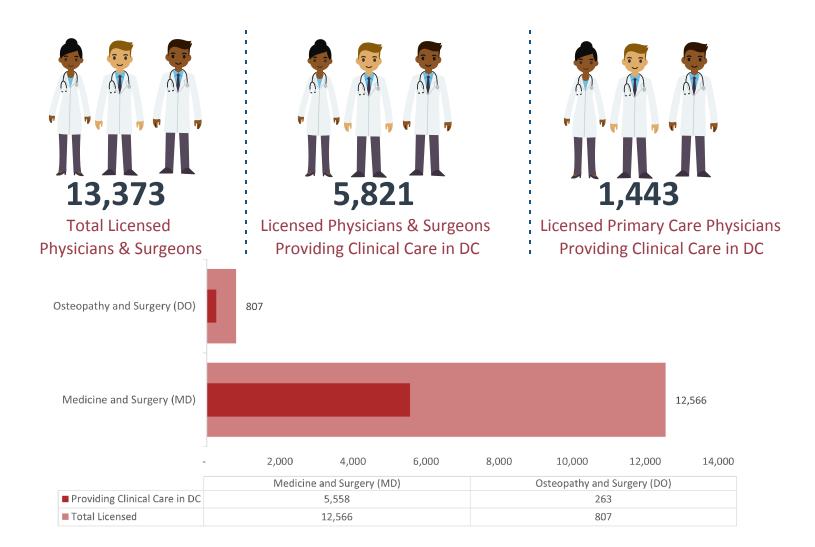
The District of Columbia's Health Regulations and Licensing Administration (HRLA) Board of Medicine (DC BOM) licenses all Physicians and Surgeons. HRLA and the Community Health Administration (CHA) partnered to develop a licensure survey to collect standard information across all licensing boards on demographics, workforce capacity, access to care, and special topics during the licensure renewal process. Data from the 2022 DC BOM Licensure Survey has been analyzed by the DC Primary Care Office (PCO), and reported in this fact sheet. Reported information is related to total licensed providers reflects all licensees (i.e., new and renewal applicants); reported information related to licensees providing clinical care in DC reflects only renewal applicants.

### **Key Findings**

- In DC there are 13,373 licensed physicians and surgeons. Approximately, two out of every five licensed providers are providing clinical care in DC, making up 43 percent of the licensed providers.
- There is equal representation of female and male physicians providing care in District of Columbia.
- Forty four percent of District of Columbia residents are Black/African-American, while less than 20% of the physician workforce is Black/African-American.
- Approximately one in ten physicians & surgeons report providing care at more than one practice location.
- Less than forty percent of physicians & surgeons providing care in DC reported that they have no symptoms of burnout. An additional, thirty-seven percent also reported that even though they have some stress that they are not burned out. Collectively, 73.6 percent of the licensed physicians & surgeons providing care in DC are not feeling burned out.



### DC LICENSED PHYSICIANS AND SURGEONS (MDs and DOs)

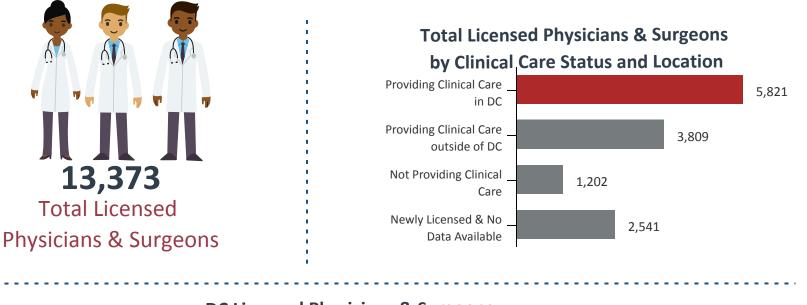


### **Key Definitions**

**Total Licensed** - Provider is licensed by the board and has an active license status. **Providing Clinical Care in DC** - Providers who reported a practice location in DC and offering medical care to patients.

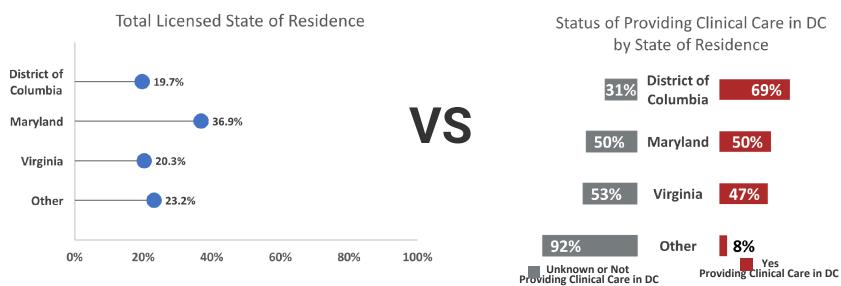


### DC LICENSED PHYSICIANS AND SURGEONS (MDs and DOs)



DC Licensed Physicians & Surgeons

### State of Residence Compared to Status of Providing Clinical Care in DC





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FACT

2023



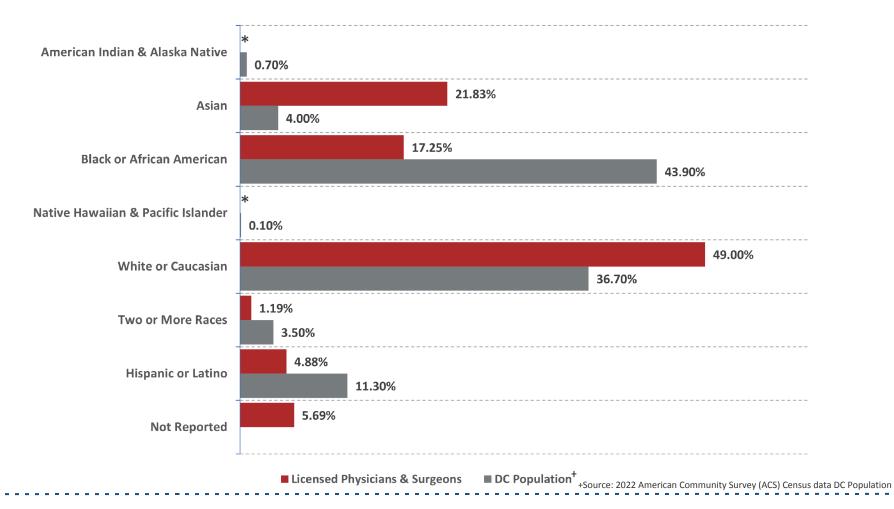




Prepared by the DC Primary Care Office

Data Source: Health Regulation and Licensing Administration Board of Medicine Licensure Survey Renewal Applicants (2022). \*Data suppressed for confidentiality when the total reported category is less than 10.

Race/Ethnicity - Licensed Physicians and Surgeons Practicing in DC vs DC General Population Estimates\*\*





**49%** of licensed Physicians & Surgeons practicing in the District of Columbia are White or Caucasian.

Forty four percent of District of Columbia residents are Black/African-American, while less than 20% of the physician workforce is Black/African-American



Prepared by the DC Primary Care Office Data Source: Health Regulation and Licensing Administration Board of Medicine Licensure Survey Renewal Applicants (2022). \*Data suppressed for confidentiality when the total reported category is less than 10.

5

### Percentage of Licensed Physicians and Surgeons Practicing in DC with Multiple Practice Locations



86.4%



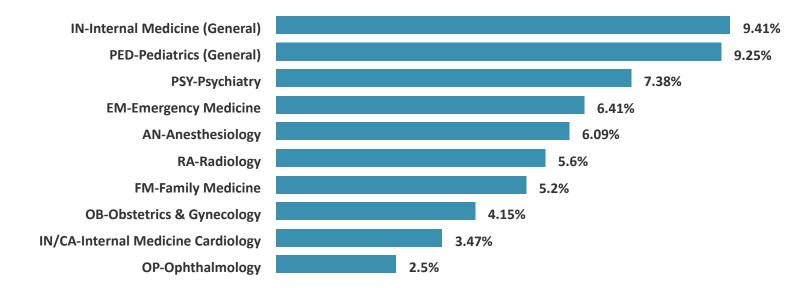




0.23%

Approximately one in ten physicians & surgeons report providing care at more than one practice location

### Top 10 Licensed Specialty amongst Physicians and Surgeons Practicing in DC

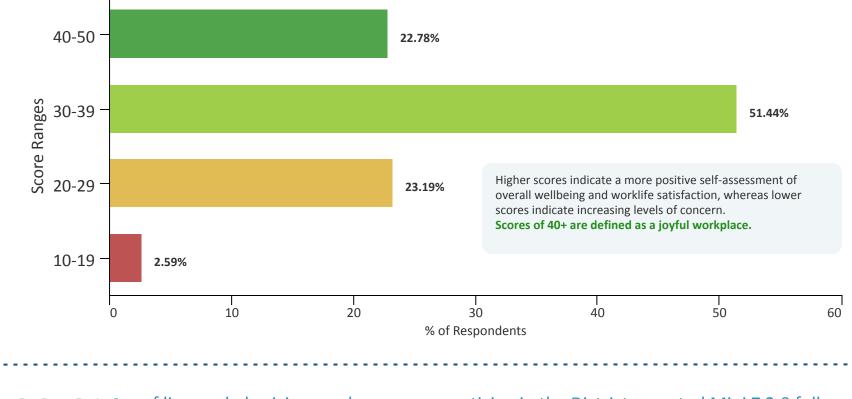




Prepared by the DC Primary Care Office

Data Source: Health Regulation and Licensing Administration Board of Medicine Licensure Survey Renewal Applicants (2022).

### Self-Assessment of Worklife and Wellness\* among Licensed Physicians and Surgeons Practicing in DC\*\* (Mini Z 2.0 Survey - Full Scale Scores)



# **22.8%** of licensed physicians and surgeons practicing in the District reported Mini Z 2.0 full scale scores of 40+, indicating a **joyful workplace**.

\*The licensure survey includes the Mini Z 2.0, a 10-question tool assessing work satisfaction, stress, burnout, and 7 potential drivers of burnout in practicing clinicians; the Mini Z 2.0 is a psychometrically sound measure of worklife and wellness in practicing clinicians, validated externally against the Maslach Burnout Inventory (MBI). \*\*Answering each question was optional; full scale scores are reported only for respondents who completed all Mini Z 2.0 questions; approximately 83.4 percent (4,856/5,821) of licensed physicians and surgeons practicing in DC completed all questions on the Mini Z 2.0 survey.



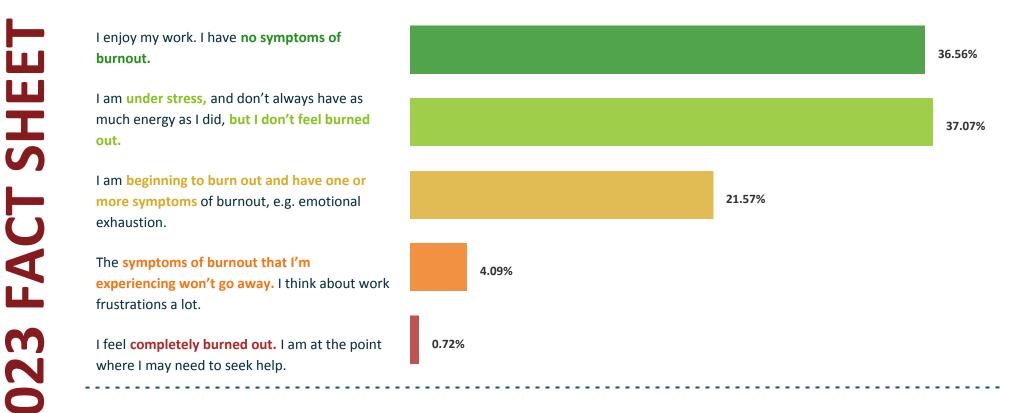
Prepared by the DC Primary Care Office Data Source: Health Regulation and Licensing Administration Board of Medicine Licensure Survey Renewal Applicants (2022).

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2023

### Self-Assessment of Burnout\* among Licensed Physicians and Surgeons Practicing in DC\*\* (Mini Z 2.0 Survey - Question 2 Responses)



#### of licensed physicians and surgeons practicing DC reported experiencing 73.6% no symptoms of burnout (36.56%) or some stress but not feeling burned out (37.07%).

\*Assessment based on the Mini Z 2.0 burnout question; concurrent validity of the burnout question was assessed with the Maslach Burnout Inventory (MBI) emotional exhaustion (EE) subscale and determined to be a valid single-item measure of burnout.

\*\*Approximately 91.2 percent (5,312/5,821) of physicians and surgeons practicing in DC responded to the question.



2023

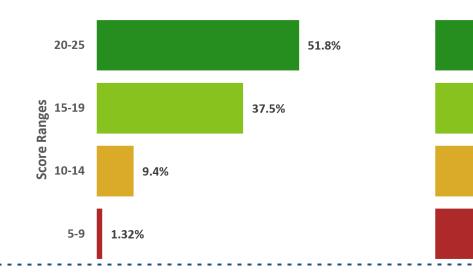
### Self-Assessment of Worklife and Wellness among Licensed Physicians and Surgeons Practicing in DC (Mini Z 2.0 Survey - Subscale Scores)

**Subscale 1: Supportive Work Environment\*** Includes questions on satisfaction, burnout, values alignment, teamwork, and work control.

Subscale 1: Supportive Work Environment\* Subscale 2: Work Pace and EMR Stress\*\* Includes questions on stress, chaos, home EMR use, documentation time pressure, and EMR frustration.

Subscale 2: Work Pace and EMR Stess\*

13.2%



**51.8%** 

of licensed physicians and surgeons practicing in DC reported Subscale 1 scores of 20+, indicating a **supportive work environment**.

## 13.2%

11.5%

of licensed physicians and surgeons practicing in DC reported Subscale 2 scores of 20+, indicating **reasonable pace and manageable EMR stress.** 

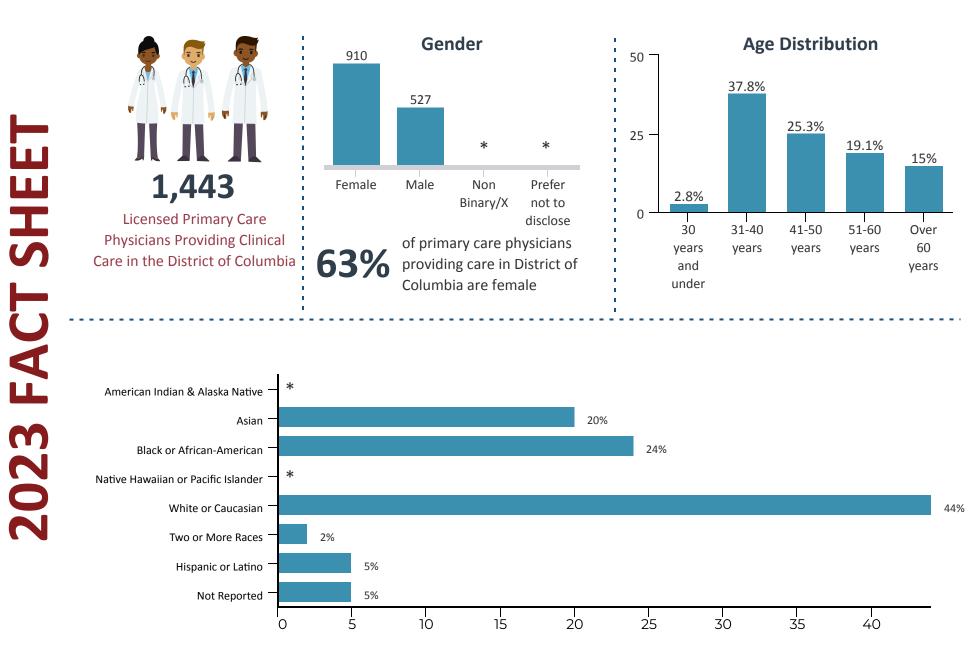
42.0%

33.4%

\*Approximately 86.1 percent (5,013/5,821) of physicians and surgeons practicing in DC completed all questions in subscale 1. \*\*Approximately 76.1 percent (4,430/5,821) of physicians and surgeons practicing in DC completed all questions in subscale 2.



