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School Safety Bill Signed into Law Includes WHA amendments protecting health care providers acting in good faith

On March 26, Gov. Scott Walker's School Safety Plan was signed into law as 2017 Act 143 (<u>https://docs.legis.wisconsin.gov/2017/related/acts/143.pdf</u>), which included key WHA-promoted amendments to a statute-based reporting obligation on health care professionals, first proposed by the Governor in mid-March.

WHA raised concerns that the bill as originally drafted was inconsistent with nationally recognized dutyto-warn and emergency detention standards, and left health care providers acting in good faith vulnerable to having their professional judgment second guessed by prosecutors and trial attorneys.

While Act 143 retains a statutory reporting obligation on health care professionals, key WHA changes to the bill included:

• Amending the reporting obligation consistent with current standards. The original bill language created an additional and vague reporting standard that would have required reporting of any threat of violence in a school even when a health care provider in her professional judgment did not believe an imminent danger existed. WHA was successful in changing the bill's language to require both a threat and a determination of a serious and imminent danger to school safety, which is consistent with duty-to-warn case law, HIPAA and imminent danger standards under Wisconsin's emergency detention statute.

Thus, in practice, because the bill as amended better aligns with existing standards, there should be little impact on providers' existing protocols when a health care provider perceives a serious and imminent danger to others. *(continued on page 3)*

The Other March Madness WHA-championed GME grant programs score results on resident Match Day

Wisconsin Hospital Association (WHA) and Wisconsin Council on Medical Education and Workforce (WCMEW) reports highlight current and impending physician workforce shortages.

"Wisconsin's aging physician workforce and aging patient population are creating challenges for the state's health care delivery system. Data shows Wisconsin needs between 2,000 and 4,000 additional physicians by 2035," according to Chuck Shabino, MD, WHA chief medical officer and WCMEW board chair. "We know that graduate medical education is a key factor in where physicians end up practicing, and funding GME is a successful model to recruit and retain physicians in Wisconsin."

Wisconsin has made significant progress expanding medical school class size at both The Medical College of Wisconsin (MCW), which has opened two new campuses, and the University of Wisconsin School of Medicine and Public Health (UWSMPH), which has gradually increased the class size of their program, the Wisconsin Academy of Rural Medicine (WARM), since its inception in 2007.

As Wisconsin medical schools increase enrollment to meet demand, and more medical students march toward physician practice, more residency positions are vital. Match Day, when graduates find out

Continued from page 1... The Other March Madness

their residency position, is a day that medical school seniors anxiously await. The big day for 2018 grads came March 16. The 2018 Match Day was the largest in National Resident Matching Program history. Nearly 370 graduates from MCW and UWSMPH were among the 37,103 graduates applying for positions nationally. All 370 Wisconsin graduates have been matched to residencies.

The percent of Wisconsin graduates entering residencies in primary care increased from 40 percent last year to 42 percent in 2018. This growth in Wisconsin primary residencies is not by chance. It is the result of WHA-championed graduate medical education (GME) grant programs administrated by the Department of Health Services creating new residency opportunities in Wisconsin. Wisconsin is on track to have almost 80 new medical residents by 2021 as a result of the WHA-backed program. The new residency positions have been focused on primary care, and in addition to family practice, internal medicine and pediatrics, include general surgery, psychiatry and rural medicine.

"We've struck the right path and it is shaping up to be a successful public-private model," said WHA President/CEO Eric Borgerding. "Now we need to build on this 'grow our own' approach to make sure Wisconsin has enough caregivers for our future."

Wisconsin graduates matching to Wisconsin residencies also increased from 2106 and 2017. Overall, 26 percent of MCW graduates matched to Wisconsin residencies. That percentage more than doubled, to 53 percent, for graduates of the MCW Green Bay program. Thirty-three percent of UWSMPH graduates will remain in Wisconsin. Over half of the graduates of UWSMPH's WARM program will be entering residency positions in-state.

Physicians from UWSMPH's WARM program score big with 89 percent practicing in Wisconsin upon completion of their residency training, validating WHA's "grow our own" approach.

"We know if a student growing up in Wisconsin attends a Wisconsin medical school and completes a residency here, there is an 86 percent chance a physician who specializes in primary care will practice in Wisconsin," Shabino said. "We call it the '86 percent equation,' and we have been focusing on each of the components from a public policy perspective. It's a textbook example of identifying a problem and then working with WHA members and physician leaders, and state agencies and elected officials to craft solutions."

David Olson, FACHE, Installed as ACHE Chair

David A. Olson, FACHE, chief strategy officer, Froedtert Health, Milwaukee, has assumed the office of chairman of the American College of Healthcare Executives. Olson was installed March 24 at the Council of Regents Meeting preceding ACHE's 61st Congress on Healthcare Leadership.

Olson received the gavel from ACHE's outgoing Chairman, Charles D. "Chuck" Stokes, FACHE, president/CEO, Memorial Hermann Health System, Houston. As chairman, Olson will serve the second part of a three-year term in ACHE's consecutive chairmanship offices: Chairman-Elect, Chairman and Immediate Past Chairman.



David Olson

Board certified in health care management as an ACHE Fellow, Olson served on the ACHE Board of Governors as governor from 2014 to 2017, and as the ACHE regent for Wisconsin from 2004 to 2007. In 2001, Olson was awarded ACHE's Robert S. Hudgens Memorial Award for Young Healthcare Executive of the Year. In addition to his service to ACHE, Olson served on the Wisconsin Hospital Association board of directors from 2003 to 2013, and in 2010 he served as the organization's chair.

For more information about Olson, visit www.ache.org/Leadership.

Continued from page 1... School Safety Bill Signed into Law

• Including civil and criminal immunities to protect against second-guessing of a professional's judgment. While the original bill language created immunities when a health care provider made a report to law enforcement, the bill provided no protections to health care providers that in good faith and in their professional judgment determined that a threat was not subject to report. WHA expressed concerns that this left health care providers vulnerable to second guessing by prosecutors and law enforcement.

After highlighting similar statutes in other states, WHA was successful in amending the final bill to include civil and criminal immunity for health care providers who in good faith and in his or her professional judgment conclude that a threat does not pose a serious and imminent threat to the health or safety of a student, school employee or the public.

The incorporation of these changes to the school safety legislation to minimize reporting burdens on health care professionals come on the heels of several WHA-championed mental health emergency reforms signed into law March 7 as 2017 Act 140 (see www.wha.org/wha-newsletter-3-9-2018. aspx#s1). A summary of those reforms is available in the WHA member portal, which can be accessed by clicking on the "WHA Members Only" icon on the www.wha.org website. In addition, a summary of sections 6, 20, and 23 of the School Safety Plan enacted as Act 143 that promulgates the health care professional reporting obligation in statute will be posted to the WHA member portal shortly.

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