

WASHINGTON: REPORT CARD TALKING POINTS

OVERALL GRADE: D+
#35 IN THE NATION

Category:	Grade:	National Rank:
Access To Emergency Care	F	37
Quality & Patient Safety Environment	B	8
Medical Liability Environment	F	42
Public Health & Injury Prevention	A-	5
Disaster Preparedness	F	50

- Since 2009, the last time ACEP issued a Report Card, Washington declined from 19th place to 35th, principally because of failing grades in three categories out of five.
- Washington's lack of hospital resources and inpatient capacity for mental health patients are major contributors to its failing grade for Access to Emergency Care.
- Washington lacks even basic liability protections for physicians who provide federally mandated care in emergency departments, often to high-risk patients in life-threatening situations where little is known about the patients' medical histories.
- Expanding Washington's hospital infrastructure – specifically its bed surge capacity and intensive care unit capacity – would increase access to emergency care for the state's residents and improve its Disaster Preparedness grade.

Access to Emergency Care

Talking point: The best medicine in the world can't help you if you can't get to it.

Data points: 1. Washington ranks third worst in the country for the number of psychiatric care beds, leaving psychiatric patients potentially stranded in emergency departments waiting for a bed. 2. Only 83.2 percent of Washington's residents live within 60 minutes of a level I or II trauma center. 3. Washington has some of the lowest levels of staffed inpatient and intensive care unit beds in the country.

- Solution: Washington policymakers must make greater investment in hospital infrastructure, particularly in the area of hospital beds, a top priority in order to expand access to emergency care.

Medical Liability Environment

Talking point: Without meaningful medical liability reform, Washington's medical care providers are increasingly vulnerable to unfounded lawsuits that may deter specialists from taking call in the state's emergency departments.

Data point: Washington does not provide for case certification or pretrial screening panels, both of which can weed out frivolous or unsubstantiated lawsuits.

- Solution: Washington’s policymakers must provide basic liability protections to physicians who provide care in emergency departments as required by federal law.

Disaster Preparedness

Talking point: Policymakers must focus on raising Washington’s disaster preparedness efforts to the gold standard set by Boston after the Marathon bombing.

Data points: 1. Washington’s per capita federal disaster preparedness funds fell sharply since 2009 to \$5.31 per person, significantly below the national average of \$9.52. 2. Washington lacks a budget line item for disaster preparedness funding specific for health care surge. 3. Washington has some of the lowest rates of physicians, nurses and behavioral health professionals registered in the Emergency System for Advance Registration of Volunteer Health Professionals (ESAR-VHP).

- Solution: In addition to increasing disaster preparedness funding, Washington must encourage more medical professionals to register in the ESAR-VHP.