## LICENSED PRIMARY CARE PHYSICIANS PRACTICING IN DC

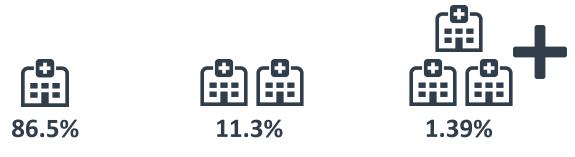




Prepared by the DC Primary Care Office Data Source: Health Regulation and Licensing Administration Board of Medicine Licensure Survey Renewal Applicants (2022). \*Data suppressed for confidentiality when the total reported category is less than 10.

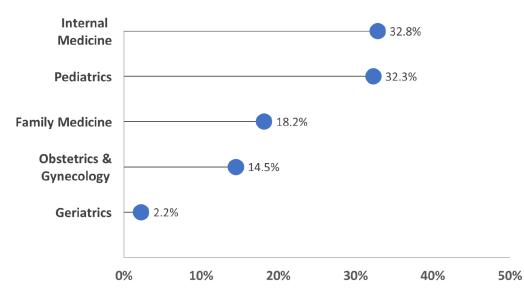
## LICENSED PRIMARY CARE PHYSICIANS PRACTICING IN DC

Percentage of Licensed Primary Care Physicians Practicing in DC with Multiple Practice Locations



Approximately eight in ten licensed primary care physicians report providing care at a single practice location

### Licensed Primary Care Physicians Practicing in DC by License Type





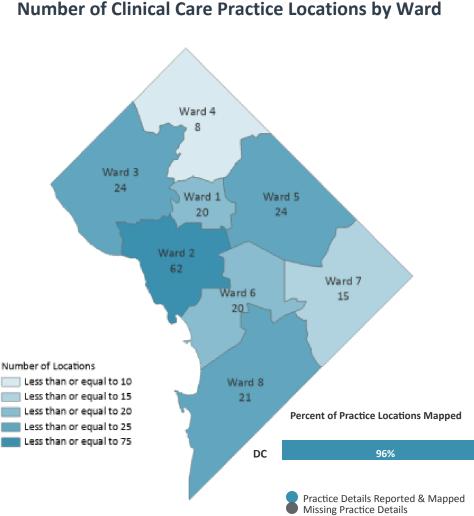
Prepared by the DC Primary Care Office

Data Source: Health Regulation and Licensing Administration Board of Medicine Licensure Survey Renewal Applicants (2022).

## LICENSED PRIMARY CARE PHYSICIANS PRACTICING IN DC

**Overview of Clinical Care Practice Locations** 

FACT SHEET 2023



#### **Data Limitations**

-Practice Locations are mapped with 80% fidelity -Missing details of the address could not be mapped **Clinical Care Practice Findings** 



44%

of practice locations providing clinical care, that were reported and mapped, are located in Wards 2 & 3.

Projected Growth 3% of providers reported increasing their practice hours or adding a practice

location over the next two years.



Prepared by the DC Primary Care Office Data Source: Health Regulation and Licensing Administration Board of Medicine Licensure Survey Renewal Applicants (2022).

4%

# DC BOARD OF MEDICINE LICENSED PHYSICIAN ASSISTANTS

The District of Columbia's Health Regulations and Licensing Administration (HRLA) Board of Medicine (DC BOM) licenses all physician assistants (PAs). HRLA and the Community Health Administration (CHA) partnered to develop a licensure survey to collect standard information across all licensing boards on demographics, workforce capacity, access to care, and special topics during the licensure renewal process. Data from the 2022 DC BOM Licensure Survey has been analyzed by the DC Primary Care Office (PCO), and reported in this fact sheet. Reported information is related to total licensed providers reflects all licensees (i.e., new and renewal applicants); reported information related to licensees providing clinical care in DC reflects only renewal applicants.

### Key Findings

- Physician assistants (PAs) providing care in DC are predominantly female (81%) and trend younger, with 67 percent aged 40 or younger compared to only 4 percent over 60 years of age.
- The female to male ratio of physicians that are licensed and providing care in DC is 1:1; however, in comparison to physician assistants the gender ratio is 4:5.
- The racial/ethnic distribution of licensed PAs practicing in DC is not representative of the general DC population; approximately 63 percent are non-Hispanic white (compared to 37 percent of the population), whereas only 17 percent are Black/African American (compared to 44 percent) and 6 percent are Hispanic/Latino (compared to 11 percent).
- One in three PAs practicing in DC reported they are beginning to burn out (30%) or experiencing burnout symptoms that won't go away (4%).
- More than half of PAs practicing in the District reported a supportive work environment, but many reported challenges with work pace and EMR stress. Organizational improvements addressing work pace and EMR stress may improve workforce wellness.



## **DC LICENSED PHYSICIAN ASSISTANTS**



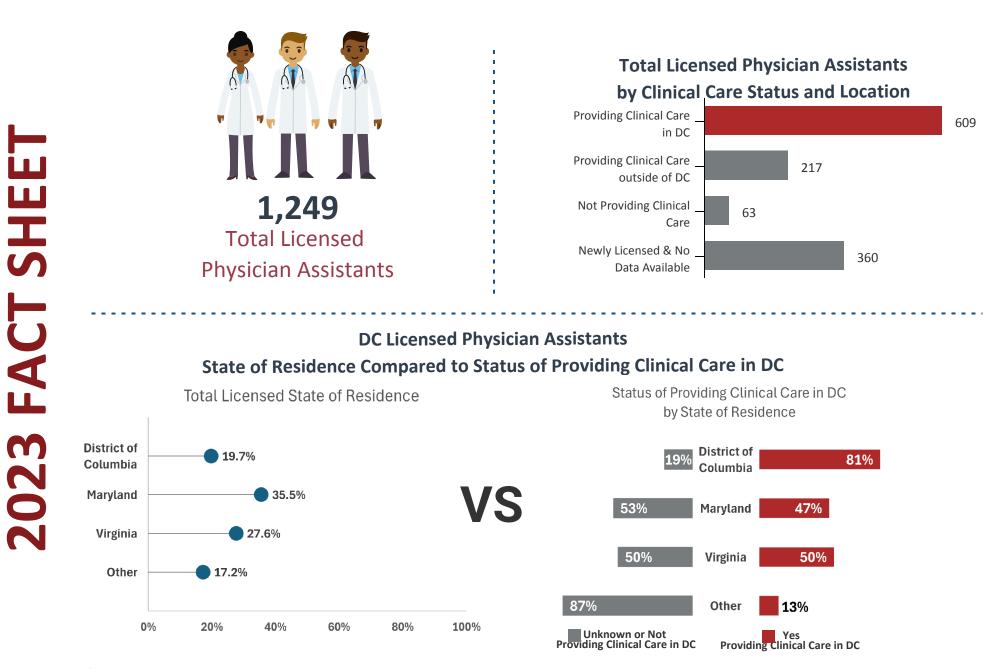
<b>1,249</b>					609			
Total Licensed			Licensed Physician Assistants					
Physician Assis	tants	:	Pi	roviding	Clinical C	Care in	DC	
Physician Assistant (PA)							1,249	
-	200	400	600	800	1,000	1,200		1,400
			Physician	Assistant (PA)				
Providing Clinical Care in DC				609				
Licensed in DC			1	1,249				

### **Key Definitions**

**Total Licensed** - Provider is licensed by the board and has an active license status. **Providing Clinical Care in DC** - Providers who reported a practice location in DC and offering medical care to patients.



## **DC LICENSED PHYSICIAN ASSISTANTS**

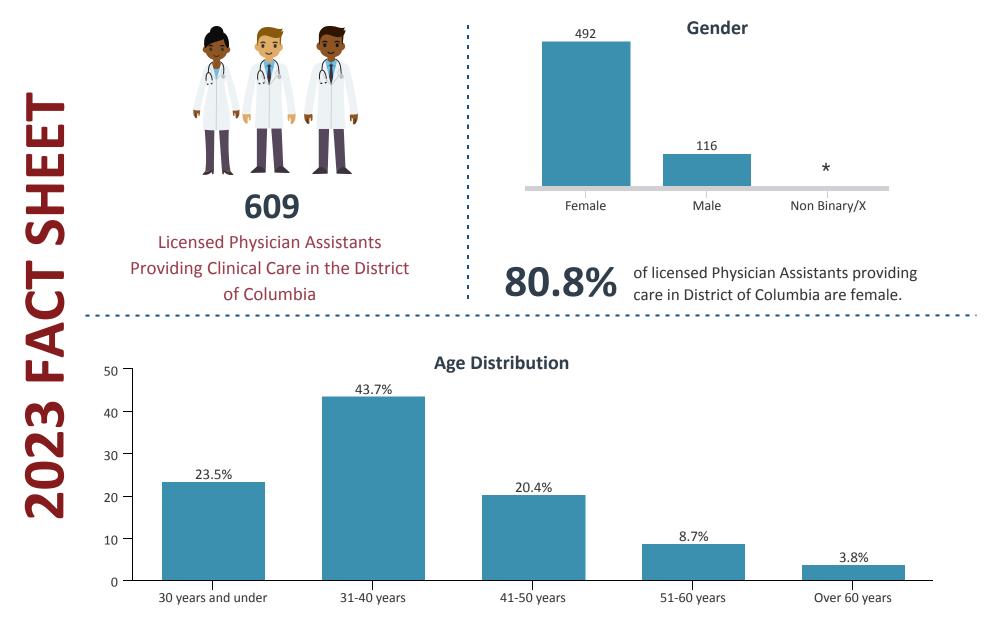




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 $^{st}$ Data suppressed for confidentiality when the total reported category is less than 10.

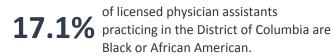




0.0% American Indian & Alaska Native 0.7% 9.4% Asian 4.0% 17.1% **Black or African American** 43.9% Native Hawaiian & Pacific Islander 0.1% 62.9% White or Caucasian 36.7% 1.8% Two or More Races 3.5% 5.9% Hispanic or Latino 11.3% 2.8% Not Reported DC Population

**Race/Ethnicity - Licensed Physician Assistants Practicing in DC vs DC Population** 

646464646464



The racial/ethnic distribution of licensed physician assistants practicing in the District of Columbia does not reflect the general population, with over-representations among non-Hispanic/Latino White and Asian physician assistants.

+Source: 2022 American Community Survey (ACS) Census data DC Population



Prepared by the DC Primary Care Office Data Source: Health Regulation and Licensing Administration Board of Medicine Licensure Survey (2022). \*Data suppressed for confidentiality when the total reported category is less than 10.

Licensed Physician Assistants

Percentage of Licensed Physician Assistants Practicing in DC with Multiple Practice Locations

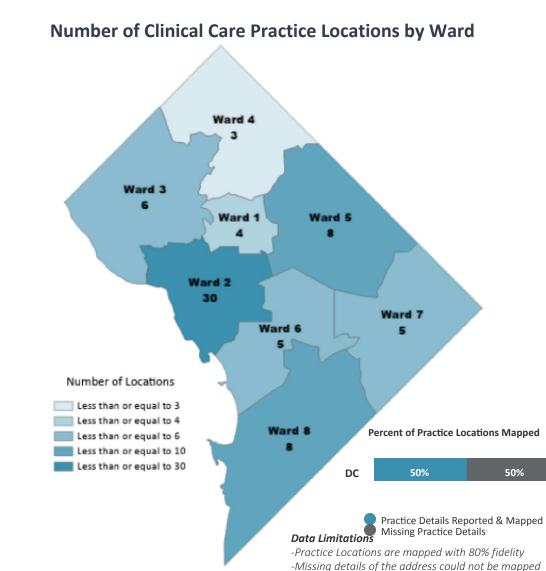


Approximately eight in ten physician assistants report providing care at a single practice location



FACT SHEET

2023



**Overview of Clinical Care Practice Locations** 

**Clinical Care Practice Findings** 



of practice locations providing clinical care, that were reported and mapped, are located in Ward 2.

43%

Projected Growth 69% of providers reported increasing their practice hours or adding a practice

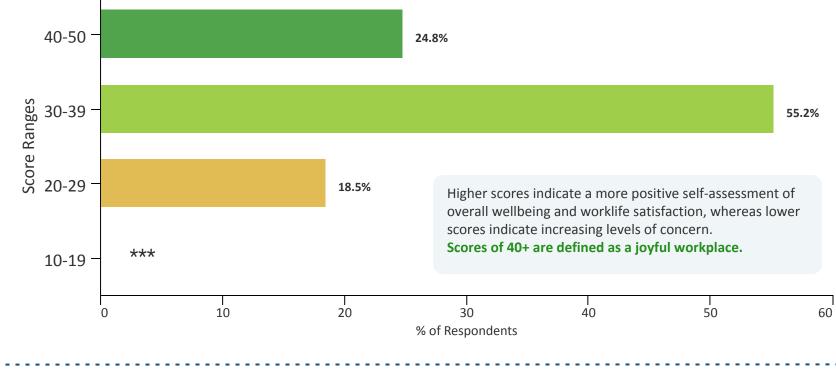
location over the next two years.

GOVERNMENT OF THE DISTRICT OF COLUMBIA

FACT SHEET

2023

Self-Assessment of Worklife and Wellness\* among Licensed Physician Assistants Practicing in DC\*\* (Mini Z 2.0 Survey - Full Scale Scores)



# **24.8%** of licensed physician assistants practicing in the District reported Mini Z 2.0 full scale scores of 40+, indicating a **joyful workplace**.

\*The licensure survey includes the Mini Z 2.0, a 10-question tool assessing work satisfaction, stress, burnout, and 7 potential drivers of burnout in practicing clinicians; the Mini Z 2.0 is a psychometrically sound measure of worklife and wellness in practicing clinicians, validated externally against the Maslach Burnout Inventory (MBI). \*\*Answering each question was optional; full scale scores are reported only for respondents who completed all Mini Z 2.0 questions; approximately 91.3 percent (556/609) of licensed physician assistants practicing in DC completed all questions on the Mini Z 2.0 survey.

