1 2		WASHINGTON STATE MEDICAL ASSOCIATION HOUSE OF DELEGATES	
3 4 -		Resolution: ***	
5 6 7 8	Subject:	Improving healthcare staff and physician workforce in Washington – Directive to take action.	
9 10	Sponsored by:	Garrett Jeffery, DO, FAAFP	
11 12		TBD	
13		155	
14 15	Referred to:	Reference Committee ***	
16			
17 18 19	WHEREAS, Washington State has seen an increase in the number of legislative proposals to increase the scope of practice of non-physician healthcare providers; AND		
20 21 22	WHEREAS, medical staff and physician shortages have adversely affected healthcare organizations and clinics in their ability to effectively deliver services in an optimal and cost-efficient manner; AND WHEREAS, access to healthcare services is of an increased import during the COVID pandemic, MAY IT BE		
23 24 25			
26 27	DESOLVED a Dire	petiyo to Take Action that WSMA will actively engage on measures to increase	
28	RESOLVED, a Directive to Take Action that WSMA will actively engage on measures to increase the number of training opportunities for registered nurses, nursing assistants, and licensed practical		
29	nurses; AND BE IT		
30 31	DESOLVED that V	AZEMA will support the greation of new and/or maintenance of existing post	
32	RESOLVED, that WSMA will support the creation of new and/or maintenance of existing post graduate education sites as well as retention of said trainees in Washington State.		
	Fiscal Note: [staff will determine in consultation with authors]	
33 34 35		d citations to relevant resources that support the information, statistics, and/or n the whereas clauses]	
36			
37	EXISTING WSMA	POLICY:	
38	Education/	Fraining	
39 40	Education/Training The WSMA encourages and supports the training of more nursing personnel, with		
41	appropriate remuneration. The WSMA endorses state rather than federal licensing of all health care practitioners. The WSMA believes that the education and training of nursing personnel be under the supervision of nurses, in consultation with other health care		
42			
43			
44 45	professionals	s where appropriate. (Res 14, D-88) (Reaffirmed A-17)	
45 46	Cause of De	eath Certification	
47		affirms the responsibility of its members and all physicians to provide accurate,	
48		ication of cause of death for patients who have been under their care, and	
Sensitivit 4/9 Gei	nerai Busine sisppærts dev	edopment contraining programs and contanding medical reducations programs to	

50	promote the skills necessary to perform accurate cause of death certifications. (Res B-5, A-
51	03) (Reaffirmed A-17)
52	
53	Improving Obstetric Care in Rural Communities
54	The WSMA support the creation and/or maintenance of surgical training programs for rural
55	obstetrics providers, including continuing education through hospital partnerships, and rural
56	family medicine residency programs. (B-6, A-20)
57	
58	The WSMA support the formation of new obstetric fellowships, and expansion of current
59	obstetric fellowships in Washington State (B-6, A-20)
60	
61	Rural Health Care
62	The WSMA support the creation and/or maintenance of surgical training programs for rural
63	obstetrics providers, including continuing education through hospital partnerships, and rural
64	family medicine residency programs. (B-6, A-20)
65	
66	Diversity and Inclusion in the Field of Medicine in Washington State
67	The WSMA support efforts to enhance diversity in the physician workforce, including
68	engaging in broad-based efforts that involve a wide array of partners both within and outside
69	the medical profession. This includes advocating for funding to support the following: (a)
70	Pipeline/pathway programs to prepare and motivate members of underrepresented groups to
71	enter medical school; (b) Diversity or minority affairs offices at medical schools; (c)
72	Financial aid programs for students from groups that are underrepresented in medicine; and
73	(d) Financial support programs to recruit and develop faculty members from
74	underrepresented groups. (B-8, A-20)