\*\*\*Data suppressed for confidentiality when the total reported category is less than 10.



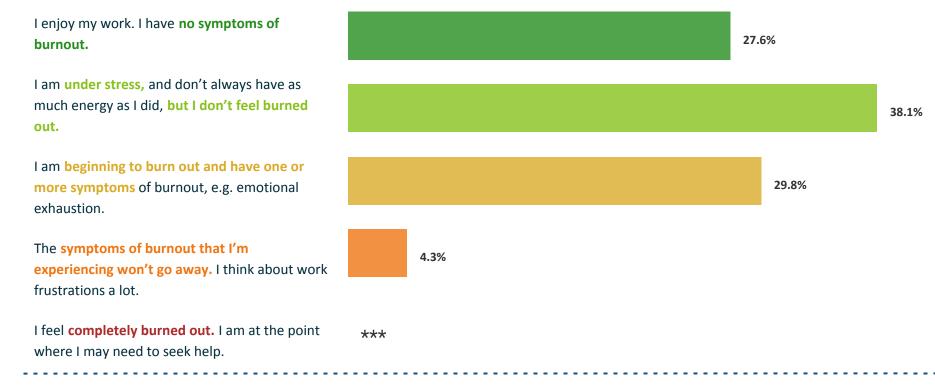
Prepared by the DC Primary Care Office Data Source: Health Regulation and Licensing Administration Board of Medicine Licensure Survey (2022).

SHEET

FACT

2023

### Self-Assessment of Burnout\* among Licensed Physician Assistants Practicing in DC\*\* (Mini Z 2.0 Survey - Question 2 Responses)



# 65.7% of licensed physician assistants practicing DC reported experiencing no symptoms of burnout (27.6%) or some stress but not feeling burned out (38.1%).

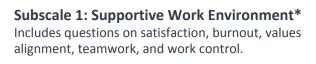
\*Assessment based on the Mini Z 2.0 burnout question; concurrent validity of the burnout question was assessed with the Maslach Burnout Inventory (MBI) emotional exhaustion (EE) subscale and determined to be a valid single-item measure of burnout.

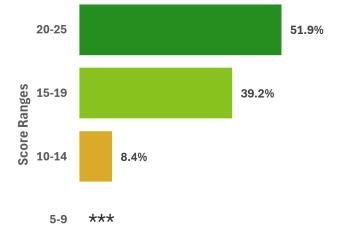
\*\*Approximately 96.6 percent (588/609) of physician assistants practicing in DC responded to the question.

\*\*\*Data suppressed for confidentiality when the total reported category is less than 10.



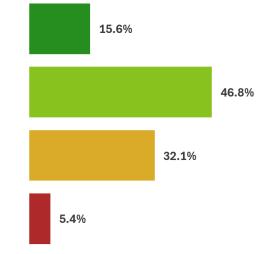
### Self-Assessment of Worklife and Wellness among Licensed Physician Assistants Practicing in DC (Mini Z 2.0 Survey - Subscale Scores)





#### Subscale 2: Work Pace and EMR Stress\*\*

Includes questions on stress, chaos, home EMR use, documentation time pressure, and EMR frustration.



### 51.9%

of licensed physician assistants practicing in DC reported Subscale 1 scores of 20+, indicating a **supportive work environment.** 

## 15.6%

of licensed physician assistants practicing in DC reported Subscale 2 scores of 20+, indicating reasonable pace and manageable EMR stress.

\*Approximately 94.3 percent (574/609) of physician assistants practicing in DC completed all questions in subscale 1.

\*\*Approximately 93.6 percent (570/609) of physician assistants practicing in DC completed all questions in subscale 2.

\*\*\*Data suppressed for confidentiality when the total reported category is less than 10.



# DC BOARD OF MEDICINE LICENSED ACUPUNCTURISTS

The District of Columbia's Health Regulations and Licensing Administration (HRLA) Board of Medicine (DC BOM) licenses all acupuncturists. HRLA and the Community Health Administration (CHA) partnered to develop a licensure survey to collect standard information across all licensing boards on demographics, workforce capacity, access to care, and special topics during the licensure renewal process. Data from the 2022 DC BOM Licensure Survey has been analyzed by the DC Primary Care Office (PCO), and reported in this fact sheet. Reported information is related to total licensed providers reflects all licenses (i.e., new and renewal applicants); reported information related to licensees providing clinical care in DC reflects only renewal applicants.

### **Key Findings**

- Approximately 50 percent of DC licensed acupuncturists reported providing care in the District.
- Acupuncturists practicing in the District are primarily female (70%) and trend older, with 21 percent of the workforce over 60 years of age compared to 17 percent being 40 years of age or younger.
- Nearly nine in ten licensed acupuncturists practicing in DC reported experiencing no symptoms of burnout (51%) or some stress but not feeling burned out (37%).



## **DC LICENSED ACUPUNCTURISTS**

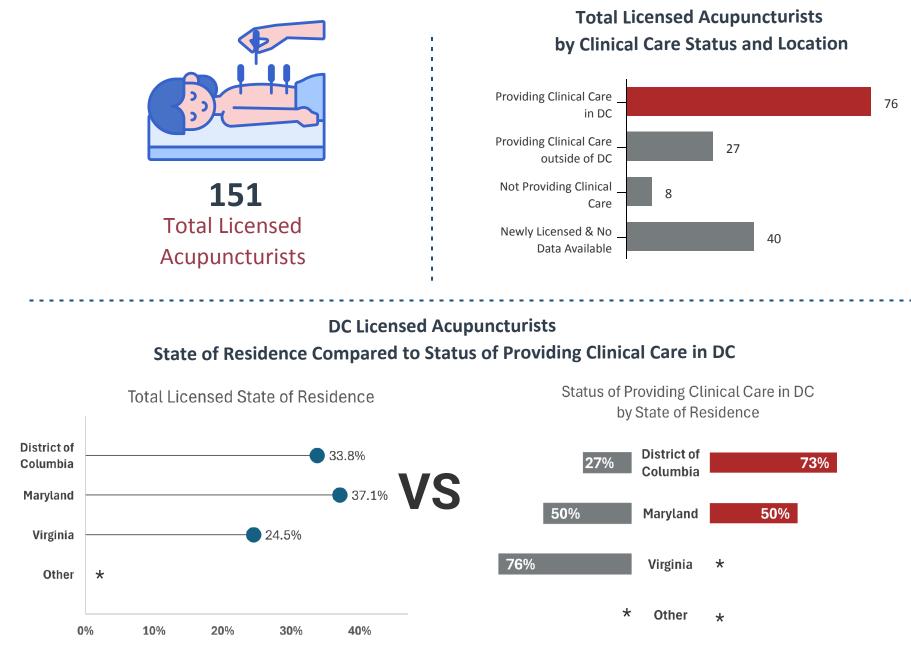
15	1					76		
Total Lice	ensed			Lic	ensed /	Acupun	cturists	S
Acupunct	curists			Prov	/iding C	linical <b>C</b>	Care in	DC
1								
Acupuncturist								151
0	20	40	60	80	100	120	140	160
				Acupuncturis	t			
<ul><li>Providing Clinical Care in DC</li><li>Total Licensed</li></ul>				76 151				

### **Key Definitions**

**Total Licensed** - Provider is licensed by the board and has an active license status. **Providing Clinical Care in DC** - Providers who reported a practice location in DC and offering offering services to clients.



# **DC LICENSED ACUPUNCTURISTS**





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Prepared by the DC Primary Care Office

Data Source: Health Regulation and Licensing Administration Board of Medicine Licensure Survey (2022).

\*Data suppressed for confidentiality when the total reported category is less than 10.



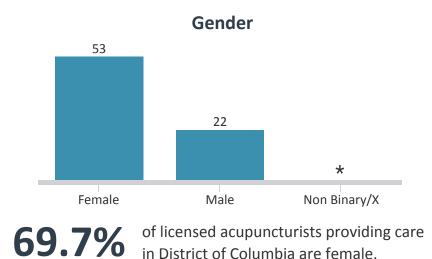
76

Licensed Acupuncturists Providing Clinical Care in the District of Columbia

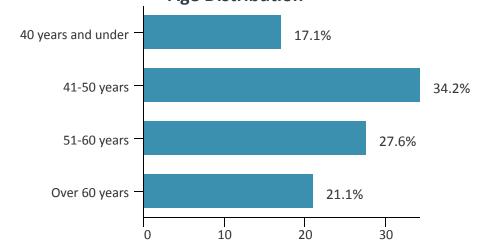
#### **Practice Locations**



of acupuncturists practicing in DC reported providing care at a single practice location



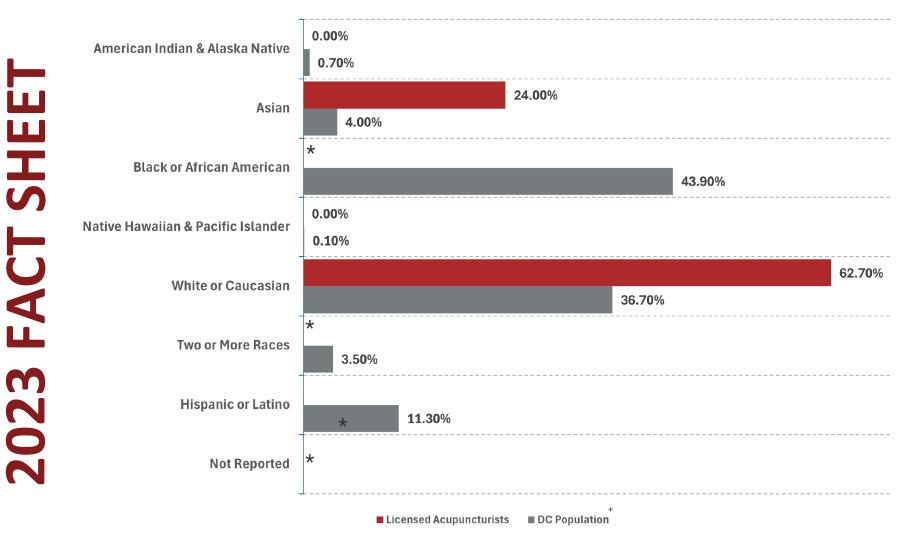
Age Distribution





Prepared by the DC Primary Care Office Data Source: Health Regulation and Licensing Administration Board of Medicine Licensure Survey (2022). \*Data suppressed for confidentiality when the total reported category is less than 10.

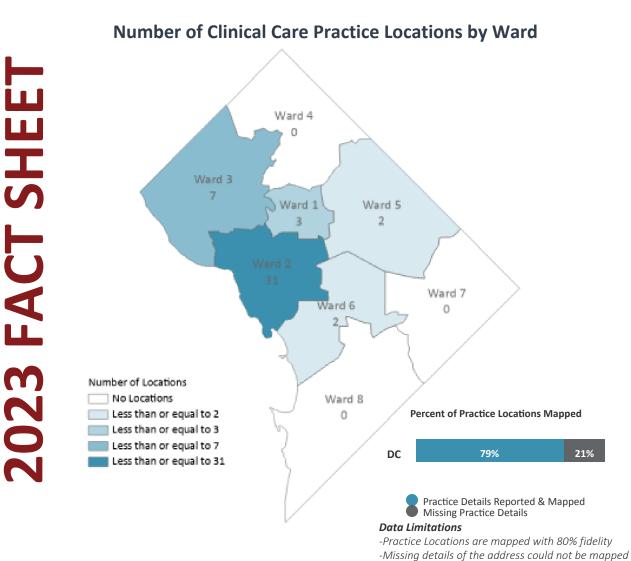
**Race/Ethnicity - Licensed Acupuncturists Practicing in DC vs DC Population** 



+Source: 2022 American Community Survey (ACS) Census data DC Population



Prepared by the DC Primary Care Office Data Source: Health Regulation and Licensing Administration Board of Medicine Licensure Survey (2022). \*Data suppressed for confidentiality when the total reported category is less than 10.



**Overview of Clinical Care Practice Locations** 

**Clinical Care Practice Findings** 



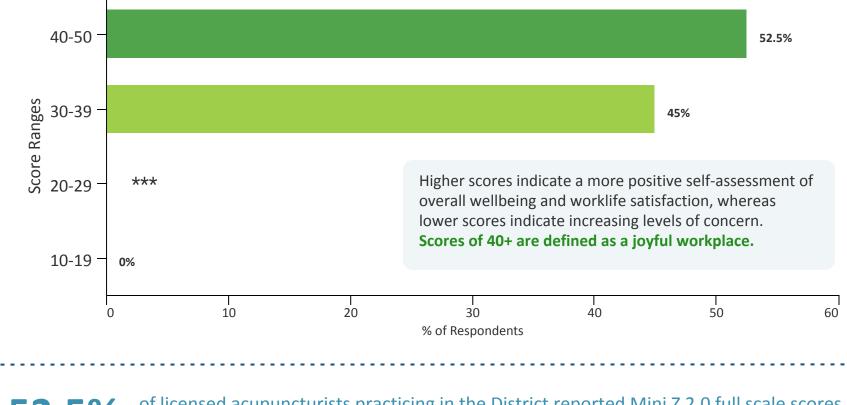
68.8%

of practice locations providing clinical care, that were reported and mapped, are located in Ward 2.

Projected Growth 79.3% of providers reported increasing their practice hours or adding a practice location over the next two years.



Self-Assessment of Worklife and Wellness\* among Licensed Acupuncturists Practicing in DC\*\* (Mini Z 2.0 Survey - Full Scale Scores)



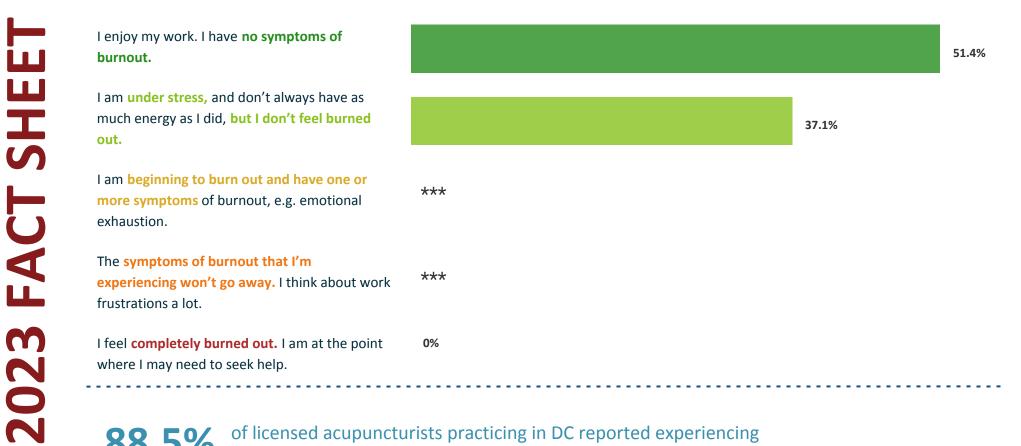
## **52.5%** of licensed acupuncturists practicing in the District reported Mini Z 2.0 full scale scores of 40+, indicating a **joyful workplace**.

\*The licensure survey includes the Mini Z 2.0, a 10-question tool assessing work satisfaction, stress, burnout, and 7 potential drivers of burnout in practicing clinicians; the Mini Z 2.0 is a psychometrically sound measure of worklife and wellness in practicing clinicians, validated externally against the Maslach Burnout Inventory (MBI). \*\*Answering each question was optional; full scale scores are reported only for respondents who completed all Mini Z 2.0 questions; approximately 52.6 percent (40/76) of licensed acupuncturists practicing in DC completed all questions on the Mini Z 2.0 survey.

\*\*\*Data suppressed for confidentiality when the total reported category is less than 10.



#### Self-Assessment of Burnout\* among Licensed Acupuncturists Practicing in DC\*\* (Mini Z 2.0 Survey - Question 2 Responses)



#### of licensed acupuncturists practicing in DC reported experiencing 88.5% no symptoms of burnout (51.4%) or some stress but not feeling burned out (37.1%).

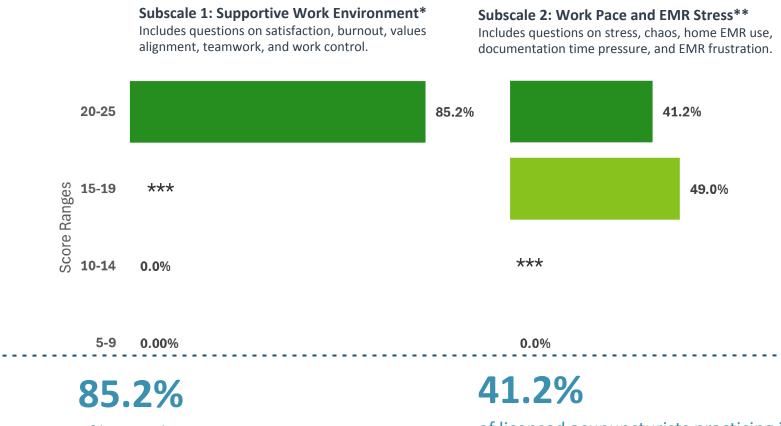
\*Assessment based on the Mini Z 2.0 burnout question; concurrent validity of the burnout question was assessed with the Maslach Burnout Inventory (MBI) emotional exhaustion (EE) subscale and determined to be a valid single-item measure of burnout.

\*\*Approximately 92.1 percent (70/76) of acupuncturists practicing in DC responded to the question.

\*\*\*Data suppressed for confidentiality when the total reported category is less than 10.



#### Self-Assessment of Worklife and Wellness among Licensed Acupuncturists Practicing in DC (Mini Z 2.0 Survey - Subscale Scores)



of licensed acupuncturists practicing in DC reported Subscale 1 scores of 20+, indicating a **supportive work environment.** 

# of licensed acupuncturists practicing in DC reported Subscale 2 scores of 20+, indicating **reasonable pace and manageable EMR stress.**

\*Approximately 71.1 percent (54/76) of acupuncturists practicing in DC completed all questions in subscale 1. \*\*Approximately 67.1 percent (51/76) of acupuncturists practicing in DC completed all questions in subscale 2. \*\*\*Data suppressed for confidentiality when the total reported category is less than 10.



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### DC BOARD OF MEDICINE LICENSED ANESTHESIOLOGIST ASSISTANTS

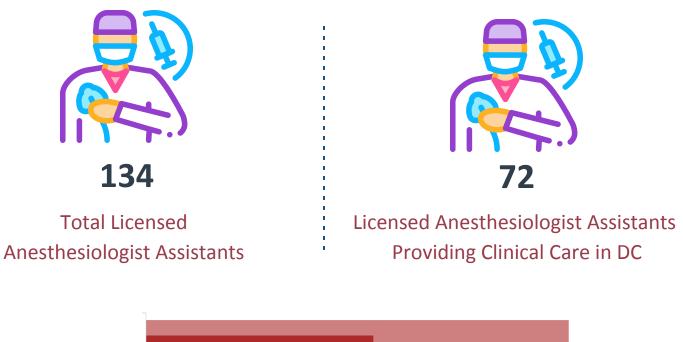
The District of Columbia's Health Regulations and Licensing Administration (HRLA) Board of Medicine (DC BOM) licenses all anesthesiologist assistants. HRLA and the Community Health Administration (CHA) partnered to develop a licensure survey to collect standard information across all licensing boards on demographics, workforce capacity, access to care, and special topics during the licensure renewal process. Data from the 2022 DC BOM Licensure Survey has been analyzed by the DC Primary Care Office (PCO), and reported in this fact sheet. Reported information is related to total licensed providers reflects all licensees (i.e., new and renewal applicants); reported information related to licensees providing clinical care in DC reflects only renewal applicants.

#### Key Findings

- Approximately 54 percent of DC licensed anesthesiologist assistants reported providing care in the District.
- Anesthesiologist assistants providing care in DC are primarily female (61%) and trend younger, with 83 percent 40 years of age and under.
- Most DC licensed anesthesiologist assistants reported experiencing no symptoms of burnout (33%) or some stress but not feeling burned out (48%).
- The majority of anesthesiologist assistants practicing in DC reported a supportive work environment, but many reported challenges with work pace and EMR stress. Organizational improvements in work pace and EMR stress may improve workforce wellness.





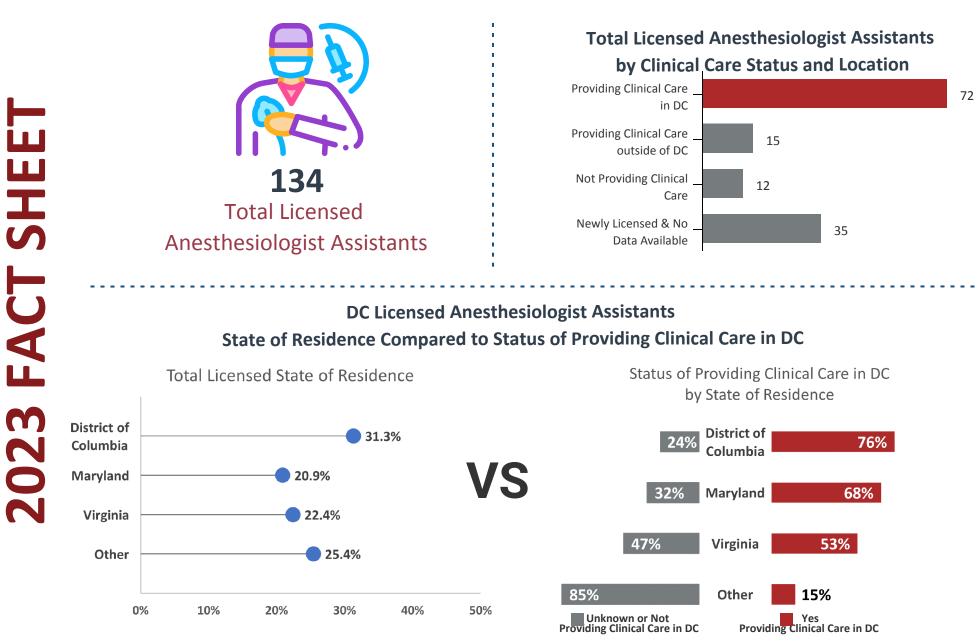


Anesthesiologist Assistant							134		
(	0 20	40	60	80	100	120	140	160	
		Anesthesiologist Assistant							
Providing Clinical Care in DC	72								
Total Licensed	134								

#### **Key Definitions**

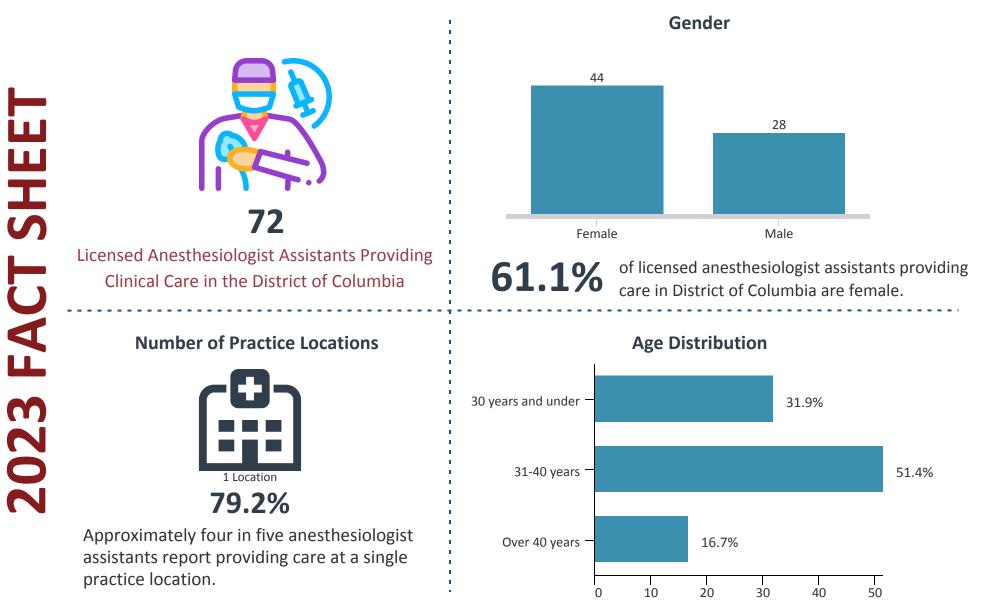
**Total Licensed** - Provider is licensed by the board and has an active license status. **Providing Clinical Care in DC** - Providers who reported a practice location in DC and offering medical care to patients.







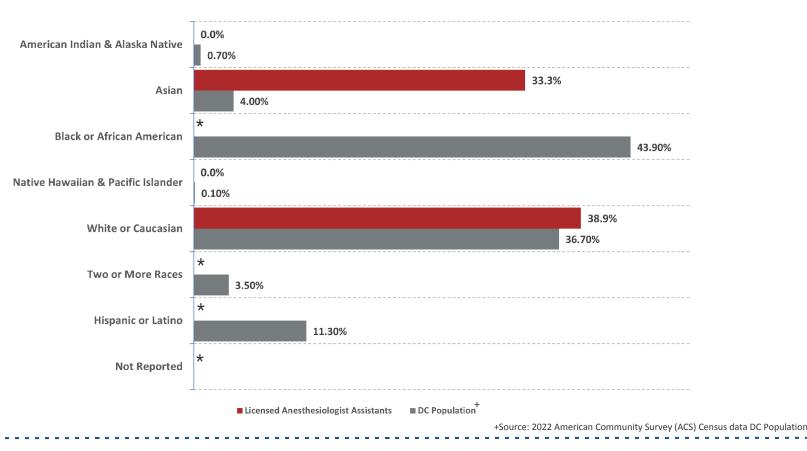
### LICENSED ANESTHESIOLOGIST ASSISTANTS PRACTICING IN DC





### LICENSED ANESTHESIOLOGIST ASSISTANTS PRACTICING IN DC

Race/Ethnicity - Licensed Anesthesiologist Assistants Practicing in DC vs DC Population





72.2%

of licensed anesthesiologist assistants practicing in the District of Columbia are non-Hispanic/Latino White/Caucasian (38.9%) or Asian (33.3%).



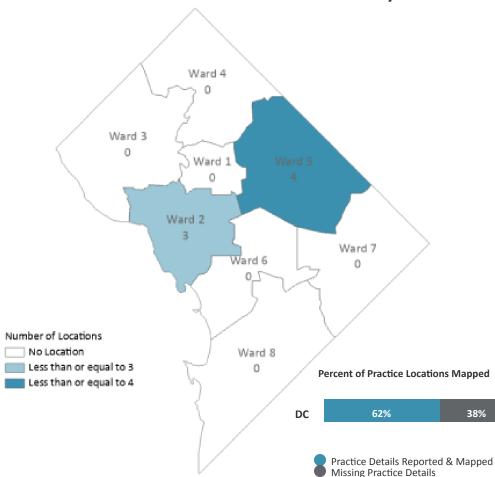
Prepared by the DC Primary Care Office Data Source: Health Regulation and Licensing Administration Board of Medicine Licensure Survey (2022). \*Data suppressed for confidentiality when the total reported category is less than 10.

### LICENSED ANESTHESIOLOGIST ASSISTANTS PRACTICING IN DC

**Overview of Clinical Care Practice Locations** 

Number of Clinical Care Practice Locations by Ward

**Clinical Care Practice Findings** 





of practice locations providing clinical care, that were reported and mapped, are located in Wards 2 & 5.

Projected Growth 0% of providers reported increasing their practice hours or adding a practice location over the next two years.



FACT SHEET

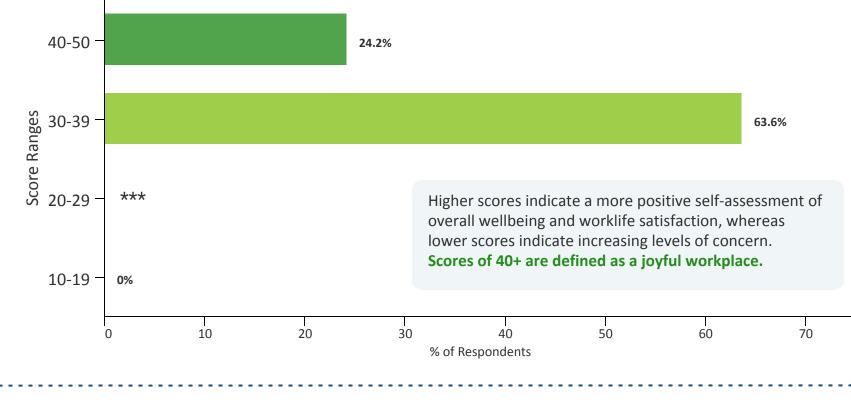
2023

Prepared by the DC Primary Care Office Data Source: Health Regulation and Licensing Administration Board of Medicine Licensure Survey (2022).

-Practice Locations are mapped with 80% fidelity -Missing details of the address could not be mapped

Data Limitations

Self-Assessment of Worklife and Wellness\* among Licensed Anesthesiologist Assistants Practicing in DC\*\* (Mini Z 2.0 Survey - Full Scale Scores)



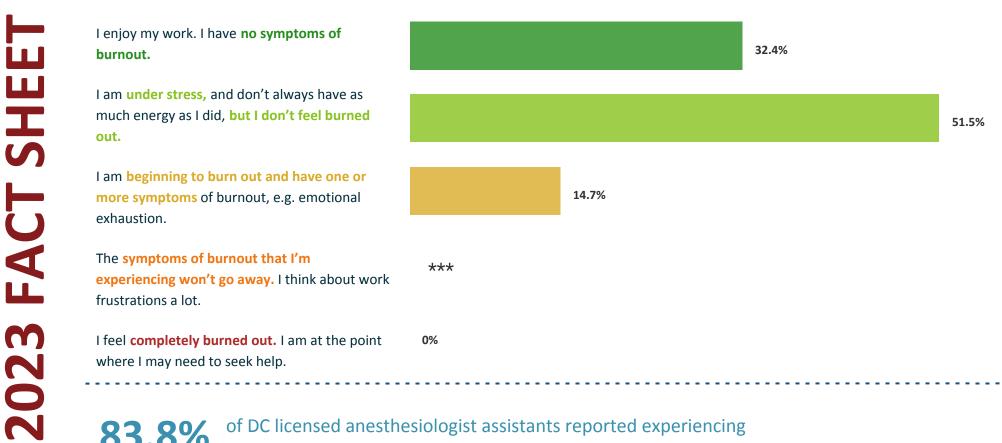
### **24.2%** of DC licensed anesthesiologist assistants reported Mini Z 2.0 full scale scores of 40+, indicating a **joyful workplace**.

\*The licensure survey includes the Mini Z 2.0, a 10-question tool assessing work satisfaction, stress, burnout, and 7 potential drivers of burnout in practicing clinicians; the Mini Z 2.0 is a psychometrically sound measure of worklife and wellness in practicing clinicians, validated externally against the Maslach Burnout Inventory (MBI). \*\*Answering each question was optional; full scale scores are reported only for respondents who completed all Mini Z 2.0 questions; approximately 91.7 percent (66/72) of DC licensed anesthesiologist assistants completed all questions on the Mini Z 2.0 survey.

\*\*\*Data suppressed for confidentiality when the total reported category is less than 10.



Self-Assessment of Burnout\* among Licensed Anesthesiologist Assistants Practicing in DC \*\* (Mini Z 2.0 Survey - Question 2 Responses)



#### 83.8% of DC licensed anesthesiologist assistants reported experiencing no symptoms of burnout (32.4%) or some stress but not feeling burned out (51.5%).

\*Assessment based on the Mini Z 2.0 burnout question; concurrent validity of the burnout question was assessed with the Maslach Burnout Inventory (MBI) emotional exhaustion (EE) subscale and determined to be a valid single-item measure of burnout.

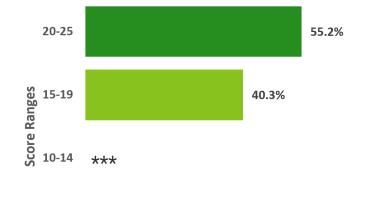
\*\*Approximately 94.4 percent (68/72) of DC licensed anesthesiologist assistants responded to the question.

\*\*\*Data suppressed for confidentiality when the total reported category is less than 10.



#### Self-Assessment of Worklife and Wellness among Licensed Anesthesiologist Assistants Practicing in DC (Mini Z 2.0 Survey - Subscale Scores)





5-9 0.00%

55.2%

of DC licensed anesthesiologist assistants reported Subscale 1 scores of 20+, indicating a **supportive work environment.** 

#### Subscale 2: Work Pace and EMR Stress\*\*

Includes questions on stress, chaos, home EMR use, documentation time pressure, and EMR frustration.



#### 88.1%

of DC licensed anesthesiologist assistants **did not** reported Subscale 2 scores of 20+, indicating **not having a reasonable pace and manageable EMR stress.** 

\*Approximately 93.1 percent (67/72) of DC licensed anesthesiologist assistants completed all questions in subscale 1.

\*\*Approximately 93.1 percent (67/72) of DC licensed anesthesiologist assistants completed all questions in subscale 2.

\*\*\*Data suppressed for confidentiality when the total reported category is less than 10.



### DC BOARD OF MEDICINE LICENSED NATUROPATH PHYSICIANS

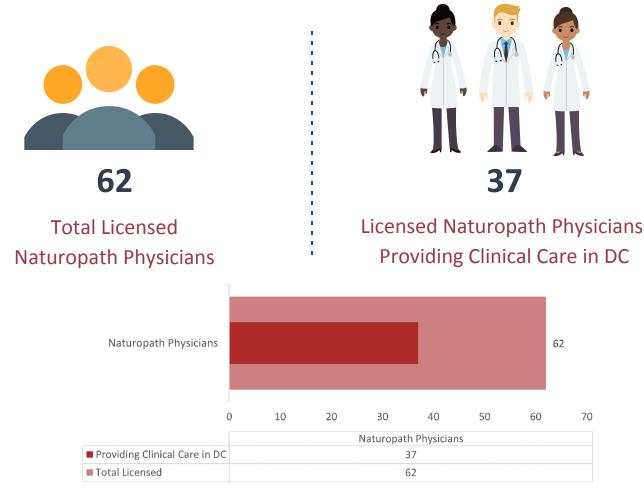
The District of Columbia's Health Regulations and Licensing Administration (HRLA) Board of Medicine (DC BOM) licenses all naturopath physicians. HRLA and the Community Health Administration (CHA) partnered to develop a licensure survey to collect standard information across all licensing boards on demographics, workforce capacity, access to care, and special topics during the licensure renewal process. Data from the 2022 DC BOM Licensure Survey has been analyzed by the DC Primary Care Office (PCO), and reported in this fact sheet. Reported information is related to total licensed providers reflects all licensees (i.e., new and renewal applicants); reported information related to licensees providing clinical care in DC reflects only renewal applicants.

#### **Key Findings**

- In DC there are 62 licensed naturopath physicians. Approximately, three out of five licensed providers are providing clinical care in DC, making up 60 percent of the licensed providers.
- More than eighty percent of naturopath physicians providing clinical care in DC are located in Wards 2 and 3. DC residents located outside of these wards will need to plan excess travel time to attain these services.
- The majority of naturopath physicians practicing in DC reported they had a supportive work environment with little to no challenges with their work pace and EMR stress. Organizational improvements in work pace and EMR stress may improve workforce wellness.



#### **DC LICENSED NATUROPATH PHYSICIANS**

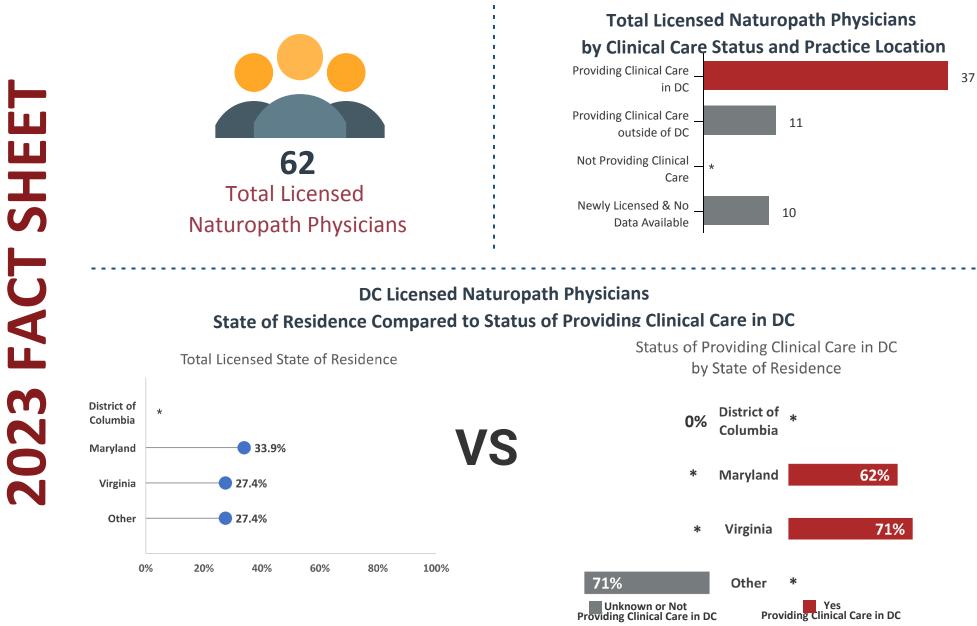


#### **Key Definitions**

**Total Licensed** - Provider is licensed by the board and has an active license status. **Providing Clinical Care in DC** - Providers who reported a practice location in DC and offering medical care to patients.



### **DC LICENSED NATUROPATH PHYSICIANS**

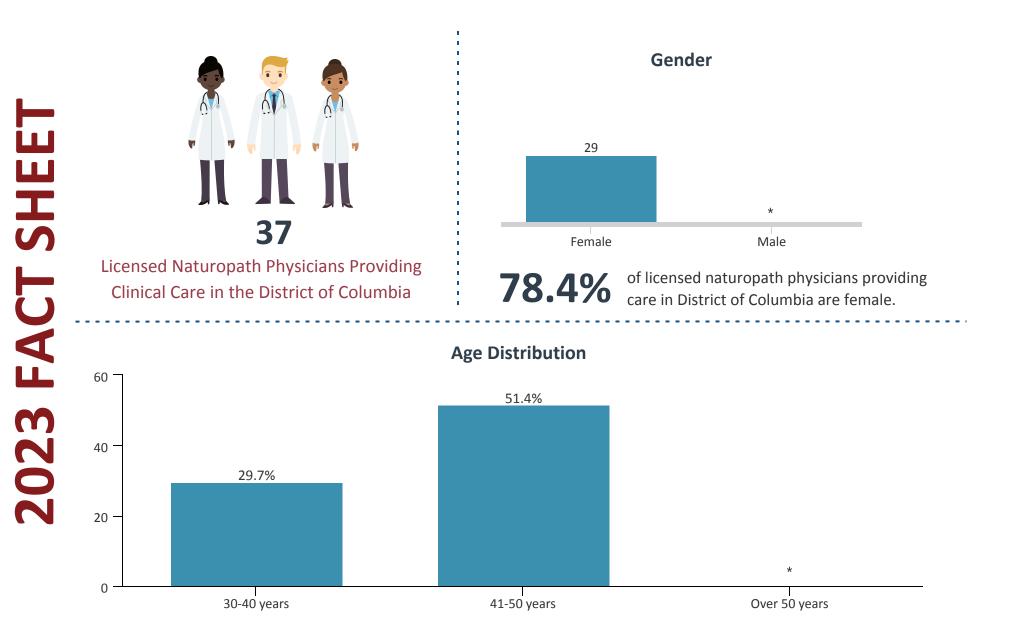




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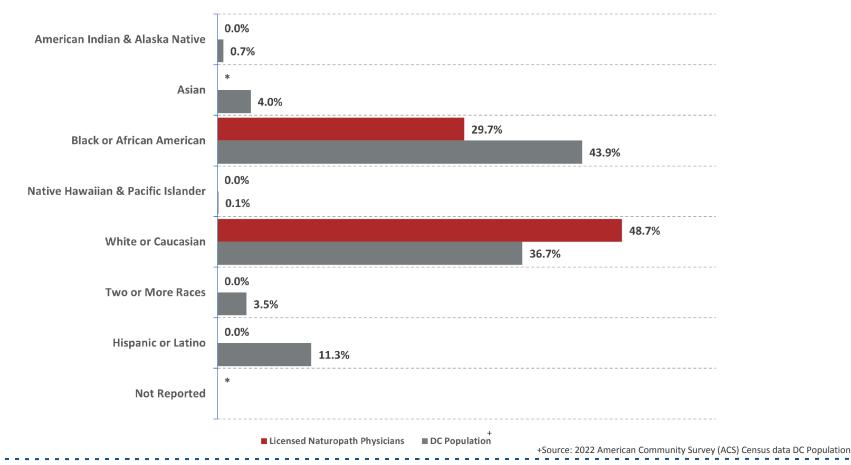
Prepared by the DC Primary Care Office

Data Source: Health Regulation and Licensing Administration Board of Medicine Licensure Survey (2022).  $^{st}$ Data suppressed for confidentiality when the total reported category is less than 10.





Prepared by the DC Primary Care Office Data Source: Health Regulation and Licensing Administration Board of Medicine Licensure Survey (2022). \*Data suppressed for confidentiality when the total reported category is less than 10.



#### **Race/Ethnicity - Licensed Naturopath Physicians Practicing in DC vs DC Population**

29.7%

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2023

of licensed naturopath physicians practicing in the District of Columbia are Black or African American. The racial/ethnic distribution of licensed naturopath physicians practicing in the District of Columbia is not relatively similar to that of the general population, with over-representations among White or Caucasian (+12.0%) Naturopath Physicians.



Prepared by the DC Primary Care Office

Data Source: Health Regulation and Licensing Administration Board of Medicine Licensure Survey (2022). \*Data suppressed for confidentiality when the total reported category is less than 10.

Percentage of Licensed Physicians Practicing in DC with Multiple Practice Locations

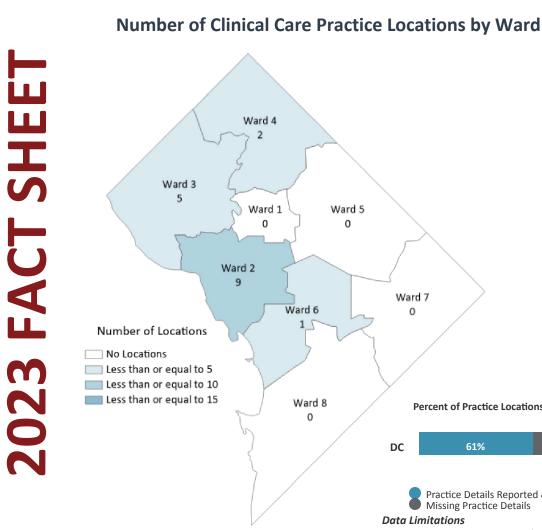




Approximately nine in ten naturopath physicians report providing care at a single practice location



Prepared by the DC Primary Care Office Data Source: Health Regulation and Licensing Administration Board of Medicine Licensure Survey (2022). \*Data suppressed for confidentiality when the total reported category is less than 10.



#### **Overview of Clinical Care Practice Locations**

Percent of Practice Locations Mapped

Practice Details Reported & Mapped

-Practice Locations are mapped with 99% fidelity -Missing details of the address could not be mapped

61%

Missing Practice Details

39%

**Clinical Care Practice Findings** 



82.4%

of practice locations providing clinical care, that were reported and mapped, are located in Wards 2 & 3.

**Projected Growth** of providers reported increasing their practice hours or adding a practice location over the next two years.



Prepared by the DC Primary Care Office Data Source: Health Regulation and Licensing Administration Board of Medicine Licensure Survey (2022).

Data Limitations

Ward 5

0

Ward 8

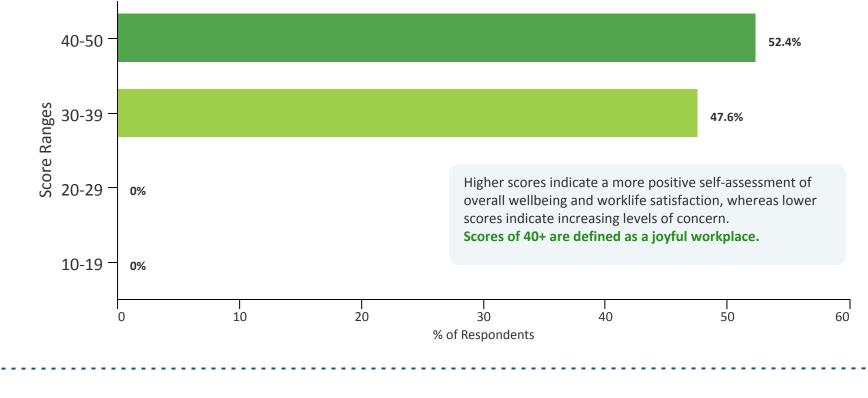
0

Ward 7

0

DC





# **52.4%** of licensed naturopath physicians practicing in the District reported Mini Z 2.0 full scale scores of 40+, indicating a **joyful workplace**.

\*The licensure survey includes the Mini Z 2.0, a 10-question tool assessing work satisfaction, stress, burnout, and 7 potential drivers of burnout in practicing clinicians; the Mini Z 2.0 is a psychometrically sound measure of worklife and wellness in practicing clinicians, validated externally against the Maslach Burnout Inventory (MBI). \*\*Answering each question was optional; full scale scores are reported only for respondents who completed all Mini Z 2.0 questions; approximately 56.8 percent (21/37) of licensed naturopath physicians practicing in DC completed all questions on the Mini Z 2.0 survey.

\*\*\*Data suppressed for confidentiality when the total reported category is less than 10.



Self-Assessment of Burnout\* among Licensed Naturopath Physicians Practicing in DC\*\* (Mini Z 2.0 Survey - Question 2 Responses)

l enjoy my work. I have <b>no symptoms of</b> burnout.	***	
I am under stress, and don't always have as much energy as I did, but I don't feel burned out.		
I am <b>beginning to burn out and have one or</b> more symptoms of burnout, e.g. emotional exhaustion.	***	
The <b>symptoms of burnout that I'm</b> <b>experiencing won't go away.</b> I think about work frustrations a lot.	0%	
I feel <b>completely burned out.</b> I am at the point where I may need to seek help.	0%	

# **38.0%** of licensed naturopath physicians practicing DC reported experiencing some stress but not feeling burned out (38.0%).

\*Assessment based on the Mini Z 2.0 burnout question; concurrent validity of the burnout question was assessed with the Maslach Burnout Inventory (MBI) emotional exhaustion (EE) subscale and determined to be a valid single-item measure of burnout.

\*\*Approximately 78.4 percent (29/37) of naturopath physicians practicing in DC responded to the question.

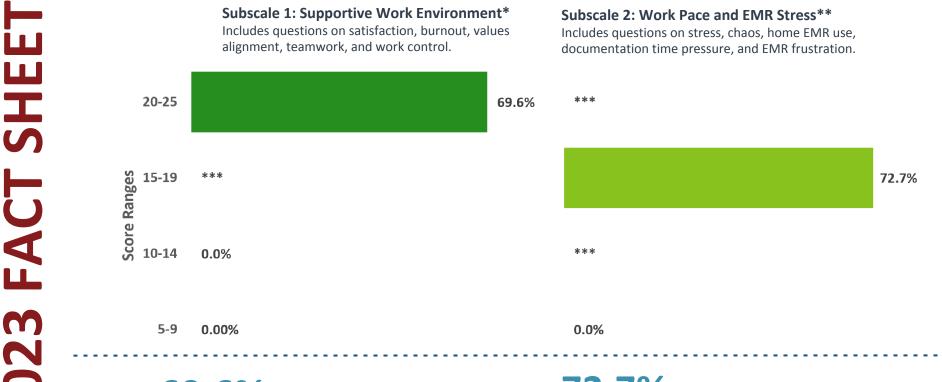
\*\*\*Data suppressed for confidentiality when the total reported category is less than 10.



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#### Self-Assessment of Worklife and Wellness among Licensed Naturopath Physicians Practicing in DC (Mini Z 2.0 Survey - Subscale Scores)



### **69.6%**

of licensed naturopath physicians practicing in DC reported Subscale 1 scores of 20+, indicating a supportive work environment.

#### 72.7%

of licensed naturopath physicians practicing in DC reported Subscale 2 scores of 15-19, indicating less than reasonable pace and manageable EMR stress.

\*Approximately 62.2 percent (23/37) of naturopath physicians practicing in DC completed all questions in subscale 1. \*\*Approximately 59.5 percent (22/37) of naturopath physicians practicing in DC completed all questions in subscale 2. \*\*\*Data suppressed for confidentiality when the total reported category is less than 10.



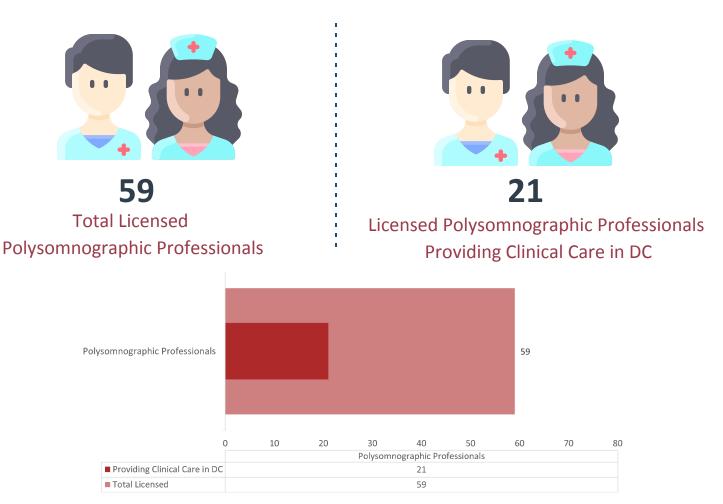
# DC Licensed Polysomnographic Professionals in

The District of Columbia's Health Regulations and Licensing Administration (HRLA) Board of Medicine (DC BOM) licenses polysomnographic technologists, technicians, and trainees. HRLA and the Community Health Administration (CHA) partnered to develop the Licensure Survey to collect standard information across all licensing boards on demographics, workforce capacity, access to care, and special topics during the licensure renewal process. Data from the 2022 DC BOM Licensure Survey has been analyzed by the DC Primary Care Office (PCO), and reported in this fact sheet. Reported information is related to total licensed providers reflects all licensees (i.e., new and renewal applicants); reported information related to licensees providing clinical care in DC reflects only renewal applicants.

#### **Key Findings**

- In DC there are 59 licensed polysomnographic professionals. Approximately, 36 percent of licensed providers are providing clinical care in DC.
- There is nearly equal representation of female and male polysomnographic professionals providing care in District of Columbia.
- Forty four percent of District of Columbia residents are Black/African-American compared to 57 percent of the polysomnographic workforce is Black/African-American.

### **DC LICENSED POLYSOMNOGRAPHIC PROFESSIONALS**

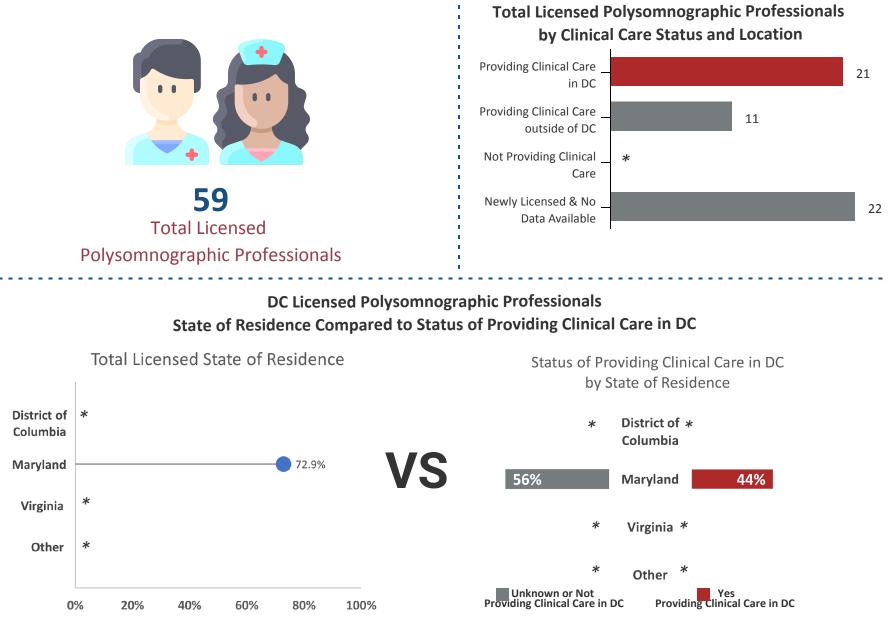


#### **Key Definitions**

**Total Licensed -** Provider is licensed by the board and has an active license status. **Providing Clinical Care in DC** - Providers who reported a practice location in DC and offering medical care to patients.



## DC LICENSED POLYSOMNOGRAPHIC PROFESSIONALS





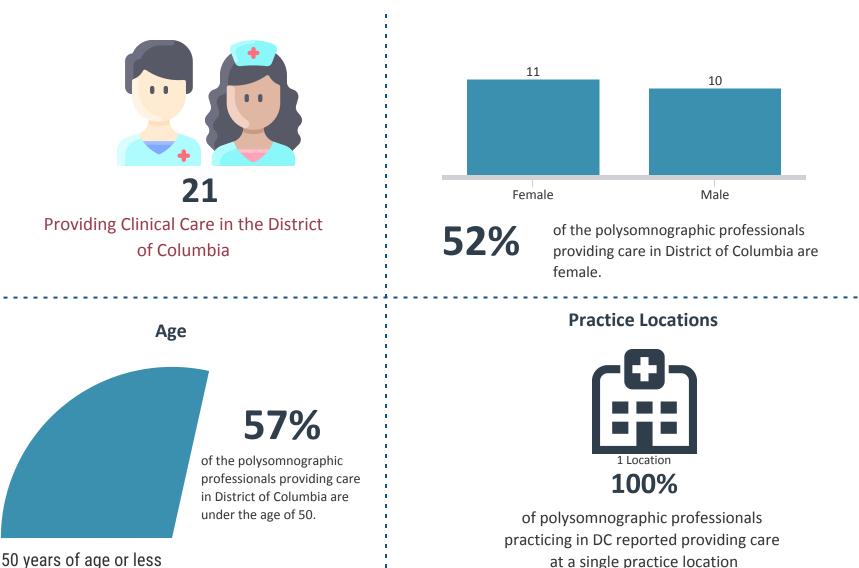


Prepared by the DC Primary Care Office

Data Source: Health Regulation and Licensing Administration Board of Social Work Licensure Survey (2022).

 $^{*}$ Data suppressed for confidentiality when the total reported category is less than 10.

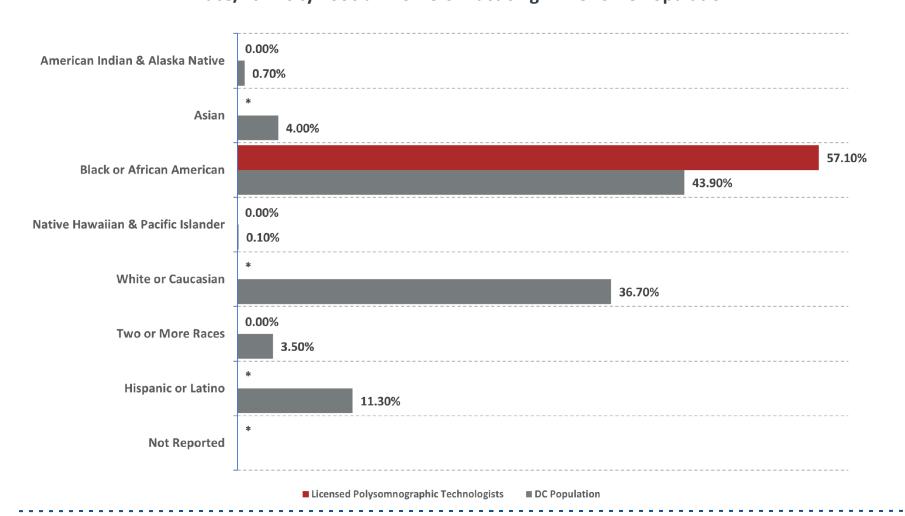
Gender





#### LICENSED POLYSOMNOGRAPHIC PROFESSIONALS

#### **PRACTICING IN DC** Race/Ethnicity - Social Workers Practicing in DC vs DC Population





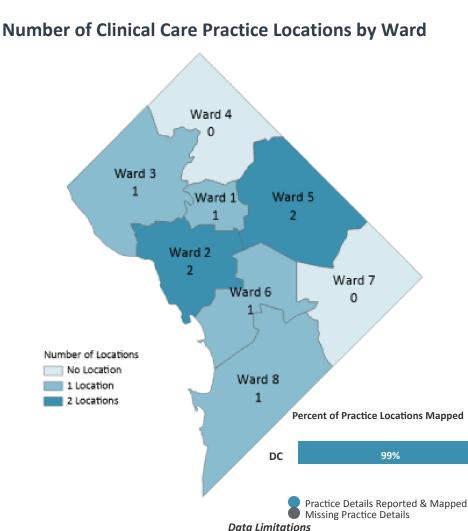
**57%** 

of the polysomnographic workforce in the District of Columbia are Black or African American. Forty four percent of District of Columbia residents are Black/African-American and 58% of the polysomnographic workforce is Black/African-American.



#### LICENSED POLYSOMNOGRAPHIC PROFESSIONALS

#### **PRACTICING IN DC** Overview of Clinical Care Practice Locations



-Practice Locations are mapped with 80% fidelity -Missing details of the address could not be mapped Clinical Care Practice Findings



of practice locations providing clinical care, that were reported and mapped, are hospitals.



location over the next two years. \* Data suppressed for confidentiality, when n is less than 10.



Self-Assessment of Worklife and Wellness\* among Licensed Polysomnographic Technologists **Practicing in DC\*\*** 

(Mini Z 2.0 Survey - Full Scale Scores) SHEET 40-50 -64.7% Score Ranges 30-39 Higher scores indicate a more positive self-assessment of 20-29 overall wellbeing and worklife satisfaction, whereas 0% lower scores indicate increasing levels of concern. Scores of 40+ are defined as a joyful workplace. 10-19 0% 10 20 30 40 50 60 70 0 80 % of Respondents

#### of licensed polysomnographic technologists practicing in the District reported Mini Z 64.7% 2.0 full scale scores of 40+, indicating a joyful workplace.

\*The licensure survey includes the Mini Z 2.0, a 10-question tool assessing work satisfaction, stress, burnout, and 7 potential drivers of burnout in practicing clinicians; the Mini Z 2.0 is a psychometrically sound measure of worklife and wellness in practicing clinicians, validated externally against the Maslach Burnout Inventory (MBI). \*\*Answering each question was optional; full scale scores are reported only for respondents who completed all Mini Z 2.0 questions; approximately 80.9 percent (17/21) of licensed polysomnographic technologists practicing in DC completed all questions on the Mini Z 2.0 survey.

\*\*\*Data suppressed for confidentiality when the total reported category is less than 10.



FACT

2022

Self-Assessment of Burnout<sup>\*</sup> among Licensed Polysomnographic Technologists Practicing in DC<sup>\*\*</sup> (Mini Z 2.0 Survey - Question 2 Responses)

	I enjoy my work. I have <b>no symptoms of burnout.</b>		78.95%
	I am under stress, and don't always have as much energy as I did, but I don't feel burned out.	***	
	I am <b>beginning to burn out and have one or</b> <b>more symptoms</b> of burnout, e.g. emotional exhaustion.	***	
	The symptoms of burnout that I'm experiencing won't go away. I think about work frustrations a lot.	***	
_	I feel <b>completely burned out.</b> I am at the point where I may need to seek help.	0%	

# **78.9%** of practicing DC polysomnographic technologists reported experiencing no symptoms of burnout.

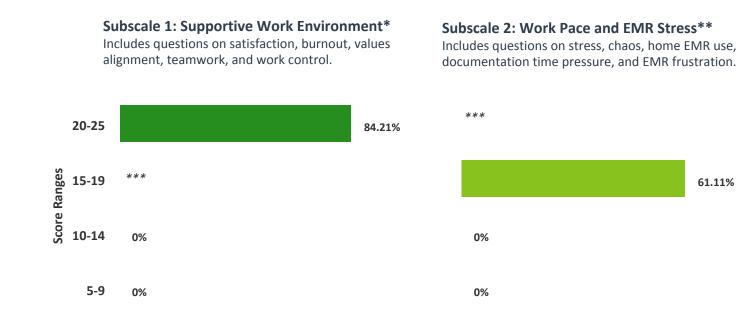
\*Assessment based on the Mini Z 2.0 burnout question; concurrent validity of the burnout question was assessed with the Maslach Burnout Inventory (MBI) emotional exhaustion (EE) subscale and determined to be a valid single-item measure of burnout.

\*\*Approximately 85.7 percent (19/21) of polysomnographic technologists practicing in DC responded to the question.

\*\*\*Data suppressed for confidentiality when the total reported category is less than 10.



Self-Assessment of Worklife and Wellness\* among Licensed Polysomnographic Technologists Practicing in DC\*\* (Mini Z 2.0 Survey - Subscale Scores)



#### 84.2%

of practicing DC polysomnographic technologists reported Subscale 1 scores of 20+, indicating a **supportive** work environment.

#### 61.1%

of practicing DC polysomnographic technologists reported Subscale 2 scores less than 20+, indicating not having a **reasonable pace and manageable EMR stress.** 

\*Approximately 90.5 percent (19/21) of polysomnographic technologists practicing in DC completed all questions in subscale 1.

\*\* Approximately 85.7 percent (18/21) of polysomnographic technologists practicing in DC completed all questions in subscale 2. \*\*\*Data suppressed for confidentiality when the total reported category is less than 10.



### DC BOARD OF MEDICINE LICENSED SURGICAL ASSISTANTS

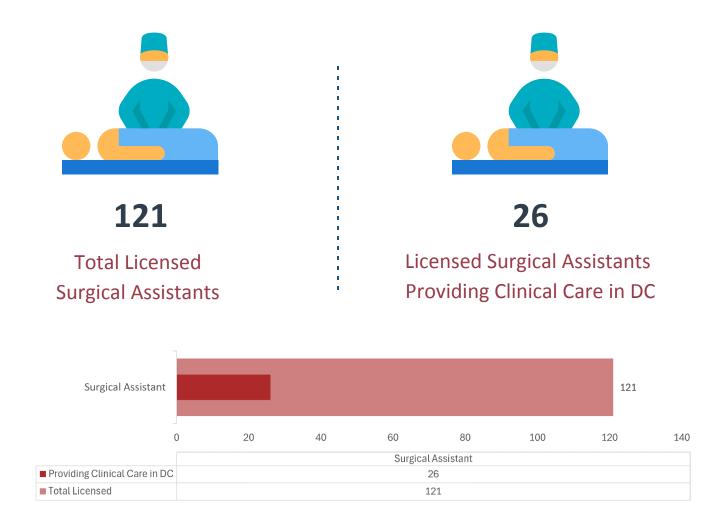
SHEET **2023 FACT**  The District of Columbia's Health Regulations and Licensing Administration (HRLA) Board of Medicine (DC BOM) licenses all surgical assistants. HRLA and the Community Health Administration (CHA) partnered to develop a licensure survey to collect standard information across all licensing boards on demographics, workforce capacity, access to care, and special topics during the licensure renewal process. Data from the 2022 DC BOM Licensure Survey has been analyzed by the DC Primary Care Office (PCO), and reported in this fact sheet. Reported information is related to total licensed providers reflects all licensees (i.e., new and renewal applicants); reported information related to licensees providing clinical care in DC reflects only renewal applicants.

#### **Key Findings**

- Approximately 21 percent of DC licensed surgical assistants reported providing care in the District.
- Surgical assistants providing care in DC are predominantly male (81%) and trend older, with 65 percent over 50 years of age.
- Most DC licensed surgical assistants reported experiencing no symptoms of burnout (60%) or some stress but not feeling burned out (10%).



#### **DC LICENSED SURGICAL ASSISTANTS**



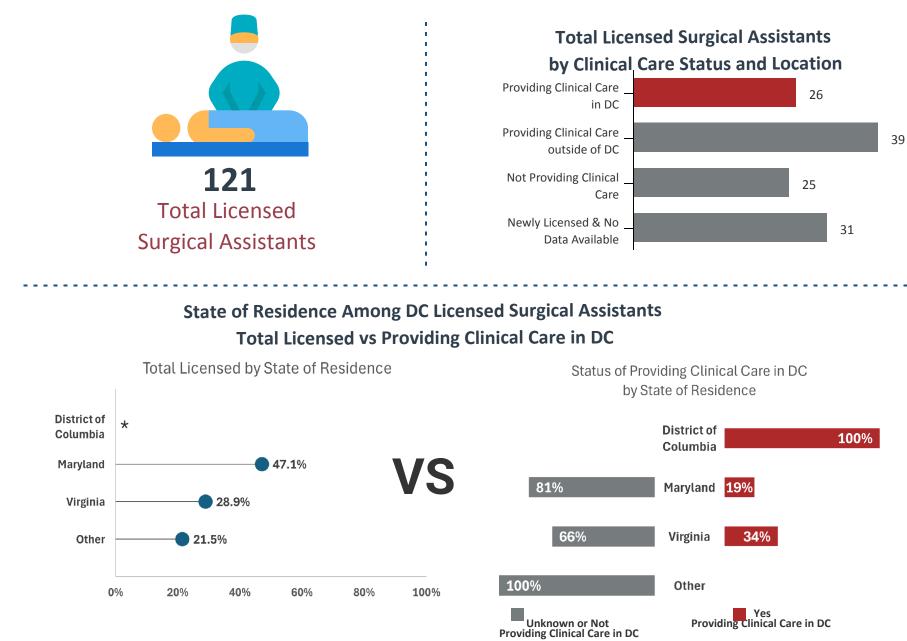
#### **Key Definitions**

**Total Licensed** - Provider is licensed by the board and has an active license status. **Providing Clinical Care in DC** - Providers who reported a practice location in DC and offering medical care to patients.



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Prepared by the DC Primary Care Office

Data Source: Health Regulation and Licensing Administration Board of Medicine Licensure Survey (2022).

 $^{st}$ Data suppressed for confidentiality when the total reported category is less than 10.

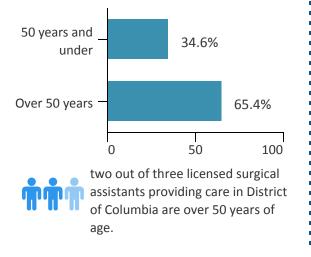
## LICENSED SURGICAL ASSISTANTS PRACTICING IN DC

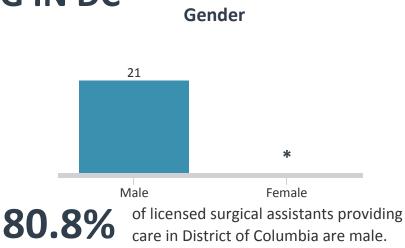


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Licensed Surgical Assistants Providing Clinical Care in the District of Columbia







#### Race and Ethnicity\*

Reported race/ethnicity among licensed surgical assistants providing care in DC was less than 10 for all reported categories. As a result, race and ethnicity is being suppressed. The reported race and ethnicity categories included:

- Asian
- Black or African American
- Hispanic or Latino
- White or Caucasian

#### **Practice Locations**





73.1%

\*

**73.1%** of acupuncturists practicing in DC reported providing care at a single practice location



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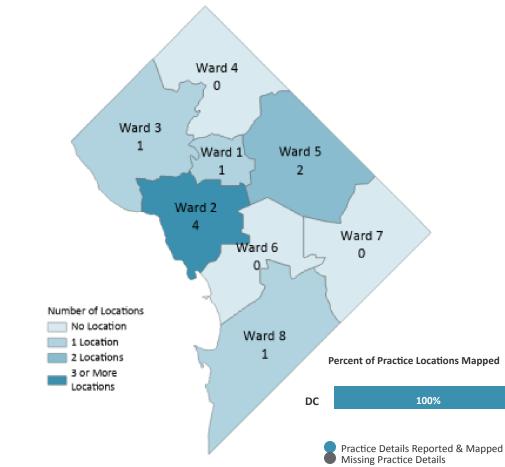
Data Source: Health Regulation and Licensing Administration Board of Medicine Licensure Survey (2022). \*Data suppressed for confidentiality when the total reported category is less than 10.

# LICENSED SURGICAL ASSISTANTS **PRACTICING IN DC**

**Overview of Clinical Care Practice Locations** 

#### Number of Clinical Care Practice Locations by Ward

**Clinical Care Practice Findings** 



#### Data Limitations

-Practice Locations are mapped with 80% fidelity -Missing details of the address could not be mapped

100%



44%

of practice locations providing clinical care, that were reported and mapped, are located in Ward 2.

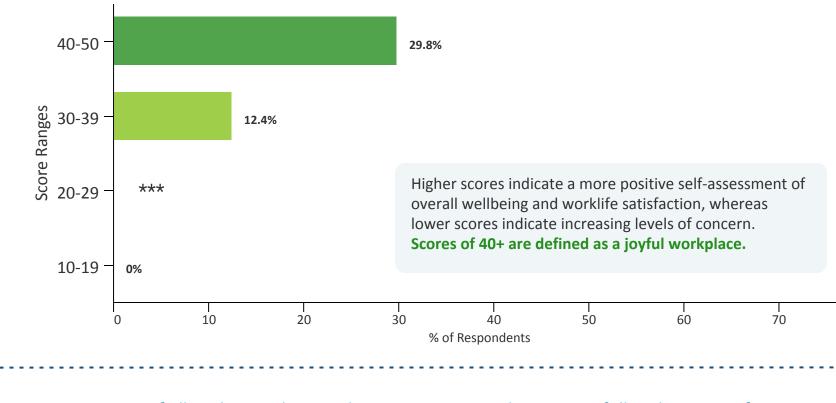
**Projected Growth** of providers reported increasing their practice hours or adding a practice location over the next two years.



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Self-Assessment of Worklife and Wellness\* among All DC Licensed Surgical Assistants\*\* (Mini Z 2.0 Survey - Full Scale Scores)



## **29.8%** of all DC licensed surgical assistants reported Mini Z 2.0 full scale scores of 40+, indicating a **joyful workplace**.

\*The licensure survey includes the Mini Z 2.0, a 10-question tool assessing work satisfaction, stress, burnout, and 7 potential drivers of burnout in practicing clinicians; the Mini Z 2.0 is a psychometrically sound measure of worklife and wellness in practicing clinicians, validated externally against the Maslach Burnout Inventory (MBI). \*\*Answering each question was optional; full scale scores are reported only for respondents who completed all Mini Z 2.0 questions; approximately 43.8 percent (53/121) of all DC licensed surgical assistants completed all questions on the Mini Z 2.0 survey.

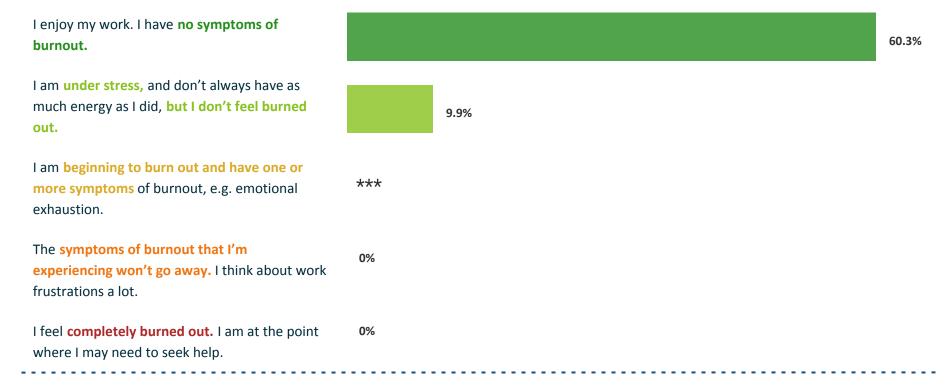
\*\*\*Data suppressed for confidentiality when the total reported category is less than 10.



FACT SHEET

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#### Self-Assessment of Burnout\* among All DC Licensed Surgical Assistants\*\* (Mini Z 2.0 Survey - Question 2 Responses)



# 70.2% of DC licensed surgical assistants reported experiencing no symptoms of burnout (90.3%) or some stress but not feeling burned out (9.9%).

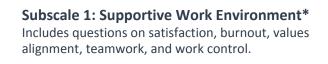
\*Assessment based on the Mini Z 2.0 burnout question; concurrent validity of the burnout question was assessed with the Maslach Burnout Inventory (MBI) emotional exhaustion (EE) subscale and determined to be a valid single-item measure of burnout.

\*\*Approximately 72.7 percent (88/121) of all DC licensed surgical assistants responded to the question.

\*\*\*Data suppressed for confidentiality when the total reported category is less than 10.

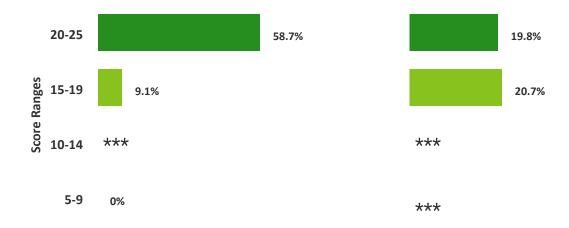


#### Self-Assessment of Worklife and Wellness among All DC Licensed Surgical Assistants (Mini Z 2.0 Survey - Subscale Scores)



Subscale 2: Work Pace and EMR Stress\*\*

Includes questions on stress, chaos, home EMR use, documentation time pressure, and EMR frustration.



**58.7%** 

of DC licensed surgical assistants reported Subscale 1 scores of 20+, indicating a supportive work environment.

### 43.4%

of DC licensed surgical assistants reported Subscale 2 scores of 20+, indicating **reasonable pace and manageable EMR stress.** 

\*Approximately 68.6 percent (83/121) of all DC licensed surgical assistants completed all questions in subscale 1. \*\*Approximately 44.6 percent (54/121) of all DC licensed surgical assistants completed all questions in subscale 2. \*\*\*Data suppressed for confidentiality when the total reported category is less than 10.



### DC BOARD OF MEDICINE LICENSED TRAUMA TECHNOLOGISTS

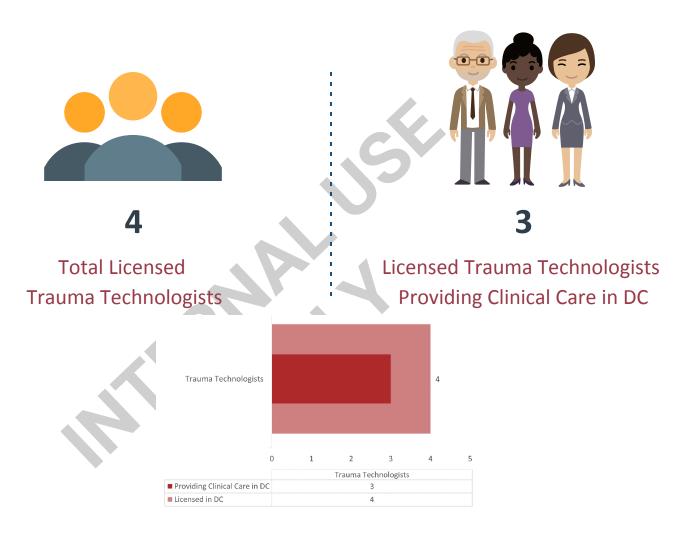
The District of Columbia's Health Regulations and Licensing Administration (HRLA) Board of Medicine (DC BOM) licenses all trauma technologists. HRLA and the Community Health Administration (CHA) partnered to develop a licensure survey to collect standard information across all licensing boards on demographics, workforce capacity, access to care, and special topics during the licensure renewal process. Data from the 2022 DC BOM Licensure Survey has been analyzed by the DC Primary Care Office (PCO), and reported in this fact sheet. Reported information is related to total licensed providers reflects all licensees (i.e., new and renewal applicants); reported information related to licensees providing clinical care in DC reflects only renewal applicants.

### **Key Findings**

- In DC there are 4 licensed trauma technologists. Approximately, 75 percent of licensed providers are providing clinical care in DC.
- One hundred percent of trauma technologists providing clinical care in DC are 50 years of age or older, which will have an impact on access to care as these individuals consider retirement over the next few years.
- The majority of trauma technologists practicing in DC reported they had a supportive work environment, but also reported challenges with their work pace and EMR stress. Organizational improvements in work pace and EMR stress may improve workforce wellness.



### **DC LICENSED TRAUMA TECHNOLOGISTS**

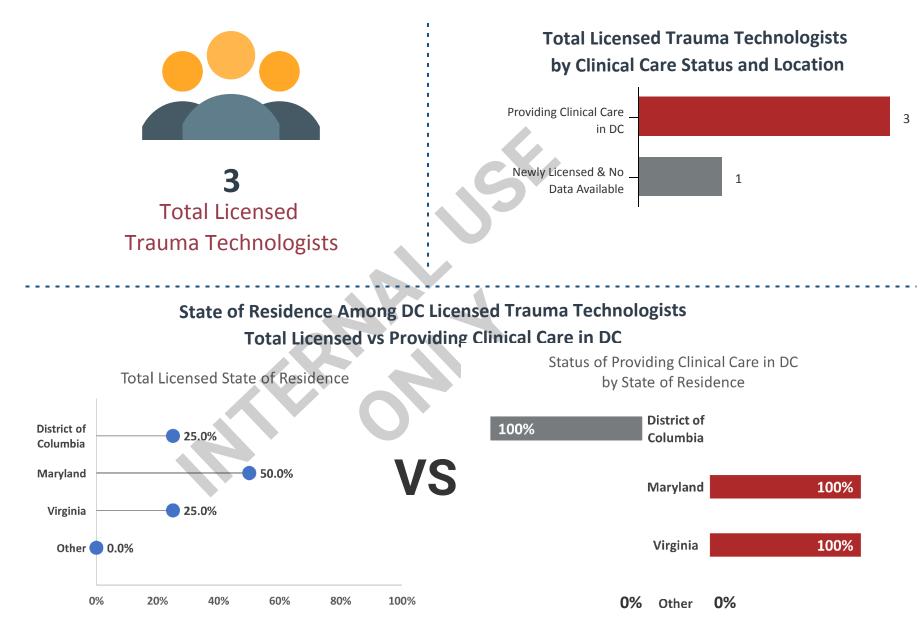


#### **Key Definitions**

**Total Licensed** - Provider is licensed by the board and has an active license status. **Providing Clinical Care in DC** - Providers who reported a practice location in DC and offering medical care to patients.

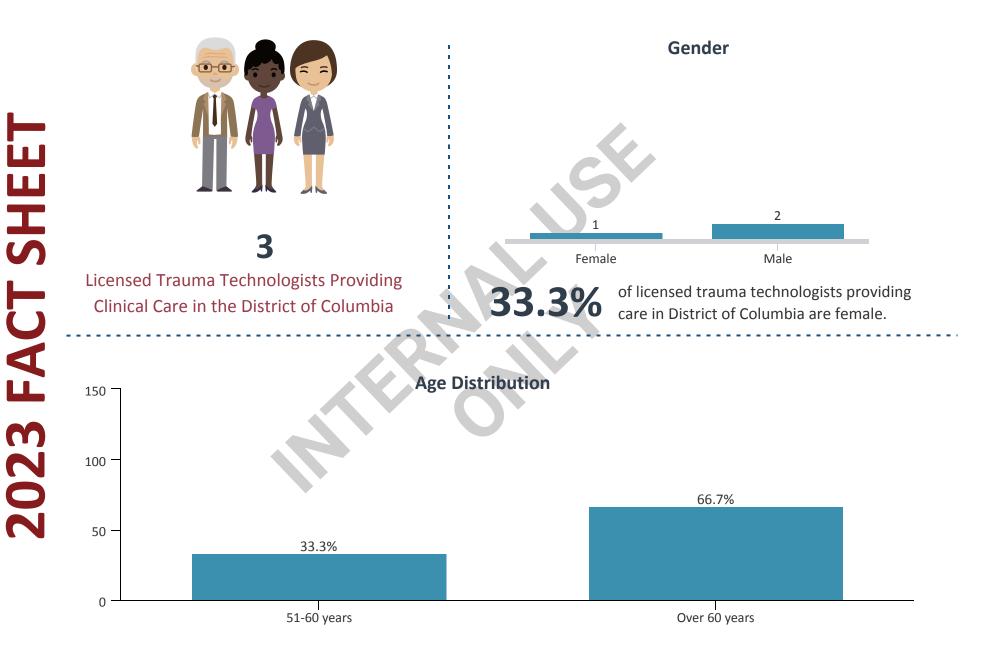


### **DC LICENSED TRAUMA TECHNOLOGISTS**

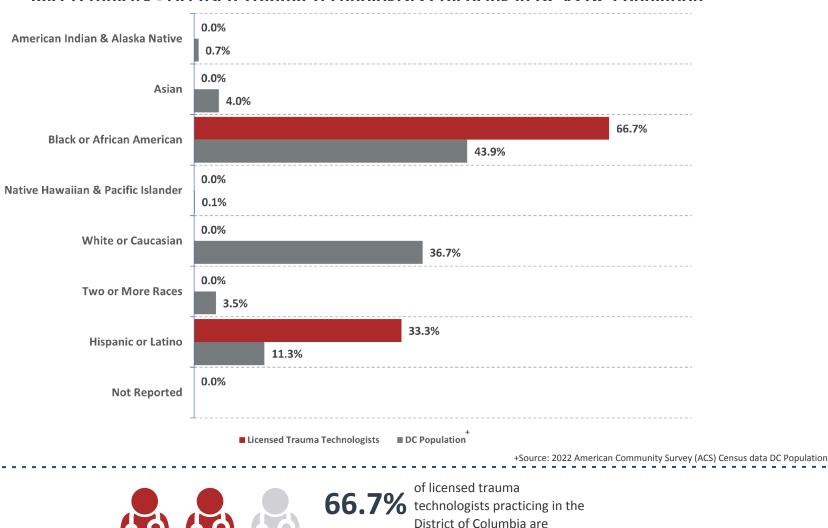












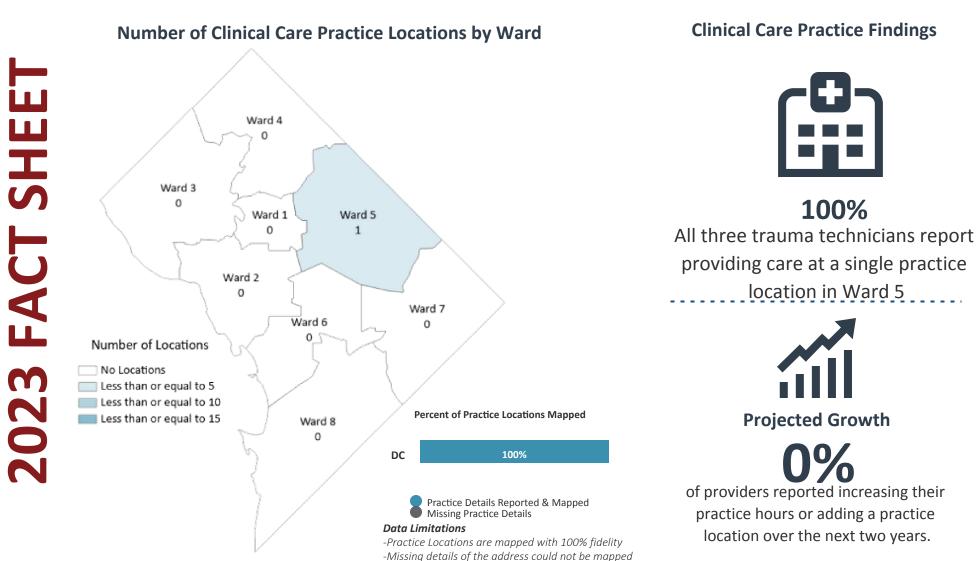
Black or African American.

#### Race/Fthnicity - Licensed Trauma Technologists Practicing in DC vs DC Ponulation



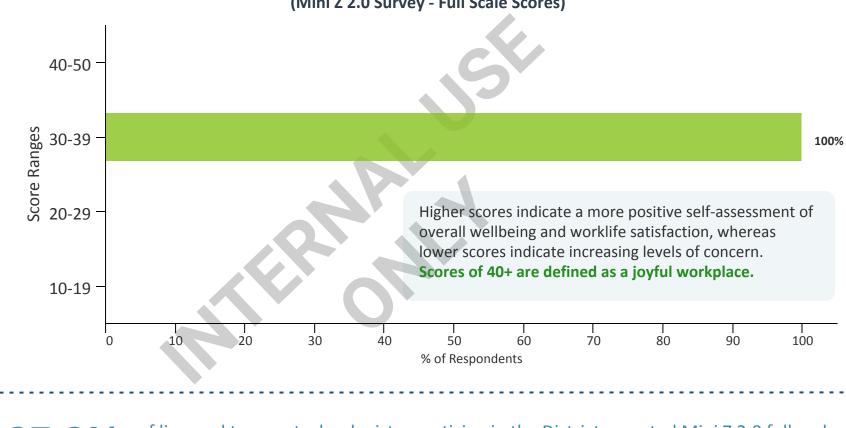
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**Overview of Clinical Care Practice Locations** 





Self-Assessment of Worklife and Wellness\* among Licensed Trauma Technologists Practicing in DC\*\* (Mini Z 2.0 Survey - Full Scale Scores)

### **37.9%** of licensed trauma technologists practicing in the District reported Mini Z 2.0 full scale scores of 40+, indicating a **joyful workplace**.

\*The licensure survey includes the Mini Z 2.0, a 10-question tool assessing work satisfaction, stress, burnout, and 7 potential drivers of burnout in practicing clinicians; the Mini Z 2.0 is a psychometrically sound measure of worklife and wellness in practicing clinicians, validated externally against the Maslach Burnout Inventory (MBI). \*\*Answering each question was optional; full scale scores are reported only for respondents who completed all Mini Z 2.0 questions; approximately 100 percent (3/3) of licensed trauma technologists practicing in DC completed all questions on the Mini Z 2.0 survey.

\*\*\*Data suppressed for confidentiality when the total reported category is less than 10.



#### Self-Assessment of Burnout\* among Licensed Trauma Technologists Practicing in DC\*\* (Mini Z 2.0 Survey - Question 2 Responses)



# 66.7% of licensed trauma technologists practicing DC reported experiencing no symptoms of burnout (33.3%) or some stress but not feeling burned out (33.3%).

\*Assessment based on the Mini Z 2.0 burnout question; concurrent validity of the burnout question was assessed with the Maslach Burnout Inventory (MBI) emotional exhaustion (EE) subscale and determined to be a valid single-item measure of burnout.

\*\*Approximately 100 percent (3/3) of trauma technologists practicing in DC responded to the question.

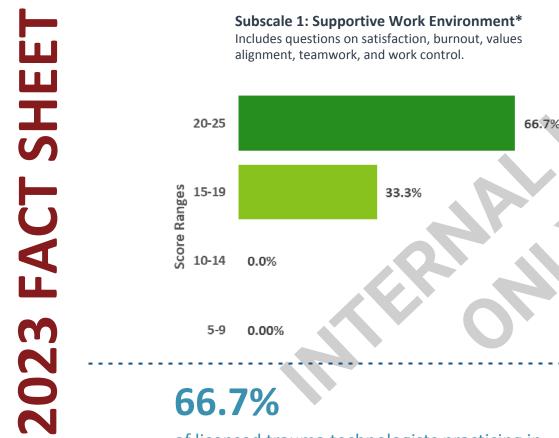
\*\*\*Data suppressed for confidentiality when the total reported category is less than 10.



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#### Self-Assessment of Worklife and Wellness among Licensed Trauma Technologists Practicing in DC (Mini Z 2.0 Survey - Subscale Scores)



of licensed trauma technologists practicing in DC reported Subscale 1 scores of 20+,

#### indicating a supportive work environment.

### 100%

0.0%

0.0%

of licensed trauma technologists practicing in DC reported Subscale 2 scores of 10-19, indicating less than **reasonable pace and manageable EMR stress.** 

Subscale 2: Work Pace and EMR Stress\*\*

Includes questions on stress, chaos, home EMR use,

documentation time pressure, and EMR frustration.

33.3%

66.7%

\*Approximately 100 percent (3/3) of trauma technologists practicing in DC completed all questions in subscale 1. \*\*Approximately 100 percent (3/3) of trauma technologists practicing in DC completed all questions in subscale 2. \*\*\*Data suppressed for confidentiality when the total reported category is less than 10.

